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## Arab Women: A Profile of Diversity and Change

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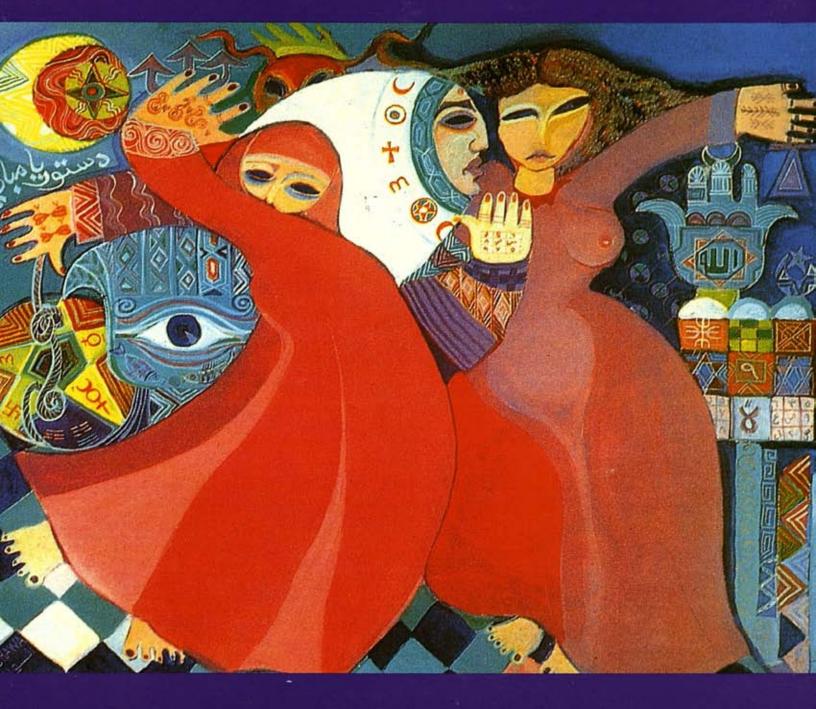
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# **Arab Women** A Profile of Diversity & Change



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ARAB WOMEN:

A PROFICE OF DIVERSITY AND CHANGE

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The Population Council 1994

#### Front cover art

Leila Shawa "The Zar" Acrylic on board 24" x 21" Courtesy of International Council of Women in the Arts (ICWA)

Graphics Sendbad Sadek

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The views expressed in this report are those of the editor and the authors and do not represent positions of the Population Council or its supporting organizations. Decisions to include or exclude topics and data were made by the editor who is solely responsible for any errors.

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## About this report

The status of Arab women is the subject of much speculation, generalization and stereotyping by those inside as well as outside the region. The paucity of objective, accessible information, makes Arab women one of the least understood social groups in this era of the "information revolution". Internationally, Arab women are too often cast within a stereotype as the most severely oppressed women in any present-day society. Within Arab countries, the lived reality is that of societies undergoing rapid social and economic change, and women's status is affected by those changes just as in other societies. The simple truth is that there is no single "status" in which the Arab women lives. Women's lives in this region differ according to their geographical location, social class, ethnic identity, their individual abilities and the political and legal systems under. which they live.

A major cause for perceiving Arab women as a single entity is no doubt the predominance of Islam in the region, which is presumed to unify women in a common religious identity. It is true that Islam is the religion of the majority and its cultural influence is strong. But Arab countries have sizeable communities of other religious groups, a fact not widely known, even in parts of the region. In the summer of 1993, a Christian family from a mixed Sudanese-Egyptian descent was eating ice cream in one of Cairo's big hotels. The playful four year old girl caught the attention of a pleasant Arab man, dressed in modern clothes, and they started to talk. When he heard her name, which was unmistakably Christian, he was genuinely surprised. He asked how can the family be Arabs- since they were fluent in the language- and not be Muslims. They smiled and informed the Saudi man that there are millions of non-Muslim Arabs in both Egypt and Sudan.

Still the fact remains that, in most Arab countries, Islam is the religious tradition which determines social and cultural norms, and most legal systems derive their principles from Islam. But beneath that surface unity is a more complex reality. A growing literature of social, anthropological and legal studies show that Islam is interpreted very differently in different countries and by different social groups, both formally within the legal system and informally in cultural norms. The comparative legal analysis in this publication confirms these observations. Although religion is a major influence on social behavior it is not the only factor that determines social outcomes for women. As in all other societies, the lives of Arab women are influenced by a host of other variables. Old values mix with new aspirations and opportunities; poverty contrasts sharply with wealth; rural living may be centuries removed from urban life; generations overlap and clash in their beliefs; and different political agendas are played out in people's daily life.

This slim publication does not attempt to deal with all these factors. Our aim is to help, in a small way, to correct some of the misconceptions about Arab women by introducing systematic information for 21 Arab countries. Widely published international statistical data, mostly from the United Nations and the World Bank, were used for the comparisons. These data sets are compiled from country reports, national surveys and aggregated smaller studies. They are by no means comprehensive or devoid of inaccuracies, however they remain the best available information at this time. The paucity of information on Arab countries in general, and Arab women in particular, made the task a challenge, and considerable determination and finesse were required in some instances. Further data collection must become a constant and collective effort at national, regional and international levels.

Reporting on statistical data is one way of reflecting on social reality, but is not necessarily the only or most useful way. For statistical comparisons to be meaningful, national level data is employed, which inevitably limits the number of variables or indicators that can be measured. It also masks diversity within countries. Still, using fewer indicators to cover the majority of the countries of the region is preferable to making comparisons on a wider range of issues on the basis of partial coverage of the population.

The decision to include data on women in Arab countries and not the wider Middle East was deliberate. Arab countries perceive themselves as a distinct entity bound together by a language, history, and cultural heritage. The more commonly used regional grouping of the "Middle East" usually includes Iran, Turkey and Israel, and often excludes countries such as Sudan with a majority Arabic-speaking population. The world is missing an important clue to understanding Arab societies if it does not acknowledge their self identity as Arabs. Turkey and Israel see themselves, much of the time, as belonging to Europe. Modern-day Iran is politically isolated from most Arab countries. Psychologically and culturally, the Arabs do not identify themselves as sharing the same identity with the Persians.

But not all Arabic speaking people are ethnically Arabs. And just because a country is officially recognized as an Arab state does not necessarily mean that the majority of the population are ethnic Arabs or speak Arabic. In Somalia and Mauritania, for example, the majority of the population does not speak Arabic but both countries have opted to join the League of Arab States (LAS). These complications of modern nation-state boundaries should not deflect the recognition of the broad cohesiveness of an Arab identity in the region. The 21 countries included in this publication constitute membership of the League of Arab States. The 21 countries included in this publication constitute the membership of the LAS. They are Algeria, Bahrain, Djibouti, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Mauritania, Morocco, Oman, Palestine, Qatar, Saudi Arabia, Somalia, Sudan, Syria, Tunisia, United Arab Emirates and Yemen.' The signing of the "Israeli-Palestinian Autonomy" agreement on May 5th is, hopefully, the first step to the resolution of a very important issue for Arab countries; that of an independent Palestine. For obvious reasons, no data on Palestinians living in Gaza and the West Bank is available yet." Palestine was included in the tabulations of this report to affirm the importance of including information on Palestinian women in regional and international statistics in the future. The prolonged civil war in Lebanon had disrupted the generation of information in that country and no up-to-date statistics were found in the current literature. Data on Djibouti was sparce for reasons unclear to the researchers.

The legal comparisons provide a new way of raising women's awareness of their legal rights compared to those of women in other Arab countries. For the purpose of clear understanding, a certain degree of simplification of complex legal text was made, and in the process some context may have been lost, causing concern among some legal experts. Care was taken by the research team to ensure that the essence of each law's meaning was preserved. We hope that the benefit of wider legal literacy will outweigh any perceived damage to the sanctity of the text. We also hope that the deficiencies in this first effort will not only draw suggestions and corrections, but will also motivate further action to generate more comprehensive information in the future.

By focusing on the Arab countries, it is hoped that this source book will be used by people in the region, particularly women, as a tool in their advocacy for change. By reporting, in a clear and easily accessible way on the comparative status of women's health, education and employment it is hoped that objective information will add power to the efforts to raise women's social, economic and political status in the region.

Through studying the facts and comparing the statistics and the laws in this work, three overall conclusions can be made with certainty. First, that under the umbrella of the identity of women in this region as "Arabs" there is in fact a diversity of peoples and subcultures. Second, that in all the countries reviewed, just as in other societies in the world, women's status is in a constant state of change. Third, that while Islam is the common reference point for the legal systems in Arab countries, its interpretation is subject to wide variation depending on local historical and political circumstances.

> Nahid Toubia, Cairo, August 1994

\* Recently the Comoro Islands, a group of small islands on the west coast of Africa, joined the League of Arab States . They were not included in these statistics since no data is available on them as an independent state.

<sup>&</sup>quot; The population of Palestine quoted here is from "Palestinian Society of Gaza, the West Bank and Arab Jerusalem: A Survey of Living Conditions", by Marianne Heiberg, Geirolvensen, FAFO report # 151, Oslo, 1993. This does not include the large numbers of Palestinians living in the diaspora, in Lebanon, Jordan and other Arab countries and as immigrants in other countries.





# Background information on Arab Countries

#### Algeria (AL Jaza'ir)

The Land and t	he Peop	le	
Population:	25.7m	1991 (WDR) 🚺	5
Area:	2,381,7	40 sq km 🕺	1
Capital:	Algiers		2
Major Cities:	Constan Anaba	ntine,	
Languages:		is official 🖌 ge , French	
	widely	used, Berber	in some areas
Ethnic groups:	Majority	y Arabs, 17% I	Berber
Religion:	Islam		
The Economy			
Per Capita GNP	1991:	\$ 1,980 (WD	R)
Government			
Independence:		1962	

The state is headed by a Higher Council of State. Executive authority is the Council of Ministers headed by the prime minister, who is appointed by the Higher Council. The formation of political parties has been permitted since 1989. The outcome of the general elections in 1992 were cancelled leading to widespread civil conflict.

#### Bahrain (Al Bahrain)

un ani)		
he Peop	ble	-
680 sq	l kn	
Manan	na	
Arabic	is the official language	
Natives are from Arab, Iranian and		
		ni-
		eas
1991:	\$ 7,130 (WDR)	
	1971	
	he Peop 0.5m 1 (WDR 680 sq Manar Arabic Native Indian grants Majori Shiites	Indian origins. Large number of imm grants mostly Pakistani. Majority Sunni Muslims in urban are Shiites in rural areas

Monarchy ruled by an Amir appointed by the Cabinet of hereditary leaders. There are no political parties.

#### Djibouti (Jibouti)

Diporti Oipo	uu)
The Land and t	he People
Population:	452,000 1991 (WDR)
Area:	23,200 sq km
Capital:	Djibouti
Languages:	French is official language, Arabic for religious purposes, Afar and Isa (Somali)
Ethnic groups:	Two major ethnic groups; the Afar and the Issa
Religions:	Majority Muslims, small Christian minority
The Economy	,
	1001 01 010

Per Capita GNP 1991: \$1,210 (State of the World Children, UNICEF, 1994) Government

#### Independence: 1977

A one party state, headed by an elected president currently, Hassan Gouled, who is also the head of government. The president appoints the prime minister and the ministers. The legislature is the Chamber of Deputies. The unicameral parliament is directly elected from a single list.



#### Egypt (Misr)

-S/Pr (mass)	
The Land and t	he People 🛛 🧹
Population:	53.6m 1991
	(WDR)
Area:	1,001,450
	sq km
Capital:	Cairo
Major Cities:	Alexandria, Assiut
	Suez, Port Said
Languages:	Arabic is official la
Ethnic groups:	Majority Arab, Nu
Religions:	Majority Muslims,
	minority (mostly (



t, Giza, Tanta, anguage bians in the south large Christian minority (mostly Coptic orthodox followed by Protestants and Catholics)

#### The Economy

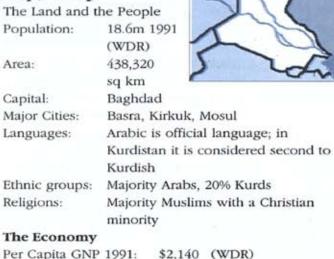
Per Capita GNP 1991: \$ 610 (WDR) Government

Independence:

1922 The Arab Republic of Egypt has a presidential system. The Council of Ministers is headed by a prime minister appointed and dismissed by the

president. The Parliament (Majlis Al Shaab) is the elected legislative body and has 448 members. There is a multiparty system.

#### Iraq (Al 'Iraq)



Per Capita GNP 1991	\$2,140	(WDR)
Government		
Independence:	1932	

1932

The Arab Socialist republic is based on the provisional consititution of 1968 and has a head of state who is elected by the Revolutionary Command Council. The president chooses the cabinet, which is the executive body. The legislative body is the National Assembly, which consists of 250 members. One party system. Other political parties are not allowed.

#### Jordan (Al Urdun)

Jordani (in ord	the state of the s
The Land and th	ne People
Population:	3.7m 1991
	(WDR)
Area:	89,210
	sq km
Capital:	Amman
Major Cities:	Irbid, Zaro
Languages:	Arabic is o
	is second l
Ethnic groups:	Majority of
	origin, nati
	Bedouin of
Religion:	Majority Su
a transmitta a social de	Christian m
The Economy	
Box Consite CMD	1001. 6 1



ga, Aguaba fficial language, English anguage population is of Palestinian ive Jordanians mainly of rigin unni Muslims with a ninority Per Capita GNP 1991: \$ 1,050 (WDR)

#### Government

Independence:

A constitutional monarchy. Executive power is vested in the king who appoints the Council of Ministers. Legislative power is in the hands of the National Assembly. The Senate is appointed by the king. Multiparty elections took place for the first time in 1993.

1946

#### Kuwait (Al Kuwait)

Ruwan (Al Ru		
The Land and t	he People	
Population:	1,4m 1991	
	(WDR)	
Area:	17,820	
	sq km	
Capital:	Kuwait	
Major Cities:	Salmiya	
Languages:	Mainly Arabic, English amongst	
	foreigners	
Ethnic groups:	Kuwaitis of Arab origin account	
	for less than half the population, 60%	
	of population are immigrant workers	
Religions:	Natives are mainly Sunni Muslims.	
	Immigrant workers represent all	
	religions.	
The Economy		

#### The Economy

Per Capita GNP 1991: \$ 16,160 (WDR)

#### Government Independence:

1961

Kuwait is headed by an Amir chosen alternatively from one of the two branches of Al Sabbah family. The executive body is a Council of Ministers headed by the Amir. The legislative body is the National Assembly, which has 50 elected members. The Assembly can be dissolved by decree from the Amir. Political parties are not allowed.

#### Lebanon (Libnan)

Lebanon (Libi	lail)
The Land and t	he People
Population:	3.7m 1991 (WDR)
Area:	10,400 sq km
Capital:	Beirut
Major Cities:	Tripoli, Zahle
Languages:	Arabic is official language, French and English are widely spoken
Ethnic groups:	Mainly Arabs, small minority of Armenians, with a large group of Palestinian refugees
Religions:	Majority Muslims (Shiite and Sunni), large Druze population, most Christians are Maronite or Orthodox
The Economy	

Per Capita GNP 1991: Estimated to be in the mediumlow income range (WDR)

#### Government

1943 Independence:

Lebanon is a parliamentary republic. The president must be a Maronite Christian and the prime minister a Sunni Muslim. The legislative bodies are the National Assembly and the parliament, which are equally divided between Christians and Muslims. It has a multiparty system.

#### Libya (Libya)

The Land and the People Population: 4.7m 1991 (WDR) 1.759.540 Area: sq km Capital: Tripoli Major Cities: Bengazi Arabic is official language, English Languages: and Italian second languages Ethnic groups: Majority Berber and Arab Religions: Majority Muslims, small Christian minority

The Economy

Per Capita GNP 1989:

\$ 5,310 (WT 1991) 1991: Estimated to be in

the mediu mupper-income range (WDR)

#### Government

Independence:

Col. Muammar Qaddafi is supreme leader of Libya. The General People's Congress is the highest legislative body, which is headed by the prime minister. There is a single-party system.

1951

Mauritania (Mauritania)

The Land and the People Population: 2.0m 1991 (WDR) 1,025,520 Area: sq km Capital: Nouakchott Languages: Arabic official language; Arabic popular; Walaf and Salinke are the national languages; French in business circles Moors Ethnic groups: Islam is the state religion Religion: The Economy Per Capita GNP 1991: \$ 510 (WDR) Government 1960 Independence:

Executive power is vested in the president who is elected by universal suffrage. The president also appoints the prime minister who is head of government. The legislative body is the National Assembly. There is a multiparty system.

Morocco (Al M	aghreb)	
The Land and th	ne Peopl	e
Population:	25.7m (WDR)	1991
Area:	446,550 sq km	
Capital:	Rabat	
Major Cities:	Marake	sh, Fez, Casablanca, Tangiers
Languages:		main language, French widely lus several Berber dialects and
Ethnic groups:	Majority	/ Arabs, 35% Berber
Religions:		/ Muslims; with small Jewish ristian minorities.
The Economy		
Per Capita GNP	1991:	\$ 1,030 (WDR)
Government		
Independence:		1956
Monarchy, King	Haccan	Il bas ruled since 1061

Monarchy; King Hassan II has ruled since 1961. Parliament is under the authority of the king. The 199 parliamentary seats are contested by five major political parties.







#### Oman ('Oman)

The Land and the People 1.6m 1991(WDR) Population: Area: 212,460 sq km Capital: Masqat Language: Arabic is the official language Ethnic groups: Mainly Arabs, large Iranian,



Indian and African minorities Majority Ibadi Muslims, 25% Sunnis Religion:

The Economy

Per Capita GNP 1991: \$ 6,120 (WDR) Government

Independence:

The Sultan has absolute right to appoint the cabinet which advises him. The Consultative Council is elected to represent the country's 59 districts.

1946

#### Palestine (Falasteen)

The Land and	the People
Population:	4.9m *(FAFO
	report 1993)
Major cities:	Gaza and Jericho
(Ariha)	
Languages:	Arabic main
	language. English,
French and He	ebrewalso spoken.
Religions:	85% Muslims,
	10% Christians

(Orthodox, Catholic and Protestant). Minority of Shiites and Druze.

#### Government

The signing of the "Interim Peace Agreement" in September 1993 between Israel and the PLO, which was a preamble declaration of priniciples in which the two parties agreed on Palestininian autonomy in the Gaza Strip and Jericho, led to the historic signing of the "Israeli Palestinian Autonomy" agreement on May 5th, 1994. According to the agreement the Israeli occupation forces withdrew from the Gaza Strip and Jericho and Palestinian police and security forces were deployed in the two territories. The elections for autonomy and for the "Autonomous Legislating Committee" will be held in October 1994. The map includes the cities under autonomous rule, the ultimate map of independent Palestine will be decided in the coming few years.

\* Not including Palestinians in the diaspora.

#### Qatar (Qatar)

The Land and the People Population: 0.5m 1991 (WDR) 11,000

sq km

Doha

Area: Capital:



Language: Ethnic groups:

Arabic is the official language Native Qatari Arabs account for less than 40% of the population. Palestinian, Egyptian and Yemeni immigrants constitute another 20%, and 40% are immigratns from Pakistan, Iran and India. Natives are mostly Sunni Muslims. Immigrants from different religions.

#### The Economy

Religions:

Per Capita GNP 1991: \$ 14,770 (WDR) Government

Independence:

Monarchy in which the Amir has full power and acts as head of state. The Council of Ministers is appointed by the Amir. There is an Advisory Council with 30 appointed members. There are no political parties or legislature.

1971

#### Saudi Arabia (Al S'audiya) 🖡

The Land and th	ne Peop	le 🔰	
Population: (WDR)	15.4m	1991	
Area:	2,149,6 sq km	590	
Capital:	Riyadh		
Major Cities:	Jeddah	, Mecca, Dahran	
Languages:	Arabic		
Ethnic groups:	Bedouin native groups, many other		
	Arabs : worker	and non-Arabs as immigrant rs.	
Religion:	Majorit	ty Sunni Muslims	
The Economy			
Per Capita GNP	1991:	\$ 7,820 (WDR)	
Government			
Independence:		1932	

The Kingdom of Saudi Arabia has no constitution. The legal system is based on the Sharia (Islamic law). The Head of State is the king who also holds the post of prime minister. The appointed Council of Ministers has both legislative and executive powers. No political parties are allowed.



#### Somalia (Al Somal)

The Land and the People Population: 8.0m 1991 (WDR) Area: 637,660 sq km Capital: Mogadishu Languages: Somali and Arabic Ethnic groups: Hamitic (Isaq, Dir and Dijil) Religions: Majority Muslim, small Catholic minority



#### The Economy

Independence:

Per Capita GNP 1991: \$ 120 (WDR) Government

1960

The official political system is a one party system, with a legislature known as the People's Assembly. The country has been torn by civil war since 1990. However, three local authorities in the north, middle and south of Somalia each control a small region, with virtual breakdown of most economic and political systems.

#### Sudan (Al Sudan)

The Land and the People 25.8m 1991(WDR) Population: Area: 2,505,810 sq km Capital: Khartoum Major Cities: Omdurman, Port Sudan, Juba Arabic official Languages:



language, ethnic groups have more than 100 different

languages Ethnic groups: Arabs and Nubians, around half of the population, are concentrated in the north. There are at least 570 other ethnic and tribal groups. Religions: Majority Muslims, 20% Christians. (Coptics in the north, Catholics and

Protestants in the south). Numerous other indigenous African religions

#### The Economy

Per Capita GNP 1991: \$420 (State of the World Children, UNICEF, 1994) Government

#### Independence:

Sudan has an appointed head of state. There is a joint military/civilian Cabinet of Ministers as the executive body. All political parties banned since 1989. The only political organization is the National Islamic Front. A version of Islamic law is applied with partial exemption for southern Sudan.

1956

#### Syria (Souria)

The Land and the People Population: 12.5m 1991 (WDR) Area: 185,180 sq km Capital: Damascus Major Cities: Aleppo, Homs, Latkia Languages: Arabic is official language, minority groups speak their own languages Ethnic groups: Majority Arab, some minority groups such as Asyrians, Kurds, Turks and Armenians, with a large number of Palestinian refugees **Religions:** Majority Sunni Muslims, with Alamite, Shiite and Ismaili minorities. Also a Christian minority The Economy Per Capita GNP 1991: \$ 1,160 (WDR) Government

Independence:

1946

A socialist republic based on the 1973 constitution. The head of state appoints and dismisses the Council of Ministers, the executive body, whose members are from the Baath party. The legislative body is Majlis Al Shaab, (people's assembly) which consists of 250 members. There is a multiparty system.

#### Tunisia (Tunis)

The Land and t	he People		
Population:	8.2m 1991 (WDR)		
Area:	163,610 sq km		
Capital:	Tunis		
Major Cities:	Sfax, Ariana		
Languages:	Arabic is		
	official language,		
	French widely used		
Ethnic groups:	Majority Arabs, Berber minority		
Religions:	Majority Muslims, with small Jewish		
	and Catholic groups and some		
	Orthodox and Protestant		
	Communitites		
The Economy			
Per Capita GNP	1991: \$ 1,500 (WDR)		
Government			

#### Government

Independence:

Executive power resides with the president, who is head of state and head of government and appoints the Council of Ministers. Legislative power is vested in the National Assembly, which is elected by universal suffrage. Since 1988 a multi-party system has been permitted by law.

1956

#### **United Arab Emirates** (Al Imarat)

The Land and the People Population: 1.6m 1991(WDR) Area: 83,600 sq km Capital: Abu Dhabi Major Cities: Dubai, Sharjah Languages:

Arabic is the official language, English used among immigrants Ethnic groups: Indigenous Bedouin with a majority of

immigrants Religion: Majority Sunni Muslim, immigrants from different religions

#### The Economy

Per Capita GNP 1991: \$ 20,140 (WDR) Government

Independence: 1971

The United Arab Emirates is headed by a president elected by the Supreme Council of Rulers which is formed by the hereditary rulers of its seven states. The legislative body is the Federal National Council which consists of 40 members representing the seven emirates. It has a consultative rather than a legislative function.

#### Yemen (Al Yaman)

The Land and	the People			
Population:	12.5m 1991			
Area:	(WDR) 860,940 sq km			
Capital:	Aden and San'aa			
Languages:	Arabic			
Ethnic groups:	Majority Arabs, small minority of Persians			
Religion:	Muslims: Shiites and Sunnis			
The Economy	Y			
Per Capita GN	P 1991: \$ 520 (WDR)			

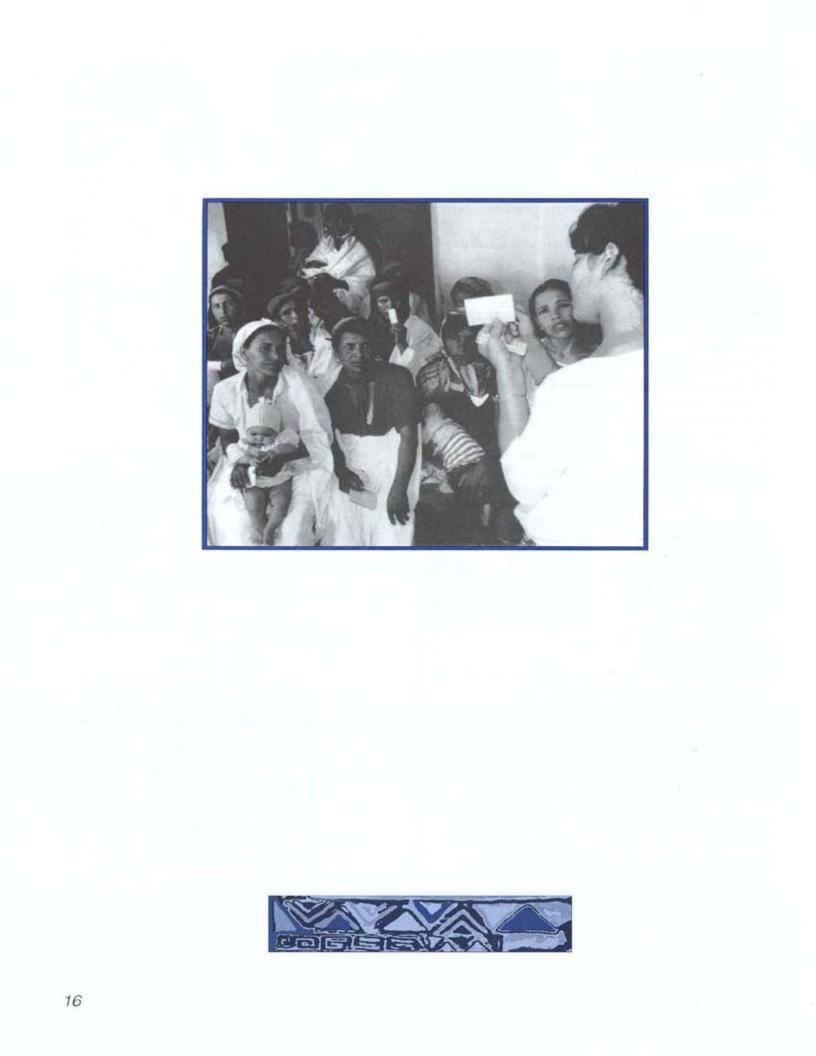
Government

Independence: 1942

The unification of the Yemen Arab Republic and the People's Democratic Republic of Yemen formed the Republic of Yemen in May 1990. Executive power is vested in the president assisted by four other members of a Presidential Council. The Council of Ministers is headed by the prime minister, all appointed by the president. The legislative power is the House of Representatives which is directly elected by universal suffrage. Yemen has many political parties.







## National indicators and regional statistics

It is important that women's indicators are evaluated within the context of national indicators of development. This allows a fairer comparison between countries than if these indicators are stated out of context. A state's investment in or neglect of its women are assessed within the context of available human and economic resources for the general population. For example, in some countries, poor scoring in women's health indicators may result from lack of investment in health in general without gender differences because of low priority given to social development. In other countries, women's health indicators may be considerably behind the average health indicators for the population, thus suggesting a gender bias.

1) **Per capita GNP** is a measure of economic growth. It is included to indicate the availability of resources to invest in women's social and economic development. The classification into four income groups gives more meaning to the comparisons of women's status within a particular level of national wealth. The GNP values and classification are adopted from those of the World Bank, which is the primary source for such data world-wide.

#### Income levels:

*High income* countries (above 7,910 US dollars per capita GNP) are the United Arab Emirates, Kuwait and Qatar.

*Medium-upper income* countries (between 2,530 and 7,909 US dollars per capita GNP) are Saudi Arabia, Bahrain, Oman, Libya and Iraq.

*Medium-low income* countries (between 636 and 2,529 US dollars per capita GNP) are Algeria, Djibouti, Tunisia, Syria, Jordan, Morocco, Lebanon and Palestine (estimate).

*Low income* countries (less than 635 US dollars per capita GNP) are Egypt, Yemen, Mauritania, Sudan, and Somalia.

2) Total population of the country is an indicator of the actual scale of resources needed to address women's needs. Although each individual woman's life is important no matter where she lives, countries with larger population will need more resources to improve women's social indicators.

#### The Population:

Total population in Arab countries	= 231 MILLION
Total female population	= 115.5 MILLION
Female population 15 and over	= 57.6 MILLION
Total Fertility Rate for the region	= 5

## Population-income distribution in the Arab region:

Total population with high income = 3.5 million or 1.5% Total population with med-upper income = 40.7 million or 17.6%

Total population with med-low income = 84.8 million or 36.7%

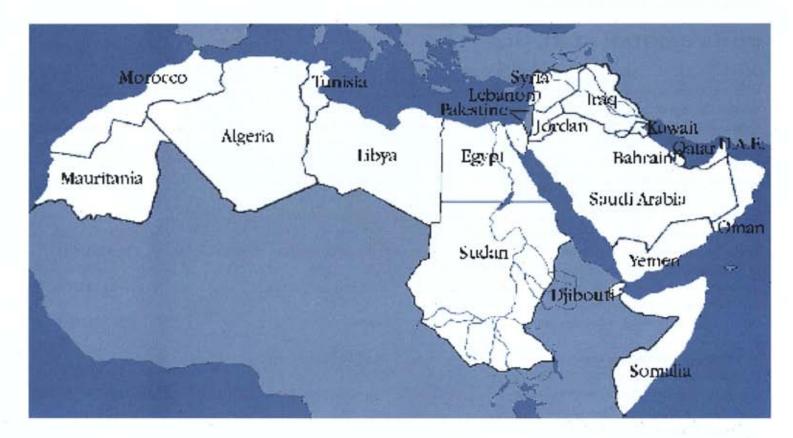
Total population with low income = 102 million or 44.1%

#### Gender economics:

Total (reported) economically acti	economically active females			
	= 9.4 Million			
Per cent females over ane	= 16 206			

Per cent females over age = 16.3% economically active (all countries)

### Map of Arab Countries



#### **Regional statistics:**

Aggregate regional statistics for all Arab countries are difficult to come by. International statistics rarely group the 21 countries of the LAS as a separate region. Statistics of the Middle East or those of North Africa and West Asia usually include countries from outside the LAS and exclude some in it. Statistics generated from within the region are usually reported by country and aggregate statistics are very scanty at present. Few regional comparisons were made in this report for this reason. Those cited were judged to include most of the countries of the report.

#### Effect of different countries on regional statistics:

#### Egypt

53.6 million = 23% of population

Egypt is the country with the largest population and therefore its performance affect regional averages most.

#### Egypt & Sudan

79.4 million = 34% of population The two Nile valley countries have over 1/3 of population of the Arab region and are both low income countries.

#### Morocco and Algeria

51.4 million = 22% of population Another 22% of the population is shared by the two north African neighbors both with medium-low income levels.

#### Saudi Arabia & Iraq

34 million = 15% of population

The two larger Arab countries in Asia have mediumupper income and a substantial portion of the population.

# WOMEN'S HEACTH: A GENDER-SENSITIVE APPROACH

"Where women are concerned, the enjoyment of a health status that enables them

to lead an economically and socially productive life means that they have not only benefitted from the availability and access to appropriate services, but have been actively involved in the decisionmaking process and have acquired relevant information and behavior

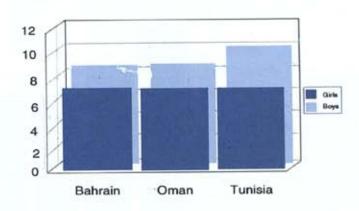
patterns that continue to improve and promote their health."

#### The World Health Organization from Women's Health: Towards a Better World, issue paper for The Global Commission on Women's Health, April 1994

#### WOMEN'S HEALTH AND WOMEN'S STATUS

The past decade has seen an increased awareness of the relationship between women's status in society and their health. Freedom from avoidable death, disease, and injury is a basic human right that should be ensured for all individuals, both men and women, through preventive measures and access to appropriate health care. As gender-specific data on morbidity and mortality have been collected, it has become evident that women are exposed to disproportionately higher risks of death and ill health, mainly because of their disadvantaged position in virtually every society. This gender-based discrimination affects girls and women throughout the life cycle.

When a baby girl is born she is often a disappointment to her parents, who may prefer a son. At that moment the path to her higher risk of death and disease is laid down. In parts of the world this gender discrimination starts even before birth: intrauterine sex determination and abortion of female fetuses is common in some areas of South Asia, for example. In countries where such measures are not available or not permissible, infanticide and abandonment of female newborns are not uncommon. When allowed to survive, the female baby may suffer from abbreviated nursing, inadequate feeding, and lack of attention to infectious disease, which then leads to malnutrition and, ultimately, to an increased risk of death.<sup>1</sup>



DURATION OF BREASTFEEDING IN MONTHS BY SEX OF CHILD IN BAHRAIN, OMAN, AND TUNISIA

Source: Sex Differences in Child Survival and Development, Evaluation Series No. 6 (Amman, Jordan: UNICEF Regional Office for the Middle East and North Africa, 1990), p. 17. In Syria, for example, the Demographic and Health Survey (DHS) revealed that the mortality rate for girls aged 2 to 5 years is 14.6 per 1,000, compared with 9.3 per 1,000 for boys in the same age range. This finding is consistent with the reporting by the World Health Organization (WHO) that the index of son preference in Syria is very strong, at 2.3.<sup>2</sup> That is, for every mother who prefers that her next child be a girl, 2.3 mothers want a boy.

Such gender discrimination can be fatal, especially to infants and children. When under-five mortality rates are disaggregated by sex, girls are found to die more frequently than boys in some countries. According to UNICEF, "Arab states dominate the list of nations that have made most progress in reducing child death over the past decade."<sup>3</sup>

But, UNICEF adds, child survival statistics are usually quoted in national averages, masking disparities between groups of children, including differences between males and females.

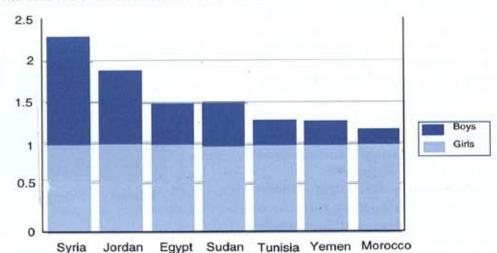
In their growing years girls are often overworked and underfed because of the erroneous belief that girls need less nutrition than boys. Since girls often get inadequate amounts of the high-quality, protein- and iron-rich food that they need, many have high rates of anemia and stunted growth, which ultimately increases their risk of complications during pregnancy and childbirth. Early marriage and repeated pregnancy impose extra burdens on the already depleted resources of the young woman, and the vicious cycle of ill health continues.

#### **Reproductive Health**

Family planning through access to fertility regulation methods is undoubtedly an essential part—but not the totality—of reproductive health. According to Dr. Mahmoud Fathalla, former director of the Human Reproductive Research division of the World Health Organization, the definition of reproductive health is:

...a condition in which the reproductive process is accomplished in a state of complete physical, mental and social well-being and is not merely the absence of disease or disorders of the reproductive process. Reproductive health, therefore, implies that people have the ability to reproduce, to regulate their fertility and to practice and enjoy sexual relationships. It further implies that reproduction is carried to a successful outcome through infant and child survival, growth and health development. It finally implies that women can go safely through pregnancy and childbirth, that fertility regulation can be achieved without health hazards and that people are safe in having sex.<sup>4</sup>

PREFERENCE FOR THE SEX OF THE CHILD IN SELECTED ARAB COUNTRIES



Index of son preference = ratio of the number of mothers who prefer that the next child be male to the number of mothers who prefer that the next child be female.

#### Source:

The Health Implications of Sex Discrimination in Childbood, unpublished document, WHO/UNICEF/FHE/86.2. quoted in E. Royston and S. Armstrong, *Preventing Maternal Death* (Geneva: World Health Organization, 1989), p. 51. Data on fertility rates and the use of family planning methods are more readily available than any other kind of information about women's reproductive health. That is because such data are generated through demographic surveys meant to monitor population growth. There is a need to generate more information on other common conditions that affect women's reproductive health, such as reproductive tract infections (RTIs), infertility, abortion-related complications, and cervical, ovarian, and breast cancer. A recent study in the Giza province in Egypt, for example, revealed that 500 married women in semi-urban communities have higher rates of RTIs (52%) than previously suspected, due to both sexually and nonsexually transmitted organisms.

#### Infections, Infertility, and Cancer

Infections are known to be the major cause of infertility in women, with genetic and hormonal causes responsible for only a small proportion of cases. There are no data on the rates of infertility in Arab countries or on the distribution and prevalence of the different causes of infertility. However, treatment centers that offer *in vitro* fertilization services (IVF) are on the increase in the region. It seems that a better public health policy would be to first look at the most common causes of infertility and attempt to manage them through simple cost-effective means before investing in the expensive, high-risk technology of IVF.

Gynecologists throughout the region diagnose and manage breast, cervical and ovarian cancer everyday, and some have the impression that cancer is on the increase because they see more cases every year. Yet no data have been disseminated on the rates of cancer in women or on trends over the years. Such data may already be available in the records of hospitals and cancer research institutes, waiting to be retrieved, analyzed, and published.

#### Unsafe Abortion

Access to safe abortion is one of the most important measures for reducing maternal mortality and reproductive morbidity in women. Despite contraceptive advances, women will always have pregnancies that are not planned, due to lack of access to or knowledge of contraception, or because contraceptives fail. Many of these women will resort to pregnancy termination to avoid an unwanted birth. In the Arab region, most induced abortions occur among poor, married women who have no means to support more children. The legal status of abortion varies among Arab countries. Tunisia has had the most permissive abortion laws since 1967. Some, like Jordan, allow abortion in cases of rape and incest. Others, like Algeria, Morocco, Jordan, and Kuwait, allow abortion if the pregnancy constitutes a serious threat to the mother's health, while the rest do not permit it unless the mother's life is in danger.

Whatever the law may be, the demand for access to safe abortion is high, as indicated by the number of illegal abortions that are performed. Tens of thousands of women arrive at hospitals each year with complications from incomplete or septic abortions. Regardless of whether these abortions are spontaneous or induced, health professionals have a responsibility to administer the appropriate health management of these women. Inexpensive, appropriate techniques for treating abortion complications more safely are available and can be implemented to save women's lives and improve their health.

#### Women's Roles:

#### **Reality Versus Traditional Perceptions**

Childbearing and rearing continue to be major roles for most women in the world. But society often does not provide women with the physical care and material resources they need to perform these vital social and economic functions without unnecessary risks to themselves. It is estimated that 500,000 women die every year from causes related to pregnancy and childbirth. The majority (99 percent) of these deaths occur in nonindustrialized countries, where high-quality health-care services for women are not available.

In many high-fertility countries, some women spend half of their adult lives pregnant or lactating. While pregnancy and lactation are physiological functions that only women can perform, child care is a social and economic function that either parent can do. Nonetheless, in most societies—including Arab countries- motherhood remains sacred, while the equally important role of fathers in child care is too often ignored. Yet, fathers' contributions to nurturing and raising their children are essential if women are to be sufficiently relieved of their burdens so that they will have the time and the energy to care for their own health. Although in the past twenty years, in some societies, men have become increasingly aware of the need to take part in household tasks and share the burden of caring for children with their partners, women continue to be the primary caregivers for children. Studies in Arab societies show little increase in men's participation in household work. In Syria, a study by Anton Rahmeh, quoted by Nadia Hijab in *Womanpower*, 119 married and single women working in the public sector reported that the overwhelming majority (81 percent of married women and 88 percent of single women) said that the male members of their family did not help with household chores.<sup>5</sup>

The demand on women's physical and mental resources has increased with their participation in the labor force. Although women's participation in wage labor is a positive development, all too often such participation translates into a double working day, because women now have responsibilities both at home and in the work place.

World trends reveal an increase in the numbers of households in which women are the primary incomeearners, with or without the presence of a man. A recent study in Egypt showed that in 1993 between 15 and 20 percent of households were exclusively dependent on the woman's income,<sup>6</sup> yet public policy and social services have not yet taken this into account.

Prevailing social attitudes toward women (including women's own low self-esteem) make up the true pathology behind much of gender-related disease and death. The role of the state in eliminating discrimination against women and investing resources to improve women's status, including their health, is essential to bringing about a significant change.

#### **GENERAL HEALTH INDICATORS**

The health of a specific population can be assessed by looking at various health indicators. One important indicator of general health is the **percent of the population that has access to health services**. This indicator is a measure of the overall outreach of existing health services to the population, and serves as a background against which the availability of services for women, such as attended child birth, can be compared. Another important general health indicator is **life expectancy**, which provides a context within which rates of maternal mortality can be assessed. For example, a country where overall life expectancy has improved while maternal mortality is still high has neglected to invest in women's health.

#### Women's Health Indicators

The five women's health indicators used here to compare women's health status among Arab countries are selected not because they are the most important, but because data on them are available. Data on other health indicators that are relevant to evaluating women's status—such as occupational health, the health consequences of gender-based violence, and psychological health—are almost nonexistent or limited to very small studies. A lack of available nationwide data for the Arab countries makes an intercountry comparison impossible.

This lack of information is in itself a gender issue. Because women's health is often not perceived as deserving special attention, the gender-specific data generated through national census and health surveys have been inadequate in the past. A major effort is currently underway to correct this neglect through the Pan Arab Project For Child Development executed by the League of Arab States (LAS). The project commissions standardised questionnaire surveys, commonly known as PAPCHILD surveys<sup>7</sup> in all Arab countries.

Information generated includes different aspects of child health and survival as well as women's health, education and employment status. PAPCHILD surveys have been completed in six Arab countries to date; Mauritania, Egypt, Yemen, Syria and Sudan. Other country surveys are currently underway or will be started in the near future. Gulf states have another series of surveys called the Gulf Child Health Survey (GCHS) implemented by the Council of Health Ministers for the G.C.C. states.<sup>®</sup> The first set of surveys were completed in Saudi Arabia, Kuwait, United Arab Emirates, Bahrain, Qatar, Oman and Iraq. The second round of surveys will be started soon.

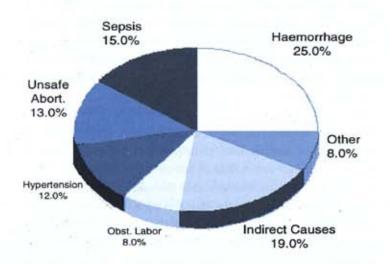
The paucity of gender-specific data is not limited to Arab countries and is currently being addressed at the international level. Major health agencies like UNICEF and the World Health Organization have started to classify data by gender in the past few years. However, unless such data are routinely generated at the national and regional levels, international comparisons will remain incomplete and meaningless.

#### Indicator 1: Maternal Mortality

The high number of women who die during pregnancy and childbirth was brought to the attention of the world through the Safe Motherhood Conference in Nairobi in 1987. When looking at maternal mortality rates (MMR), it is important to remember two facts: (1) death is the worst possible health outcome, and (2) most causes of maternal mortality are avoidable. It is therefore reasonable that maternal mortality rates should be considered the ultimate indicator of the poor health status of women across countries and within sectors of the same country.

In developing countries, direct obstetric causes of maternal mortality are hemorrhage (25 percent), sepsis (15 percent), unsafe abortion (13 percent), hypertensive disorders (12 percent), obstructed labor (8 percent), indirect causes (19), and other causes (8 percent).<sup>9</sup> The indirect causes are anemia, hepatitis, abnormal hemoglobin, and cardiac disease.

#### PERCENT CONTRIBUTION OF DIRECT OBSTETRIC CAUSES TO MATERNAL MORTALITY IN DEVELOPING COUNTRIES



#### Source:

Deborah Maine, "Medical Causes of Direct Obstetric Deaths in Developing Countries," in *Safe Motherhood Programs: Options and Issues* (New York: CPFH, Columbia University, 1991). These disease conditions have to be considered within the gender-biased socio-economic context where they occur. Poor nutrition, stunted growth, early marriage, frequent repeat pregnancies, lack of education, and long hours of strenuous work are aggravated not only by poverty but also by the lack of equity in resource distribution between men and women. Furthermore, the disparities between MMRs in rich versus poor countries are greater than for any other public health indicator. The risk of death from pregnancy and childbirth for a woman in non-industrialized countries is 80 to 600 times than that for a woman in an industrialized country.10 In most of Western Europe, maternal mortality is under 10 per 100,000 live births, while in Africa it varies between 500 and 2,000. Differences in the maternal mortality rate, however, are determined not only by the wealth of a country, but also by a country's investment in women's health. Zambia, for example, is one of the poorest countries in the world, with a per capita GNP of US\$420, but its MMR is 150 per 100,000, one of the lowest in the non-industrialized world.

Some Arab countries—the United Arab Emirates, Qatar, and Oman among them—do not have published statistics on their MMRs, even though such data are available from health service and vital statistics records. Kuwait has an MMR estimated at 2 to 6 per 100,000, which is better than some wealthier Western European and North American countries. Such a low MMR reflects the wide availability of free health services there, and particularly the government's investment in high-quality maternal health services.

For the upper-middle-income group of Arab countries, the differences in MMR do not parallel the differences in GNP level or the health services to which the general population has access. For example, Saudi Arabia and Bahrain have very similar GNP levels, but in the former the MMR is 41 and in the latter it is 8. The difference may be attributable to the larger population and the geographical difficulties of accessing health care in Saudi Arabia. Among the medium-low-income countries, Jordan has achieved a relatively low MMR of 48 compared with Morocco's MMR of 300, despite a comparable GNP. However, Jordan's health services cover 97 percent of its population, while Morocco's health coverage is 70 percent. It is also important to note here that Jordan has a population of 3.7 million, while Morocco's population is 25.7 million. Djibouti, another middle-income Arab country, has an MMR of 740, which is disproportionately high given the level of its current GNP and its small population of 45 thousand.

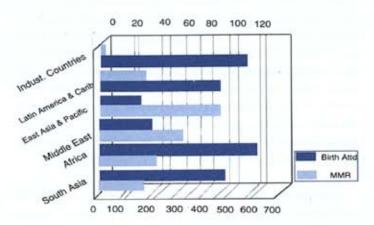
For the low-income countries, Egypt—with its long history of well-developed health services—has an MMR of 176, which is low compared with the MMRs in countries with similar or higher GNPs. Unfortunately, no estimate of the health service coverage for the total population is available for Egypt. Two of the poorest countries, Somalia and Mauritania, have the worst MMRs in the region and among the highest in the world—1,100 and 800, respectively.

#### Indicator 2: Percent of Births Attended by Trained Health Providers

A mother and her baby have a much lower risk of death when the birth is attended by a trained health provider. The better trained the attendant, the lower the risk. Institutional or hospital attendance is not essential for a safe, normal delivery. But easy and quick access to a health facility equipped with blood transfusion equipment, operating rooms, and antibiotics further decreases the risk of mortality if the delivery becomes complicated.

Some Arab countries show a marked discrepancy between the percentage of births attended by a trained health professional and the percentage of the total population with access to health services. This discrepancy is most marked in Algeria, where 15 percent of all births are attended while 88 percent of the population has health-care coverage, and in Morocco, where the comparable percents are 26 and 70, respectively. The gap is also wide in Iraq, where 93 percent of the population have general health-care coverage and only 50 percent of all births are attended by a trained professional.

In the low-income group, it is interesting that Sudan has reached an attended-birth coverage of 69 percent despite its low GNP. Sudan has a well-established program of community-level midwife training, which began in the 1950s. PERCENT BIRTH ATTENDED & MATERNAL MORTALITY RATES BY REGION



#### Source:

UNICEF, State of the World's Children (New York, 1994), p. 83.

#### Indicator 3: Total Fertility

The total fertility rate (TFR) of a country, in addition to indicating the rate at which the population is increasing, reflects the average number of children a woman will bear and care for over her lifetime. When fertility rates are high, women have less time to get an education or seek employment, unless they are wealthy and can hire help.

The Arab region has the second-highest fertility rate in the world—around five children per woman—and is second only to sub-Saharan Africa. The highest fertility rates are found in Yemen and Somalia. Countries with the same income levels have widely varying fertility rates. Kuwait, for example, has the lowest fertility rate among the high-income countries, at 3.7 children per woman, but Lebanon, a middle-income country, has an even lower fertility rate of 3.1 (the lowest in the middle-income group). Oman in the Gulf and Djibouti in Africa have the highest middle-income fertility rates, at 6.7 and 6.6, respectively.

The neighboring Gulf countries of Bahrain and Saudi Arabia have similar economic levels but widely different fertility levels, of 3.8 and 6.4, respectively. The relatively high levels of income in both countries permit many women to hire domestic help to care for their children. But the low financial and physical burdens of child care, which are sometimes quoted as the causes for the high TFR in the Gulf countries, do not explain the gap in Bahrain's and Saudi Arabia's fertility levels. The difference may be attributable to the fact that modern contraceptives are more readily available in Bahrain, from services such as the Bahrain Family Planning Association, an active affiliate of the International Planned Parenthood Federation (IPPF). It could also be due to higher levels of education and participation in public life among Bahraini women. In Saudi Arabia, government policy regarding access to modern family planning is ambiguous at best and sometimes obstructive.

#### Indicator 4: Percent of Family Planning Users

Fertility rates are only affected in part by the use of family planning methods. Contraceptive use does not necessarily indicate a desire to reduce the absolute number of children; it may be a means of spacing pregnancies. The governments in most of the Gulf countries, including Bahrain with its lower TFR, do not publish information on the use of family planning. Few of the Gulf countries have a clear policy on whether the provision and use of modern contraceptive methods are permitted within their free public sector, although some permit private clinics to provide contraceptive services.

Arab countries can be grouped into three categories with regard to family planning use:

(1) Countries with active public family planning programs or with no programs but widespread availability of modern methods. These countries have moderately high levels of contraceptive use, between 40 and 50 percent. They are Algeria, Tunisia, Syria, Morocco, Lebanon, and Egypt. They are followed closely by the United Arab Emirates and Jordan, with contraceptive prevalence at 35 percent.

(2) Countries with weak family planning programs and/or limited availability of modern methods. These countries have low levels of contraceptive use, between 1 and 9 percent. They are Oman, Yemen, Mauritania, Somalia, and Sudan.

(3) *Countries with unclear or unstated policies and little data on family planning.* These are Kuwait, Qatar, Saudi Arabia, Bahrain, Libya, and Djibouti.

It is interesting that Iraq, with its fairly well-developed health services and high levels of women's education, has only an 18 percent use of family planning. This may be largely explained by the active pro-natalist policy of the government during, and following, many years of war-related mortality.

#### Indicator 5: Percent of Young Women Who Are Married

Early marriage and adolescent fertility—occurring from age 15 to 19—are known to affect women's health and reproductive outcomes throughout their lives. Early marriage can also affect a woman's chance of attaining education, training, and employment if such opportunities are available in her society.

According to the World Health Organization, the safest period of a woman's life for childbearing is between the ages of 20 and 30. Studies have found that even two years after the onset of menstruation, a girl may have between 2 percent and 9 percent of pelvic growth and 1 percent of height yet to achieve. Obstructed delivery due to disproportion between the size of the infant's head and the mother's pelvis (cephalo-pelvic disproportion) is most common among very young mothers.

Although most Arab countries have legislated the age of marriage between 16 and 18, in many rural and poor urban communities girls are still married under the legal age, due to poverty, ignorance, or defiance of the law. An increase in the age at marriage will more likely occur through measures that increase women's life choices, such as educational opportunities, vocational training, and employment. Still, serious efforts at enforcing the law must also be undertaken by governments and local community vigilance.

The differences in the percentages of married adolescents across the Arab countries are dramatic. The highest percentages are found in the United Arab Emirates, where 55 percent of women under age 20 are married, and Sudan, where 41 percent of that age group are married. The lowest percentages are found in Tunisia (4 percent), Morocco (11 percent), and Egypt (15.3 percent).

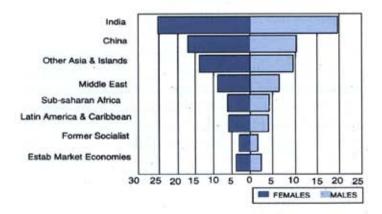
Unfortunately, the percentages are not known for every country and the available data are not always reliable. In countries such as Egypt, where the law is longstanding and widely publicized, documents are often falsified, creating an artificially low reported rate of teenage marriage. Doctors responsible for issuing birth certificates and religious sheikhs who fill out the forms for marriage certificates often forge the documents to enable the family to marry girls under the legal age. Much more data need to be generated on teenage marriage and adolescent fertility in Arab countries, with details of the health and human development consequences for women and children.

#### OTHER IMPORTANT GENDER-RELATED HEALTH ISSUES

#### Anemia

Poverty is the most common cause of protein-energy malnutrition and other nutritional deficiencies, and it affects both men and women. But poor women suffer disproportionately because, as observed earlier, they often get fewer nutrients than they need as a result of the social bias that favors men. Gender differentials reveal themselves most with anemia. Studies show that adolescent girls require 18 percent more iron per kilogram of body weight than do adolescent boys, but they rarely get the nutritional content of food appropriate for their needs. As a result, virtually all adolescent girls in non-industrialized countries are anemic.11 Worldwide, 458 million adult women suffer from anemia, compared with 238 million adult men. Anemia accounts for 24 percent of the disease burden in women of reproductive age and 1.3 percent of the total burden of all diseases in women.12

#### COMPARISON OF FEMALE AND MALE DISABILITY-ADJUSTED LIFE YEARS (DALYS) LOST TO ANEMIA, BY REGION



#### Source:

World Development Report 1993: Investing in Health (Washington, D.C. and New York: World Bank/Oxford University Press, 1993), p. 217 and 219. Anemia due to nutritional deficiency is the most common cause of micronutrient disorder in the world. It is caused by a decreased intake of iron and/or folic acid because of a deficient diet, or a decreased ability to absorb those elements due to a gastrointestinal disease like chronic diarrhea or because of increased blood loss from parasitic infections, menstruation, abortion, and childbirth. Anemia reduces physical productivity and diminishes the attention span, which hampers children's capacity to learn in school.

But anemia is not simply a physiological condition. It is a symptom of the much deeper social illness of gender inequity. It results from a systematic discrimination against women from birth until old age. Anthropometric data pointing to possible differentials in feeding patterns are reported from Jordan and Saudi Arabia, among other countries. When children become ill in poor families, limited resources are reserved for the health care of boys. This bias has been documented in many nonindustrialized countries in the world, including Egypt.<sup>13</sup> Poorly treated and neglected illnesses are more common in girls, leading to malabsorption and loss of appetite and hence to more nutritional anemia.

The reproductive years (15-49) are the time of highest risk of morbidity and mortality related to anemia. Heavy and irregular menstruation, repeated pregnancy, spontaneous and induced abortion, and the many complications of childbirth are major causes of blood loss. Over half (51 percent) of the world's pregnant women suffer from anemia (56 percent in non-industrialized and 18 percent in industrialized countries). Even when women are not pregnant, over one-third (35 percent) suffer from anemia during their reproductive years (43 percent in non-industrialized and 12 percent in industrialized countries).<sup>14</sup>

Reproductive-age anemia is a major gender-discrimination issue. Childbearing and breastfeeding need not be the causes for the high risk of disease and death related to anemia. Women's reproduction is a socieconomic function, and their nutritional needs during that period should be a public health concern.

#### PERCENT PREVALENCE AND NUMBERS OF WOMEN EXPOSED TO FGM

COUNTRY	PREVALENCE	ACTUAL NUMBER	NOTES
SUDAN (North)	89%	9,220,400	Infibulation in over 90% [of cases] in all provinces, except the three southern provinces.
SOMALIA	98%	3,773,000	Nearly all Somali women are infibulated.
DJIBOUTI	98%	196,000	Nearly all women are infibulated.
EGYPT	50%	13,625,000	Mostly clitoridectomy and excision. Some infibulation in the extreme south.
MAURITANIA	25%	262,500	Mostly excision. Varies by tribe.
YEMEN	Unknown	-	Only one published report on its existence.
OMAN	Unknown	-	Anecdotal evidence; no published report.
TOTAL		17,856,500.00	

Source: Adapted from Nahid Toubia, Female Genital Mutilation: A Call for Global Action (New York: Women, Ink., 1993).

#### Violation of Women's Bodies

Violence against women and abuse of their bodies are increasingly being recognized as public health issues. The violation may take the more publicized form of rape or wife-battering, or it may take place in the home, surrounded by silence—as in the case of incest, or rituals such as female circumcision or female genital mutilation (FGM). It can occur in the health services, through forced sterilization of disabled women or insertion of an IUD without a woman's consent after delivery or treatment for abortion complications.

The first steps toward eliminating the health risks associated with the violation of women's bodies is to admit their existence and document them through objective research. In Arab countries and elsewhere, very few data are available on violence against women, mostly because of denial that such violence occurs.

#### **Female Genital Mutilation**

One documented violation with many physical and psychological health complications that takes place in some Arab countries in Africa is female circumcision. It is because of the irreversible and destructive effects of these procedures that they are rightfully termed female genital mutilation.

First, it is important to note that the occurrence of this practice probably came as a surprise to most people in other Arab countries, where it is not practiced. Female circumcision is widely practiced in Sudan (90 percent in the north), Somalia (99 percent), Egypt (50 percent), and Mauritania (25 percent), and is reported in unquantified numbers in Yemen and Oman. Although the practice is not universal to all Arab countries, the fact that over 27 million women in the region are affected by genital mutilation should make it the concern of all Arab countries.<sup>15</sup>

Female circumcision is not equivalent to male circumcision because even the mildest form, clitoridectomy, involves the removal of an important and anatomically functional part of the body, and is equivalent to amputating the penis. Male circumcision, on the other hand, is the removal of the foreskin, which has the limited function of protecting the sensitive end of the organ. Infibulation is an even more drastic and severe procedure, in which all the external genitalia of a woman are cut off and the skin is sewn over the vagina. This form of female circumcision is inflicted on 90 percent of girls in northern Sudan, 99 percent of girls in Somalia and Djibouti, and a substantial number of girls in southern Egypt.

Health professionals, religious leaders, government officials, and women's groups have publicly condemned this practice. Some non-governmental organizations (NGOs) have become active in educating the public. The Cairo Family Planning Association project (now registered as an independent NGO) has produced programs for television and radio, and broadcast them during prime time on several stations in Egypt. In Sudan the Babikir Badri Society for research on women has undertaken rural education programs in the past several years. In the past the Somali Democratic Women's Organization championed the campaign against the practice in that country. The limited efforts of NGOs have always received the implicit support of various governments, but clearer policies and a financial investment by the government is needed to bring greater results. The involvement of professional organizations of physicians, nurses, lawyers, and others is also essential for creating a strong coalition to stop this destructive and unnecessary practice, which has serious consequences for women's health and lives.

#### CONCLUSION

In striving to achieve social and economic development, Arab countries are, on the whole, no better or worse than non-industrialized countries in other regions with regard to women's health indicators. Some countries, like Kuwait, have achieved very high levels of healthcare coverage for women in a relatively short period of time. Others, like Tunisia, are models of constant improvement in reproductive health services for women, despite the struggle to maintain economic growth. At the other extreme are sub-Saharan African Arab countries, which mirror the overall poor performance levels of that subregion. Poor indicators are further compounded by political instability and famine in Somalia and Sudan. The rest of the countries fall in-between, scoring high on some indicators and low on others.

It is hoped that the comparisons and correlations explored here will raise public awareness of women's health issues, help shape future health policies, and aid in the design of health services that will benefit more women in the region.

#### Notes

1. Sex Differences in Child Survival and Development, Evaluation Series No. 6 (Amman, Jordan: UNICEF Regional Office for the Middle East and North Africa, 1990), 17.

2. E. Royston and S. Armstrong, Preventing Maternal Death (Geneva: World Health Organization, 1989), 51. Data on son preference and gender specific mortality rates in Syria come from different studies; therefore, the correlation is suggestive rather than conclusive.

3. UNICEF, Progress of Nations (New York, 1993) p 12.

4. M.F. Fathalla, *Reproductive Health: A Global Overview*, Annals of the New York Academy of Sciences 626 (1991): 1-10.

5. Nadia Hijab, Womanpower: The Arab Debate on women at Work (New York: Cambridge University Press, 1988).

6. Hoda Badran, *Women Responsible for Families*, National Symposium March 20, 1994 (CAPMAS, Cairo, Egypt).

7. For more information on the PAPCHILD surveys contact the central administrative office at 22 a Taha Hussein Street, 3rd floor, Zamalek, Cairo, Egypt. Tel: 340-4306, or the national statistical departments in the relevant countries.

8. The GHCS is supported by the Arab Gulf Programme for the United Nations (AGFUND), UNICEF, UNFPA and the World Health Organization. For more information on these surveys contact any of the above agaencies or the statistical departments of revelant countries.

9. Lynn Freedman and Deborah Maine, *Women's Mortality: A Legacy Of Neglect*, in the Health of Women: A Global Perspective, ed. M. Koblinsky et al. (Boulder: Westview Press, 1992), 155.

10. Data for Maternal Mortality rates and risks are from E. Royston and S. Armstrong *Preventing Maternal Death* (Geneva World Health Organisation 1989).

11. Women's Health (Geneva: The World Health Organization, 1994).

12. World Development Report: Investing in Health (Washington, D.C. and New York: World Bank / Oxford University Press, 1993).

13. Kathleen M. Merchant and Kathleen M. Kurz, Women's Nutition Through the Life Cycle: Social and Biological Vulnerabilities, in M. Koblinsky, J. Timyan, and J. Gay, the Health of Women: A Global Perspective (Boulder: Westview Press, 1992).

14. The Prevalence of Aanemia in Women: a Tabulation of information World Health Organisation Report, 1992 a.

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#### NATIONAL & HEALTH INDICATORS

COUNTRY I	PER	POPULATION	LIFE	MATERNAL	
(	CAPITA	IN	EXPECTANCY AT	MORTALITY PER	
(	GNP, US\$	MILLIONS	BIRTH	100,000 WOMEN	
HIGH-INCOME COU	NTRIES [ABO	VE 7,910 IN 1991]			
UNITED ARAB EMIRA	TES 20,140	1.6	72	<u></u>	
KUWAIT	16,160	) 1.4	75	2-6ª	
QATAR	14,770	0.5	70	14	
MEDIUM-UPPER-INC	OME COUNT	RIES [BETWEEN 2,5	30 AND 7,909 IN 1991]		
SAUDI ARABIA	7,820	15.4	69	41 <sup>b</sup>	
BAHRAIN	7,130	0.5	69	8 *	
OMAN	6,120	1.6	69	-	
LYBIA	5,310	4.7	63	80 *	
IRAQ	2,140	18.6	65	120*	
MEDIUM-LOW-INCO	ME COUNTR	IES [BETWEEN 636 A	ND 2,529 IN 1991]		
ALGERIA	1,980	25.7	66	140*	
TUNISIA	1,500	8.2	67	50 <sup>h</sup>	
DJIBOUTI	1,210	0.45	49	740 <sup>b</sup>	
SYRIA	1,160	12.5	67	143	
JORDAN	1,050	3.7	69	48 *	
MOROCCO	1,030	25.7	63	300 *	
LEBANON	M-L	3.7	66		
PALESTINE	NA	4.9 <sup>a</sup>	NA	NA	
LOW-INCOME COUN	TRIES [BELO	W 635]			
EGYPT	610	53.6	61	176 °	
YEMEN	520	12.5	52 330		
MAURITANIA	510	2.0	47	800	
SUDAN	420*	25.8	51	550 *	
SOMALIA	120	8.0	48	1100 *	

Note: GNP is in US dollars in 1991. NA = not available.

#### Sources:

Data on GNP, Population, life Expcetancy at Birth and Maternal Mortality are from the World Development Report (World Bank, 1993), except when marked.

\*MMR from State of the World's Children (UNICEF, 1994). Various years between 1980 and 1991 according to [???]

<sup>b</sup>From the The Progress of Nations (UNICEF, 1993).

\*MMR in Egypt from Ministry of Health survey 1992-93, reported by Hefni (1993).

<sup>d</sup>Data for Palestine reflect the population in the occupied territories and Gaza excluding Palestinians in the diaspora (from FAFO report Oslo 1993).

"From Huda Zurayk, "Women's Reproductive Health in the Arab World", Population Council, WANA Regional Paper No 39, Cairo, Egypt 1994.

#### NATIONAL & HEALTH INDICATORS (Cont.)

COUNTRY	% POP ACCESS TO HLTH SERVICES	% BIRTH ATTENDED BY HEALTH PERSONNEL	TFR	% FP USERS	% WOMEN 15-19 MARRIED
HIGH INCOME					
U.A.E	99	99	4.5	35 *	55
KUWAIT	100	99	3.7	-	14.3
QATAR	<del></del>	-	4.4	_	—
MEDIUM-UPPER	INCOME				
SAUDI ARABIA	97	90	6.4	_	_
BAHRAIN	_		3.8		
OMAN	95	60	6.7	09*	_
LYBIA	_	76	6.4	_	36.7
IRAQ	93	50	5.7	18	31.8
MEDIUM-LOW I	NCOME				
ALGERIA	88	15	4.9	51	22.5
TUNISIA	90	69	3.4	50	4.3
SYRIA	83	61	6.1	52	24.6
JORDAN	97	87	5.7	35	20.1
MOROCCO	70	26	4.4	42	11.3
LEBANON	95	45	3.1	55	
DJIBOUTI		_	6.6		_
PALESTINE	NA	NA	NA	NA	NA
LOW INCOME					
EGYPT		41	4.1	47	15.3
YEMEN	38	16	7.2	07	
MAURITANIA	45	40	6.5	04	36.9
SUDAN	51	69	6.0	09	41
SOMALIA	27	02	7.0	01	

#### Sources:

Data on Population with Access to Health Services and % Birth attended are from *State of the World's Children* (UNICEF, 1994).

Data on TFR, % F.P. users are from State of the World Population (UNFPA, 1993), except when marked.

Percentage of Women 15-19 married from J.A. Ross, et al., Family Planning and Child Survival Programs as Assessed in 1991 (New York: The Population Council, 1992).

\* Data from State of the World's Children (UNICEF, 1994).







# WOMEN'S EDUCATION: A CLOSING GENDER GAP

"Without education, women's efforts to improve their health, change laws or

participate in economic development are incomplete. Education is the cornerstone of women's empowerment."

Educational achievement is a pivotal measure of any society's level of development. In modern times, universal literacy for all social groups has become the goal of all nations, and education has been recognized as a right of both women and men. Apart from the absolute benefits that education imparts to women, women's education benefits society. Studies have shown that women's education is closely related to children's health outcomes—including infant mortality—and to lower fertility rates and other social development indicators. Education and training increase women's opportunities in the modern economic sector by better qualifying them for paid employment. Education also expands women's life choices beyond marriage and reproduction.

Arab countries have made great advances in improving literacy rates in the past two decades for both men and women. However, women still lag behind men, mostly because of the historical deficit in female education, with high illiteracy rates among women over 25 years of age. In most countries the urban-rural contrast in female literacy is still great, creating an increasing gap of development opportunities for women within the same country.

Overall, the difference between male and female literacy rates is greater in lower-income countries, which suggests that when resources are scarce male education takes precedence over female education. The lower social value of girls' education causes high dropout rates among those who come from poor families. Girls may also be removed from school to care for

#### Fatima Ahmed Ibrahim, speech at UN, 1993 (First Sudanese woman member of parliament and president of the Sudanese Women's Union)

younger siblings or to be married at a young age. Between 1970 and 1990, school enrollment rates for girls at the primary level became almost equal to those of boys in most Arab countries. However the gaps in completion rates and literacy between men and women are still high, since gender barriers present themselves as girls get older.

One cause of high illiteracy rates in some countries is a rapid increase in the population. In Egypt, for example, illiteracy rates have remained static, despite major investments in primary education by the government since the 1960s, because of rapid population growth.

Overall, Arab women have enjoyed increased access to formal education in recent years, although those in the poorer countries still have a long way to go. Countries with resources have almost achieved parity in education between girls and boys, up to and including the secondary level. Education is increasingly not just an opportunity but a right for Arab women. A study in Egypt in the early 1980s, of 1,000 female students from the lower and lower-middle classes of Cairo, showed that the vast majority of parents expected their daughters to continue their education, and the vast majority of the daughters shared this expectation. No less than 93 percent of the girls believed women should work outside the home after completing their education.<sup>2</sup>

A problem facing women and men alike is that the content of education is often unrelated to the needs of the labor market—so much so that some rural families prefer not to send their children to school, where they will lose useful agricultural skills and emerge with unmarketable knowledge. Schools, furthermore, often foster dismissive attitudes toward manual labor, which has exacerbated productivity problems in the region.

#### EDUCATION INDICATORS

The choice of indicators discussed here was restricted by the limited availability of data for most of the countries studied. For example, school enrollment rates are easier to obtain than completion rates, even though they are less informative. Enrollment in vocational training at the secondary level, such as accounting or electrical repair, may be a better indicator of employment opportunities for larger numbers of the population than is tertiary training enrollment, but such disaggregated rates (by field and gender) are not available.

#### Indicator 1: Illiteracy Rates by gender

Illiteracy rates are the most important education indicators-more important than enrollment rates. According to UNESCO's definition, "[a]n illiterate person cannot, with understanding, both read and write a short, simple statement on their everyday life. A person who can write figures, his or her name or a memorized ritual phrase is not considered literate." (This definition does not include "functional literacy," whereby a person may be familiar with reading and writing but is unable to use them effectively to conduct everyday activities.) Of the 115.5 million women in Arab countries, 68.5 million-approximately 60 percent of the female population-are illiterate. The highest illitracy is found amond women 50 years and older. This high overall percentage hides marked variations between countries. Lebanon and Jordan have the lowest illiteracy rates (26.8 percent and 29.7 percent, respectively), followed closely by Bahrain (30.7 percent) and Kuwait (33.3 percent). Unfortunately, statistics are not available for Palestine, Qatar, and the United Arab Emirates, which are known for their high educational achievements. Countries with large populations such as Egypt, Morocco, and Algeria still have illiteracy rates over 50 percent. Sudan, with a population of 25 million, has the highest female illiteracy rate-88.3 percent.

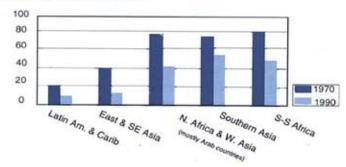
#### Indicator 2: Gender Gap in Literacy

In terms of educational performance by gender, the difference between the percentage of male and female illiteracy was calculated as the "gender gap". Kuwait has the lowest "gender gap" (10.4 percent), followed by Bahrain (12.8 percent), Tunisia (17.9 percent), Lebanon (14.6 percent), and Jordan (19 percent). The worst gender gaps are in Sudan (31 percent), Egypt

(29.1 percent), and Yemen (26.8 percent). This pattern of bigger gender gaps with low levels of literacy, and a closing gender gap as literacy rates increase, is consistent with that observed in other regions of the world. Cumulative illiteracy rates for all age groups do not reflect more recent improvements in education, because of generational differences and the historical disadvantage of women over 25 years of age. Age-specific illiteracy rates are needed to reflect more recent educational policies and investments. Such age-specific rates are not currently available for most Arab countries.

A regional comparison of illiteracy rates for women aged 20 to 24 shows that Arab countries made significant improvements between 1970 and 1990. In 1970, the Arab countries were second only to sub-Saharan Africa in their illiteracy rates, but by 1990 they had moved to third place, advancing ahead of the South Asia region. The lowest illiteracy rates among industrializing countries are in Latin America and the Caribbean and East and Southeast Asia.

ILLITERACY RATES FOR WOMEN AGED 20-24 BY REGION, 1970 AND 1990



#### Sources:

"World's Women" (United Nations Statistical Unit, 1991), p. 46.

[North Africa and West Asia include Somalia and Mauritania and exclude Cypress, Israel, Turkey, and Sudan].

#### Indicator 3: Enrollment at the Primary Level

Enrollment data are provided by schools and other educational authorities to the Ministry of Education. They offer an easy way of comparing numbers between boys and girls registered in schools, but are not always accurate. Over and under-reporting are not uncommon, depending on the political and social environment. Even when these data are accurate, they do not reflect the differences between boys and girls in absenteeism, repetition, and dropping out. UNESCO defines education at the primary level as usually beginning between the ages of 5 and 7, and lasting for about five years. When a pupil completes a primary education successfully, he or she should be literate—but that is not always the case. With crowded classrooms, inadequate teachers and books, and poor school supervision, many pupils finish primary school while still illiterate. If further education is not pursued the person remains illiterate despite attending school. Primary school enrollment shows few gender differentials in most Arab countries in the 1990s. If enrollment is the only measure we examine, more subtle and complex barriers to girls' education cannot be revealed.

# Indicator 4: Enrollment at the Secondary Level

Education at the secondary level occurs in two stages. At the first stage (junior or preparatory high school), it begins between the ages of 10 and 12, and lasts for about three years. The second stage, often called senior or secondary high school, begins between the ages of 13 and 15, and lasts for about four years.

Women's secondary-school enrollment advanced considerably in almost all Arab countries between 1980 and 1990. In Kuwait, the United Arab Emirates, and Bahrain, they are exactly the same as boys' rates. In most other countries for which data are available, they are over 40 percent, with the exception of Iraq (38 percent), Somalia (35 percent), and Mauritania (30 percent).

These data suggest that if a girl overcomes the poverty and social barriers that would otherwise prevent her from completing her primary education, her chances of getting a secondary education are very good.

### Indicator 5: Enrollment at the Tertiary Level

Tertiary or third-level education includes universities and colleges, and can be academic or technical. It most commonly begins between the ages of 17 and 19, and lasts for at least three or four years. Unlike other levels of education, there is some flexibility in that tertiary enrollment can occur at an older age.

Tertiary education is expensive because of the high cost of facilities and the need for highly qualified teachers. The discrepancy between increased opportunities for tertiary education and the lack of employment opportunities, particularly for women, is a net loss to society. Female high school graduates in many Arab countries continue to score better grades than boys. This has meant that, in some countries—such as Kuwait, Bahrain, Qatar, and the United Arab Emirates—many more women are enrolling in universities than are men. In other countries the ratio is quickly approaching equity with men.

These educational achievements of women should be a cause for pride and celebration among Arab countries, except for one problem. Employment opportunities for highly educated and trained women are not becoming available as fast as the educational opportunities. As a result, the investment made by the state in training women with proven intellectual and technical capabilities is not fully utilized. It also means that a hidden army of unemployed, educated, and trained women is confined to housework and childrearing and their numbers are not reflected in unemployment figures, because such figures do not exist for men or women.

# Indicators 6, 7, and 8: Female Teachers at the Primary, Secondary, and Tertiary Levels

Teaching was one of the first professions open to women in all Arab countries—which is also true in almost all parts of the world—making the number of female teachers an important and revealing indicator of women's employment opportunities.

Women are positively encouraged to be primary school teachers of both boys and girls, while male teachers are not commonly allowed to teach girls at this level in Arab countries. At higher levels of education the situation changes, and more male teachers become responsible for female students.

At the secondary level, most Arab countries employ equal or higher numbers of female teachers compared with male teachers. Also in Arab countries, most secondary schools are sex-segregated, and most of the teachers at girls' schools are female, while the faculty at boys' schools is predominantly male. This division is not absolute, however, and many hiring decisions are determined by the availability of teachers for specific subjects.

Tertiary teaching is still dominated by men in most Arab countries, partly because of the fewer numbers of women with an undergraduate university degree. Moreover, fewer women go on to earn Master's and Doctorate degrees, which are prerequisites for university teaching. Women are under extreme social pressure to marry and raise families by the time they finish their university studies, in their early or mid-twenties, and such pressure is difficult to resist. Furthermore, in the past most higher education was obtained abroad, at a time when it was not acceptable for women to travel and live alone in foreign countries. This situation is gradually changing as more women delay marriage or juggle married life with their academic pursuits, while others pursue their education in other countries with or without a husband.

# Indicator 9: Percent Female Students Enrolled in All Third-Level Institutions, by Fields of Study

The proportions of female students enrolled in the various subjects covered by tertiary education reflect employment opportunities for women. In industrializing countries, careers in the natural sciences, engineering, and medicine offer the most secure employment, the highest remuneration, and the greatest social prestige.

The Arab countries reveal no consistent pattern that would allow a meaningful analysis of female educational enrollment by subject. One important observation, however, is that—contrary to expectation—the proportion of female enrollment in science, engineering, and medicine in Arab countries is much higher than in many European and North American countries. This may be due to the fact that in sexually segregated secondary schools, there are no boys in the classroom to intimidate the girls or to make them feel intellectually inferior—and thus boys and girls receive science and math education of the same quality.

### Indicator 10: Female Education Index (FEI)

This index was developed by Population Action International<sup>3</sup> for 116 countries including 12 Arab countries. Some countries were excluded because the data was inadequate. Countries were scored on five indicators, each worth 100 points. The five scores were averaged to yield a total score on the FEI from 0 to 100. The five indicators are:

- Education attainment for women, measured by the average number of years of schooling for adult women.
- 2) Primary female-male enrollment ratio.
- 3) Secondary female-male enrollment ratio.
- 4) Gross primary enrollment rate for girls.
- 5) Gross secondary enrollment rate for girls.

This index is very useful in assessing the educational achievement of women at different levels in a country. It is then used to compare between the scoring of various countries. This index is problematic because it includes different points in history. The first indicator, the educational attainment of women, includes women of different generations. While the other four indicators measure the educational achievement of generations of women who are or should currently be in the education system. By including very different generations in the same index the historical diadvantage of some countries rank them at low level and does not reflect current practices. For example Saudi Arabia is ranked as performing poorly particularly because of high GNP and low FEI. The conclusion reached is that women's education is low because of the low status of women in that country. This conclusion is inaccurate. Regardless of how women's status may be evaluated in Saudi Arabia according to other criteria, at present, the country is investing heavily in women's education. But Saudi Arabia has a historical disadvantage because investment in women's education was started only after the acquisition of oil wealth and time is needed before the generation gap can be closed and women's education levels are improved.

Still the use of this and similar aggregate indices are very useful provided that conclusions made from them are made with caution. For Arab countries the expected correlation between levels of GNP and FEI is resonably maintained in almost all countries. That is, women's educational achievement increases as the GNP increases. Jordan stands out as the highest achiever in women's education (FEI 79.3) when compared to its income level. Egypt also scores high (FEI 66.9) despite its low GNP.

### CONCLUSION

Arab countries have come a long way in closing the gender gap in education over the past two decades. The remaining gap in illiteracy rates is partly due to the historical disadvantage of a generation of older women who had no access to education, and partly to a lack of educational facilities for women in rural areas in the poorer countries. The near-equal enrollment rates between males and females at the primary and secondary levels are very encouraging, although lower completion rates for girls may stand in the way of removing educational differences between men and women. Women's education at the primary levels is important for improving health and fertility indicators for society. Education at the secondary level further improve women's employment and vocational training opportunities. Tertiary education poses the greatest question for Arab women, since more of them are entering and completing this level, but many are not reaping its benefits in terms of employment. Further research is needed to explore what is happening to all the highly educated women who are not employed. Most of these women come from the middle classes where social attitudes and lack of appropriate job opportunities may be keeping them at home. If this hypothesis proves to be true, it should be a cause for alarm since precious educational investment is not being utilised for production.

#### Notes

 Sections of this chapter were extracted from Women's World 1970 - 1990 (United Nations Statistical Unit 1991).

2. Hind Khattab and Syada al-Daeif, as reported in Nadia Hijab, Womanpower (New York: Cambridge University Press, 1988), p 65-68.

3. Closing the Gender Gap: Educating Girls (Population Action International, Washington 1993).





EDUCATION INDICATORS

COUNTRY	% ILLITER/	ATE BY SEX	FEMALE	GENDER GAP IN
	MALE	FEMALE	EDUCATION	LITERACY
			INDEX *	
HIGH INCOME				
U.A.E			82.9	
KUWAIT	22.9	33.3	82.6	10.4
QATAR	3 <u></u>		<u></u>	2 <del></del>
MEDIUM-UPPER INCOM	Æ			
SAUDI ARABIA	26.9	51.9	56.3	25
BAHRAIN -	17.9	30.7		12.8
OMAN	—		61.7	
LYBIA	24.6	49.5		25
IRAQ	30.2	50.7	59.3	20.5
MEDIUM-LOW INCOME				
ALGERIA	30.2	54.5	61.1	24.3
TUNISIA	25.8	43.7	63.2	17.9
SYRIA	21.7	49.2	65.8	27.5
JORDAN	10.7	29.7	79.3	19
MOROCCO	38.7	62	46.1	23.3
LEBANON	12.2	26.8		14.6
DJIBOUTI	—	-		
PALESTINE	NA	NA	NA	NA
LOW INCOME				
EGYPT	37.1	66.2	66.9	29.1
YEMEN	47.0	73.8	24.1	26.8
MAURITANIA	52.9	78.6		25.7
SUDAN	57.3	88.3	-	31
SOMALIA	63.9	86		22.1

### Sources:

UNESCO World Education Report 1993.

UNESCO Statistical Year Book 1992.

World's Women 1970-1990, UN Statistical Unit 1991.

' From "Closing the Gender Gap: Educating Girls" (Population Action International, 1993).

@ Figure for the former Democratic Republic of Yemen only and does not include the former Arab Republic of Yemen.

# EDUCATION INDICATORS (Cont.)

COUNTRY	PRIM SCH FEMALES	ENROLL %	SEC SCH E FEMALE	NROLL %	UNIV ENR FEMALE	OLL %
	1980	1990	1980	1990	1980	1990
HIGH INCOME						
U.A.E	48	48	45	50	46	71
KUWAIT	48	49	46	48	58	65
QATAR	48	48	48	50	62	72
MEDIUM-UPPER INCOME						
SAUDI ARABIA	39	46	38	42	29	46
BAHRAIN	46	49	46	50	82	54
OMAN	34	47	24	_	30	47
LYBIA	47		40		25	
IRAQ	46	44	32	38	27	
MEDIUM-LOW INCOME						
ALGERIA	42	45	39	43	26	
TUNISIA	42	46	37	43	30	39
SYRIA	43	46	_	41	27	33
JORDAN	48	48	45	48	41	42
MOROCCO	37	39	38	40	25	37
LEBANON	47	-			36	39
DJIBOUTI	1 <u></u>	41				30
PALESTINE	NA	NA	NA	NA	NA	NA
LOW INCOME						
EGYPT	40	45	. 37	44	32	37
YEMEN	20.5	31	21		31.5	42 @
MAURITANIA	35	41	. 20	30		13
SUDAN	40		37		27	41
SOMALIA	36	34	27	35	_	20



### EDUCATION INDICATORS (Cont.)

COUNTRY -	% 3RD LEVEL	% FEMALE	% FEMALE	% FEMALE
COUNTRY	GROSS ENROLL	TEACHERS	TEACHERS	TEACHERS
	RATIO (% Of	PRIMARY	SEC SCH	3RD LEVEL
	TOTAL FEMALE	SCH	1990 (*1980)	1990 (*1980)
	POP) 1990	1990	1990 (1900)	1990 (1900)
	101/1/0	1990		
HIGH INCOME				
U.A.E	10.4	64	55	6
KUWAIT	16.7	69	52	10 *
QATAR	27.8	72	56	25
MEDIUM-UPPER INCOME				
SAUDI ARABIA	11.3	46	38	27
BAHRAIN	_	48	50	20
OMAN	4.3	47		_
LYBIA	15.3	1000	24 *	
IRAQ	9.8	69	53	16 •
MEDIUM-LOW INCOME				
ALGERIA		39	39	_
TUNISIA	6.8	45	32	22
SYRIA	14.8	64	41	17
JORDAN	23.5	64	43 •	13
MOROCCO	2.7	35	_	18 *
LEBANON	_	-		31
DJIBOUTI	_	_	_	—
PALESTINE	NA	NA	NA	NA
LOW INCOME				
EGYPT	12.6	52	39	29
YEMEN	1.5	25	20 @	16 @
MAURITANIA	0.9	18	—	_
SUDAN	2.3	<u></u> 2		12
SOMALIA		45	11	2011-201 

# Sources:

UNESCO World Education Report 1993.

UNESCO Statistical Year Book 1992.

World's Women 1970-1990, UN Statistical Unit 1991.

@ Figure for the former Democratic Republic of Yemen only and does not include the former Arab Republic of Yemen.

# EDUCATION INDICATORS (Cont.)

COUNTRY	EDUCATION	HUMAN ITIES	LAW & SOCIAL SCIENCE	NATURAL SCIENCE ENGIN, &	MEDICAL SCIENCE	ALL FIELDS
				AGRICULT	2	
HIGH INCOME						
U.A.E	90	76	60	61	75	70
KUWAIT	91	70	62	50	47	60
QATAR	76	83	68	34	-	71
MEDIUM-UPPER INC	OME					
SAUDI ARABIA	51	49	32	36	39	43
BAHRAIN	-		_	100 C	·	_
OMAN	53	53	39	31	59	49
LYBIA	_			<u> </u>		46
IRAQ	42	20	34	28	38	35
MEDIUM-LOW INCO	ME					
ALGERIA	46	_	33	30	38	34
TUNISIA	34	53	37	24	53	39
SYRIA	51	49	32	36	39	41
JORDAN	44	69	36	29	50	48
MOROCCO	17	45	35	29	36	36
LEBANON		- <u></u> -				
DJIBOUTI	_			-		-
PALESTINE	NA	NA	NA	NA	NA	NA
LOW INCOME						
EGYPT	47	49	31	26	44	37
YEMEN	1 <u></u>	- <u></u>		<u></u>		42 @
MAURITANIA	10	16	11	15		13
SUDAN	34	40	45	26	43	40
SOMALIA				<u></u>		







# WOMEN'S WORK: COUNTING THE GAINS AND THE COSSES

"W ben a labor force participation survey in Syria asked men wbetber

their wives worked, a large proportion replied: they did not. When the question

was repbrased, If your wife did not assist you in your work, would you be

forced to bire a replacement for ber?' the overwhelming majority answered YES."

Research on women in modernizing economies since the 1970s has uncovered a vast army of "invisible women" whose work may neither be reflected in national statistics nor be compensated in monetary terms, yet who work, on average, more hours than do men. Most of these "invisible women" work in agriculture or other family-run businesses, in the domestic economy, and elsewhere in the informal sector. The consequences of invisibility are serious: if these women are not recognized as workers, they are certainly not given access to the training, credit, and technology of modernizing societies.

In Arab countries, however, as in other parts of the world, statistics do not always reflect reality. In India, for example, when the International Labour Organisation's (ILO) revised definition of economic activity was applied, initial estimates that only 13 percent of all women were economically active had to be revised upward to 88 percent. Similarly, in Egypt, where 1990 figures show that women accounted for 11 percent of the total labor force, samples of rural households in lower Egypt revealed that half the wives plowed and leveled the land, and between 55 and 70 percent were involved in agricultural production. In Upper Egypt, between 34 and 41 percent were involved in agricultural production, and 75 percent were engaged in animal husbandry.2 If the definition of economic activity is expanded, like the ILO definition, to include rural Egyptian women's very arduous homebased work, the figures would be much higher.3 Faced with mounting evidence that women's economic activity is not well reported, data collectors have begun to revise their approach.

# CHANGING ROLES IN CHANGING ECONOMIES

"The economic pressures are so strong that any woman, veiled or otherwise, who lands a job tries to keep it in the face of growing unemployment."

Farida Nakkash in Womanpower: The Arab Debate on Women at Work, by Nadia Hijab)

As elsewhere, Arab economies have been shifting rapidly from a subsistence basis, where work is done primarily at home, to one where labor or skills are exchanged for wages in the marketplace. This shift has meant that both men and women, in rural and urban areas, have had to seek work outside the home or neighborhood, often moving from the countryside to the city, or even from one country to another, to do so. As a result of rapid population growth and urbanization, governments have found it hard to generate employment and maintain health, education, and welfare services. Unlike other parts of the world, though, modernizing Arab economies had not yet created a pressing demand for women's labor by the mid-1980s. Since then, worldwide recession has brought serious unemployment to all but a few oil-rich Arab states with small populations.

As economies modernize, and, for example, subsistence agriculture gives way to cash crops, women's tra-

<sup>&#</sup>x27;Much of the following chapter is extracted and adapted from Nadia Hijab, "*Women and Work in the Arab World*" (Washington, D.C.: Middle East Research and Information Project [MERIP], 1994). The Editor is gratful to Nadia Hijab and MERIP for giving permission to use this material.

ditional productivity is frequently undermined, without other income-generating avenues opening up. General ignorance of women's traditional productivity has repercussions not just for women but for the region as a whole. The region's import of food products has tripled over the past decade. By the year 2000, per capita food imports are expected to rise from \$100 to \$300 annually. Arab states, with just 4 percent of the world's population, import around 13 percent of the world's food output, and 20 percent of the world's cereals, using up hard currency that could be productively invested. This is partly attributed to economic mismanagement and to environmental factors. But the belief that Arab women have marginal roles in agriculture is also a contributing factor.<sup>4</sup>

The slow growth of women's participation in the modern work force reflects socio-cultural obstacles as well as the absence of new opportunities for women and a poor understanding of their traditional productivity. To draw an accurate picture requires an examination of three interlinked factors:

(1) the need for women's work, whether as a result of economic development or the need for more family income;

(2) the opportunities for women's work that are created through legislation, the removal of socio-cultural barriers, and expanding economies; and(3) the investment in women's abilities through education and training.

This framework would suggest that wherever there are pressing needs and opportunities for Arab women's work, socio-cultural obstacles do not intrude. Jordan, for example, has made substantial investments in women's education and training since the 1970s. When the country faced labor shortages because of extensive male labor migration to the Gulf states, a pool of skilled female labor existed from which to draw. The government actively promoted women's participation in the modern work force through consciousness-raising seminars and legislation. At a time as when inflation cut into family income, families actively encouraged participation of women in the labor force. The trend toward female participation in Jordan's modern work force slowed by the mid-1980s due to recession, and later as a result of the return of male labor migrants. The government's interest in women's labor has waned, as has happened in other societies under similar circumstances (for example, in Britain and the United States after World War I and World War II). Yet families' need for women's income has remained high,

leading to serious female unemployment. Jordan's Business and Professional Women's Club organizes skill training and focuses national attention on women's pressing need for wage employment.

By contrast, in the Arab Gulf states, although there is a high demand for labor power and there have been substantial investments in education, women's labor force participation remains low. This is because, among other things, oil wealth has allowed governments to import foreign labor. The need for women's income at the family level, moreover, is not as pressing as it is in poorer Arab countries. Here again, economic factors are important to an accurate understanding of women's labor force participation.

# THE ACHIEVEMENTS

Arab women account for a small but visible share of the professional class in the region. In all Arab countries, without exception, there is no shortage of role models. The achievements of Arab professional women are broadcast widely through their presence in the media: the first Jordanian woman pilot, the first Qatari woman broadcaster, the first Egyptian woman film director, a Sudanese marine biologist, surgeons, civil engineers, archeologists, ambassadors, graphic artists, composers, and many others. In some countries, women are also well represented as writers and university professors, in addition to the more traditional role as teachers and nurses.

But excellence and ingenuity are not restricted to professional women. When Arab women cannot find wage employment in the modern work force, as women elsewhere, they create productive roles in the informal sector—food production, domestic service, piece work, or child care—for cash or in-kind services. They are also active in family-run businesses as paid or unpaid partners. The scale of women's activity in the informal sector, which is poorly reported and where workers enjoy few rights, has been documented in studies in several Arab countries and is essential to the economy of the region.<sup>5</sup>

### THE ECONOMIC INDICATORS

Of all the world's regions, women in Arab countries perhaps suffer from the worst case of invisibility. The official figures on women's employment reported from the Arab region are so low compared with other regions that the question arises as to whether women in this region face specific constraints over and above those women face worldwide. More specifically, do Arab women face greater cultural or social constraints as they seek entry into the modern work force? There is no definitive answer to these questions, but it is clear that the Arab world does attach great importance to its cultural identity and to the role of women in preserving this heritage. Traditionally, it was a sign of elevated status for a woman to stay at home and be supported by male relatives. But this ideal was one that only an elite class could afford to maintain. These attitudes, however, may partly explain the slow momentum of integrating women fully in the workforce.

# Indicator 1: Percent of the Population Over 15 Who Are Economically Active

This indicator has different meanings in different economies. In modern economies it reflects the proportion of the population who have reached employment age and are engaged in wage labor. In predominantly agricultural subsistence economies it reflects a mixture of wage and nonwage labor. For example, Somalia's high levels (53 percent) of economic activity are due to the inclusion of women's work in the agricultural sector in reports from that country. This is probably also true of Sudan (25 percent). In Kuwait, where the economic activity level is fairly high at 24 percent, women are principally employed in service and professional jobs. Tunisia's rate of 26 percent reflects mixed economic activity and the generally favourable climate for women's education and autonomy in that country.

The difference between men and women in the levels of formal and/or reported employment is vast in almost all Arab countries. This difference contrasts strongly with the almost equal levels of educational enrollment reflected in the educational statistics at all levels. Two factors may explain this large discrepancy. The first is that women's economic activity, particularly in the informal sector, is under-reported, while men's informal work is recorded. The second is that women who are educated and trained do not find suitable jobs, become discouraged and leave the job market. Egypt's employment profile would seem to fit this description.<sup>6</sup>

# Indicator 2: Percent Annual Growth in Economic Activity

This indicator brightens the otherwise bleak picture of women's employment status in Arab countries. In almost all countries the percent annual growth rate in economic activity for women is higher than it is for men. But the starting points are so low and the difference is so small, that the gap is unlikely to be closed in the near future if current trends continue. The growth in economic activity may also be an artifact if it is the result of improved reporting of previously existing women's work.

# Indicator 3: Women as a Percentage of the Labor Force

This is probably the most important summary indicator of women's participation in formal employment. As recently as 1990, figures of women's recorded participation were below 10 percent of the total labor force in seven Arab countries: Algeria, Iraq, United Arab Emirates, Saudi Arabia, Qatar, Oman, and Libya. It is important to remember that data from these oil-rich countries reflect only the economic activity of women nationals, who constitute just a proportion of the economically active female population. Additional large numbers of women migrants and contract workers are employed in domestic service, retail, and schools in these countries (with the exception of Algeria) and are not included in the formal statistics even though their overall economic contribution is significant.

# Indicator 4: Actual Number of Women Reported as Economically Active

This indicator is included to show the actual number of women employed and to calculate an estimate for the percentage of women reported as economically active for the region as a whole. It was computed on the basis of the 1991 population figures, with the assumption that women constitute approximately 50 percent of the population and that the proportion of those 15 years and over is approximately 50 percent, which is the average for societies with high levels of fertility.

# CONCLUSION

Of the 115.5 million women living in Arab countries 57.6 of them are over 15 years old. Only 9.4 million of these, a mere 16%, are reported as economically active. But national statistics on women's participation in the labor force and women's economic activity in Arab countries are incomplete and few detailed analysis are available. This makes drawing clear conclusions difficult, if not impossible. As in other parts of the world, they also depend on the ways in which labor force participation and economic activity are defined and measured. If reports of formal wage employment are to be accepted, then women's unemployment in Arab countries is at an alarmingly high level, particularly for the growing number of women with secondary and tertiary education. If women's economic activity in the informal sector and home-based work are included, women's overall economic contributions are likely to approach those of men. The great disparities of female employment rates among countries of the region with similar economic profiles suggest the important role of government policy in encouraging both training and job creation. This is an area where better conceptualization and focused research are needed.

### Notes

1. From M. Chamie, Labour force participation of Lebanese women, in Julinda Abu Nasr, et al, eds., Women, Employment and Development in the Arab World, (Berlin: Mouton Publishers, 1985), p. 99. Emphasis added.

2. Nadia Hijab, Womanpower: The Arab Debate on

women at Work (New York: Cambridge University Press, 1988).

 Barbara Ibrahim, Strategies of Urban Labor Force Measurement Cairo papers in Social Science Vol. IV, 1983 (Cairo: American University Press).

4. Nadia Hijab, *Women and Work in the Arab World* (Washington, D.C.: Middle East Research and Information Project [MERIP], 1994).

5. Barbara Ibrahim, Policies Affecting Women's Employment in the Formal Sector: Strategies for Change, in World Development, vol 17, no 7, July 1989.

6. Barbara Ibrahim and Hanna papanek, *Economic Participation of Egyptian Women: Implications for Labor Force Creation and Industrial Policy* Report to the United States Agency for International Development (USAID) Cairo, December 1981.

# RATIO OF ECONOMICALLY ACTIVE FEMALE POPULATION TO 100 MALES, BY OCCUPATIONAL GROUP, IN SELECTED ARAB COUNTRIES, 1980

COUNTRY	ADMININSTRATION & MANAGEMENT	CLERICAL, SALES & SERVICES	PRODUCTION, TRANSPORTATION & MANUAL LABOR	AGRICULTURE, HUNTING & FORESTRY
BAHRAIN	4	20	0.5	0.2
EGYPT	16	23	6	26
KUWAIT	4	43	0.2	0.4
MOROCCC	34	26	6	26
SYRIA	49	7	4	34
TUNISIA	27	22		25
U.A.E.	1	9	0.1	0.1

### Source:

World's Women 1970-1990. UN Statistical Unit, 1991.

# ECONOMIC INDICATORS

COUNTRY	% PO	PULATION	% ANNI	JAL	WOMEN AS	NO. OF WOMEN
15 & C		OVER	GROWTH IN		% OF	ECONOMICALLY
	ECON	OMICALLY	ECONOMIC		LABOR	ACTIVE
	ACTIV	/E	ACTIVI	ΓY	FORCE	
			1970-19	90		
	FEMA	LE MALE	FEMALE	MALE		
HIGH INCOME						
U.A.E	18	92	13.2	11	6	48,000
KUWAIT	24	85	10	5.9	14	120,000
QATAR	17	93	13.7	6.6	7	13,000
MEDIUM-UPPER						
SAUDI ARABIA	9	84	6.9	4.8	7	282,000
BAHRAIN	18	88	13	6.5	10	23,000
OMAN	9	84	5.8	4.1	8	34,000
LYBIA	9	77	5.9	3.6	9	95,000
IRAQ	21	77	10.3	3.3	6	1,043,000
MEDIUM-LOW I	NCOME					
ALGERIA	8	75	6	3.4	4	543,000
TUNISIA	26	78	7.3	2.8	13	635,000
SYRIA	15	78	5.8	3.4	15	488,000
JORDAN	9	77	5.2	2.6	10	99,000
MOROCCO	19	81	5.8	3.1	20	1,480,000
LEBANON	25	72	3.8	1.2	27	249,000
DJIBOUTI	_	<u> </u>				
PALESTINE	NA	NA	NA	NA	NA	NA
LOW INCOME						
EGYPT	9	80	4.6	2.4	11	1,359,000
YEMEN	10	48	5.2	1.7	13	303,000
MAURITANIA	24	87	2.6	2.4	22	140,000
SUDAN	24	87	3.3	2.8	29	1,668,000
SOMALIA	53	88	2.5	3	39	762,000
TOTAL						9,384,000

# Source:

World Women 1970-1990. UN Statistical Unit, 1991.









# WOMEN'S RIGHTS: TOWARDS GREATER EQUALITY IN THE LAW

" $m{T}$  bose who interpret the rulings of Shari'a are men, and those who pass

### laws of all description are men."

# Ahmed Bahaaeddin,Senior Egyptian journalist and opinion leader, quoted in Al Ahram newspaper, May 12, 1985

This review provides a broad comparison of the legal status of women in various Arab countries, in light of the rights given to them in national constitutions and civil laws. National laws are one indicator of the extent to which social equity for women has been achieved.

But establishing written laws is no guarantee of their application by the courts, by the police, or by society. Ignorance of the law and lack of access to legal defense remain strong barriers to women's enjoyment of their legal rights, when such rights exist. And judicial custom and cultural values often supersede the power of the law, unless they are systematicaly challenged.

This legal profile is based on a review of official documents, published articles, and commentary by knowledgeable individuals in Arab countries. Personal interviews were conducted with lawyers and others with strong backgrounds in legal research.<sup>1</sup> Consulting a variety of sources ensured the collection of information that has never been put together in a single document before. In the process, many information gaps were uncovered and the need for further research became clear.

All Arab countries were included in the preliminary search for data. The primary goal was to compile a comprehensive survey of Arab constitutions and legislations concerning women in a concise, easily accessible format. The limitation of time and resources and the lack of easy access to legal sources in some countries limited the final data set to the following Arab countries: Egypt, Libya, Sudan,<sup>2</sup> Syria, Lebanon, Jordan, Tunis, Morocco, Bahrain,<sup>3</sup> Yemen,<sup>4</sup> and the United Arab Emirates. Information from other countries was not sufficient to include them in this report. It is important to note that almost all legal systems in Arab countries are stated to be based on Islamic jurisprudence, particularly with regards to family law, despite despite the wide variations in interpretation and areas of application.

CONVENTION ON THE ELIMINATION OF ALL FORMS OF DISCRIMINATION AGAINST WOMEN (CEDAW) ADOPTED IN 1979 AND ENTERED INTO FORCE 1981

- The Charter of the United Nations reaffirms faith in fundamental human rights, in the dignity and worth of the human person and in the equal rights of men and women.
- The States' Parties to the International Covenants on Human Rights have the obligation to ensure the equal rights of men and women to enjoy all economic, social, cultural, civil and political rights.

With regard to international law, it is important to note that only a few Arab countries have ratified and/or signed the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW).

As of early 1994 it had been ratified by only four Arab countries (Egypt, Tunis, Iraq, and the Democratic Yemen Republic prior to unity) and signed by only one, Jordan. Egypt ratified with reservation on article 16, which deals mainly with items relating to family law. While reviewing the legislation of the countries that ratified or signed CEDAW, it is important to consider to what extent national laws are consistent with the articles of the convention. It is also interesting to note to what extent the ratification of the Convention made any difference to the situation of women in these countries, compared with that of women in countries that have neither signed nor ratified CEDAW.

# THE LEGAL INDICATORS

For this report, seven indicators were selected as representative of areas in the law that have a direct effect on women's lives. The selection of indicators was based on their importance as well as ease of access given the available resources. One important omission, because of these limitations, is the area of inheritance law, which affects women's access to property and resources in this region. Within each group, two or three sub-indicators were selected for comparative purposes.

# Indicator 1: Equality Before the Law

Equality within the constitution. The constitutions of Egypt, Syria, Lebanon, Libya,<sup>5</sup> Tunis, Morocco, Jordan, Bahrain, Yemen, and Sudan<sup>6</sup> all affirm, unconditionally, the equality of men and women and the right to live without discrimination.

The constitution of the United Arab Emirates stipulates that there can be no discrimination against citizens on the basis of origin, residence, beliefs, or social class-implying that discrimination on the basis of gender is permissible.

The right to enter into a contract and own property. The focus here is on laws governing ownership of money and transaction of money and property. These rights have been granted by law to women in at least 10 countries: Egypt, Syria, Lebanon, Libya, Tunis, Morocco, Jordan, Bahrain, Yemen, and Sudan. It is significant that Islamic Shari'a law states clearly that women can sign contracts themselves and control financial assets separately from their husbands. They may also own property without any conditions or regulations, and conduct financial or business dealings without the approval of their husbands.

In Lebanon, a law will soon be enacted to give women the right to enter into business dealings without the approval of their husbands.

The right to travel. This area of the law is of particular importance for Arab women, since a variety of prohibitions limit their basic right to freedom of movement, as stated in the Universal Declaration of Human Rights. There are wide discrepancies between and within countries regarding the extent of the limitations put on women's right to travel. For example, the limits imposed on married women are different from those to which unmarried women are subject.

Sudan has the most restrictive travel conditions for women. Based on an administrative regulation, the Numeiri regime and all governments that followed it enforced the law that requires a woman, regardless of her age or marital status, to have the consent of her male guardian if she wishes to obtain a passport. Guardians are fathers and brothers, who, in some cases, may be teenagers who are given authority over mature older sisters. A woman must also get her guardian's approval every time she requests an exit visa. This situation is ironic since, in Sudan, many women occupy high professional and academic positions that entail participation in regional and international conferences. Sometimes a Mehrem, or male guardian, is required to travel with an unmarried woman. This regulation is in clear violation of the Sudanese constitution.

In Egypt, the male guardian, father, or brother must give his consent if an unmarried woman wishes to obtain a passport. Married women must have their husbands' written consent before they can be issued a passport. The husband also retains the right to forbid his wife from traveling, even if she has a valid passport.

In Morocco, a wife is able to obtain a passport without her husband's consent but, should he object to her travel, the passport may be cancelled.

In Libya, Lebanon, and Jordan the wife must have her husband's consent to be issued a passport, but if he gives her that consent he cannot then prevent her from traveling unless he obtains a court order.

Syria, Tunis, and Bahrain have the least restrictive laws, but they still discriminate according to marital status. Unmarried women must have the consent of their fathers if they want a passport, but a wife who applies for a passport does not need her husband's consent, and he cannot stop her from traveling unless he secures a court order.

In the United Arab Emirates, the constitution stipulates that travel and change of residence are free for all citizens according to the law. No specific text of the law was found to clarify the status of women's right to travel.

## Indicator 2: Political Rights

Right to vote and right to run for elective office. In Egypt, Syria, Lebanon, Jordan, Libya, Tunis, Yemen, and Morocco, women and men have equal political rights in voting and in running for public office. Women in all these countries are represented in the legislative, parliamentary, and local municipal bodies.

In Sudan the right to vote and nominate oneself for election is legally granted to women. This right may be rendered ineffective by other laws that require women to obtain permission from their husbands or guardians to take part in political activities. If the guardian does not grant permission or grants it and then withdraws it at a later date, the woman's position could be severely compromised. At present, democracy in the country is on hold for all citizens. In Bahrain, the constitution is currently suspended, together with all other political rights. Bahraini and Sudanese women are at least equal to men in the suspension of all aspects of their political rights. It is noteworthy to mention that in Bahrain, as early as 1921, women participated by voting in the elections for local councils, although they did not run for office.

The constitution of the United Arab Emirates stipulates that there should be a local council for each of the six states that make up the Union, parallel to the National Council. Each state has the right to choose the means through which it will choose representatives. The constitution does not mention "elections" but rather "selection." Furthermore, the text does not mention men but speaks of citizens without any gender differentiation, even though no woman has yet been represented on a local council.

Finally, Kuwait does not grant women any political rights, whether to vote or be elected for public office. This issue has been a galvanizing force and a high priority for the women's movement in that country.

### Indicator 3: Educational Rights

Equal right to education and laws on compulsory education. In most of the Arab countries there is no discrimination between men and women in the field of education, either in quality or degree. No evidence was found in any legal documents of limits or restrictions on women's education, be they constitutional, legal, or administrative. In general, women may apply for any advanced degree without any restriction in any field of study. Education is one area where equal rights of access to all levels and fields are protected by the law in the Arab world. This may explain women's clear achievements and the narrowing gender gap in the field of education.

The University system in Sudan inherited the British system, and "women's quotas" were established in some fields, for example in the faculty of medicine. This system was abolished in the 1970s, and by 1985 women constituted 50 percent of medical school enrollees. This increased enrollment has provoked some conservative groups, who are demanding the return of quotas to limit the number of women in the prestigious faculties of agriculture, engineering, and medicine.

In general, compulsory education for girls and boys has been provided and stipulated by legislation throughout the Arab world. It is the legal duty of families to send their daughters to school as they do their sons. To reinforce this equity, Bahrain is about to approve a law that makes education compulsory for both girls and boys.

This study does not address the considerable problems surrounding the application of laws regarding the education of women, the limited numbers who complete school, or the barriers women still face in some fields of study. It also does not address the social reasons that compel girls to drop out of compulsory (primary) education. As the educational statistics indicate, women are still socially disadvantaged in the area of education, regardless of decades of laws mandating equality.

### Indicator 4: Employment Rights

The right to work, the right to hold public office, equal pay, and maternity laws. In examining the enabling environment created by legislation, Arab labor laws regarding women were found to be generally fair by international standards. Nearly all employment laws and regulations in the countries under study give women equal employment rights without any limitations or restrictions. In most texts there is specific mention of equal pay for equal jobs.

In Egypt the laws protecting women's right to employment have been in effect since the 1960s. Some recent evidence suggests that, in practice, informal discrimination limits many jobs to men, or offer women the option to work half time for half pay, may force women out of the labor force due to unfair competition. A draft law is under parliamentary debate to legitimize these discriminatory practices. Women are mobilizing against this law, and the National Women's Council concluded that such a law would contradict the constitutional protection of equality under the law.

Legislation in areas such as maternity leave, time off for child care, and protection from dismissal because of pregnancy is also adequate in Arab countries. However, as elsewhere, application of the law is better in the public sector than in the private sector. For example, in Egypt, where the law requires companies to have on-site child-care facilities when they employ over 100 women, many stopped just short of employing that number. With structural adjustment and privatization under way in Egypt and other North African countries, the threat to equitable conditions of employment for women may be increasing.

LAWS GOVERNING	MATERNITY	PROTECTION,	1984

COUNTRY	MATERNITY LEAVE	% WAGES PAID DURING LEAVE
ILO RECOMMENDATION	12 WEEKS	2/3 SALARY
ALGERIA	12 WEEKS	50
BAHRAIN	45 DAYS	100
EGYPT	50 DAYS	100
IRAQ	10 WEEKS	100
JORDAN	6 WEEKS	50
KUWAIT	70 DAYS	100
LEBANON	40 DAYS	100
LIBYA	3 MONTHS	100
MOROCCO	12 WEEKS	50 FOR 10 WEEKS
OMAN	45 DAYS	100
SAUDI ARABIA	10 WEEKS	50 TO 100
SUDAN	8 WEEKS	100
SYRIA	50-60 DAYS	50-70
TUNISIA	30 DAYS	2/3 SALARY
UAE	45 DAYS	50 TO 100

### Source:

Nadia Hijab, Womanpower: The Arab Debate on Women at Work (New York: Cambridge University Press, 1988).

One field of public sector employment of particular interest to the researchers is women's appointment as judges, and the legislation that provides or hinders that right. In places where no legal barriers exist, the issue is whether women do hold judicial positions in various Arab countries.

It was found that in six Arab countries, women have been holding judiciary positions for many years (Syria, since 1953; Tunis, since 1970; Libya, since 1984; Morocco, since 1956; Sudan, at least since 1976).<sup>7</sup> They may serve as both civil and criminal judges, except in Morocco, and at all levels- local, appeal, and supreme courts. They may also serve as administrative and district attorneys, as well as on the Judiciary Council. In Morocco women are only allowed to become civil judges.

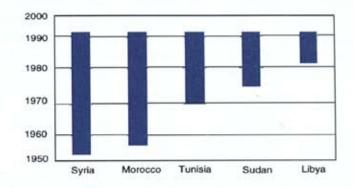
In Tunisia, specialists commented that in the near future women may become the majority in the judiciary system, due to their increasing numbers over the years. In Syria, experts claim that some judiciary departments consist of all-women "tribunal judges". They also reported that many judiciary circuits are headed by women, with two or more male members. In Libya the rationale for accepting women judges is the absence of any Quranic verse that prevents a woman from holding such a position.

On the other hand, women in Egypt, Jordan, Bahrain, Yemen, and the United Arab Emirates do not hold judiciary positions. This is not based on any written laws or on the constitution, but is a tradition of the legal profession. Some legal experts from these countries believe that preventing women from becoming judges is a violation of their constitutional right to equality. They also pointed to the fact that women in these same countries are accepted as lawyers on the same level as men. In Egypt, for example, even though women do not work in the judiciary system, they work in the Organization of Civil Cases as government lawyers, and in the Administrative Justice Department, where the prerequisites for their jobs are the same as those for judges.

During the National Women's Conference in Egypt in June 1994, it was proposed to the High Judiciary Commission that women should have open access to judiciary positions, but no response has been received yet.

Women in all Arab countries may work as lawyers. For example, women lawyers in Libya account for onethird of the total number of lawyers in the country.

#### WOMEN JUDGES IN FIVE COUNTRIES



#### Indicator 5: Reproductive Rights

Right to fertility regulation. Specialists in the region have noted that a woman's right to use family planning methods is usually de facto, and does not require legal permission. There are generally no laws to enforce the use of family planning, either. Many legal specialists from Morocco, Tunis, and Lebanon believe that fertility regulation is a private matter, to be decided by individuals and couples without interference from the government. The Syrian legal specialist in this study noted that since the Syrian government does not perceive a population problem, there is little public discussion of family planning. However, there is growing sentiment in the region that family planning should be seen in light of universal rights to health regardless of a countries fertility policy.

In Egypt the government encourages the use of family planning methods to combat rapid population growth, but does not allow coercion. While there is no known law to prohibit surgical sterilization of either men or women, most government hospitals in Egypt will not provide this service on demand. This fairly recent trend is linked to some religious leaders who believe that Islam prohibits irreversible methods of contraception. Sterilization is freely allowed in other Muslim countries, including Tunisia, Morocco, and Algeria.

### Laws regulating HIV/AIDS

As more countries recognise the threat of the HIV/AIDS epidemic legislations are passed to contain it. In Bahrain, Lebanon, and Oman (and most likely other countries) HIV infection is a notifiable disease Egypt requires all foreign residents to be HIV tested. In Lebanon and Oman testing for HIV is mandatory before blood and organ donations. Some countries, like Oman, have laws that stipulate the state's right to deport foreigners with proven AIDS infection.\*

### Prohibition of female circumcision

Female circumcision is not practiced in Syria, Bahrain, Jordan, Morocco, Tunis, Lebanon, Libya, Saudi Arabia, Kuwait, or the Gulf countries. It is, however, practiced widely in Egypt, Sudan, Somalia, Djibouti, and Mauritania, and to an unknown extent in Yemen and Oman.

Infibulation was illegal in Sudan under British rule, but the "milder" form of female circumcision, clitoridectomy, was not mentioned in that law. The law remained on the books until 1983, when it was dropped with the passage of the first Islamic Penal code and no mention of the practice was made. Very few cases were ever brought to court over the years. Since the law was dropped, it has remained unclear whether infibulation can be prosecuted under the general section of the Penal Code covering physical injury.<sup>9</sup>

In Egypt no law was ever passed against the practice. A Ministry of Health regulation in the 1960's limited its practice to licensed health professionals working under hygienic conditions. Later, in the mid 1970's, the regulation became more restrictive, prohibiting all trained health personnel from performing the operation. As in Sudan, prosecution is very rare.

In Somalia no law has ever been passed against female circumcision despite strong government opposition to the practice under Siad Berri's regime. No reliable information is available on this practice in Mauritania, Djibouti, Yemen, and Oman.

### Laws regulating abortion

Abortion is legal on demand only in Tunisia, for up to 12 weeks after conception, and the husband's approval is not required. The legalization of abortion in 1967 was based on an Islamic interpretation that the fetus is not considered a human being until it becomes "ensouled" at the time of quickening, even though it is alive and growing like a plant. Quickening occurs at around the twelfth week of pregnancy.

In a regional conference sponsored by the International Planned Parenthood Federation, Arab World Region, the question of the position of Islam and abortion was raised. Dr Mohammed Said Ramadan al-Boutti, professor of Islamic Law at the Sharia Faculty in Damascus, stated that for a pregnancy under 40 days, "Social abortion- whether to protect the health of the mother or her other children, or to ensure better living standards for the family- is regarded by the Sharia Law as disliked, but permissible. It is a license, but cannot be an intention from the beginning: in other words the pregnancy must have been a mistake." For a pregnancy over 40 days, he added, Islam does not allow abortion for social reasons, but "medical abortion" is permitted when the pregnancy endangers the life of the woman, threatens the health of the woman or an existing child, but only during the first four months of pregnancy up to the 'quickening' or 'ensoulment'. He added further that "Even in the case of pregnancy resulting from adultery, if the woman knows that her pregnancy would cause her death or would lead to the killing of herself or anyone else, or if the newborn child would be abandoned, she may have an abortion".10

Senior Islamic scholars in Sudan, including the grand mufti in 1976, held the view that abortion should be permissible, though disliked, to preserve the mothers health and well being provided that the pregnancy is under 4 months.<sup>11</sup> <sup>12</sup> These scholars did not have a chance to modify existing laws because of the political instability in that country.

Criminalization of abortion was adopted in Arab countries together with other aspects of British and French laws during colonization. Most have not been reviewed since then. At present, abortion is restricted to different degrees in different countries. The most restrictive laws, in force are in Egypt, Libya, Mauritania, Sudan, Somalia, Syria, Iraq, and Lebanon, allow pregnancy termination only when the pregnancy poses a serious threat to the mother's life. In Algeria, Morocco, Jordan, Saudi Arabia and Kuwait, abortion is permitted if the pregnancy puts the mother's health, but not necessarily her life, at risk.<sup>15</sup>

Abortion law in Saudi Arabia states that; "In the first 40 days of pregnancy, and if abortion is deemed necessary to accomplish a legal benefit or to prevent an exprected harm, abortion may be allowed".<sup>14</sup> It is not clear what constitutes a legal benefit or an expected harm. However, Saudi Arabian law clearly states that abortion is not allowed for, social, economic or contraceptive purposes. Kuwait also allows abortion if the fetus is known to be deformed. In Jordan and Sudan, abortion is also legal in cases of court rulings of rape and incest.

# GROUNDS ON WHICH ABORTION IS LEGAL

COUNTRY	MOTHER'S LIFE	MOTHER'S HEALTH	FETAL DEFORMITY	JUDICIAL RULING (RAPE & INCEST)	SOCIAL REASONS	ON REQUEST
Algeria		YES				
Egypt	YES					
Iraq	YES					
Jordan		YES		YES		
Kuwait		YES	YES			
Lebanon	YES					
Libya	YES					
Mauritania	YES					
Morocco		YES				
Saudi Arabia	YES	YES		YES * (?)		
Somalia	YES					
Sudan	YES			YES		
Syria	YES					
Tunis						YES

# Source:

Christopher Tietze and Stanley Henshaw, "Induced Abortion: A World Review," 6th edition, and 1990 Supplement (New York: The Alan Guttmacher Institute, 1986).

Reed Boland and Jan Stepan," Annual Review of Population Law, 1990" vol 17. (New york and Cambridge: UNF A and Harvard Law School Library, 1993).

Saudi Arabia Law permits abortion for "legal reasons" which are not further clarified.



# Indicator 6: Nationality Law

The right to grant nationality through the mother. In all the countries under study except Tunisia,' children have the right to nationality through their father but not through their mother. In other words, only the father has the right to give his nationality to his children, whether his wife is of the same nationality or not. If a mother is married to a foreigner, she cannot give her nationality to her children, even if she is divorced, deserted, or abandoned. As a result, thousands of women face severe difficulties in raising their children in their home countries. In many cases the children become stateless persons with no educational, health, and employment rights in any country. This situation occurs even if the father is from another Arab country-a common occurrence with the increase in labor migration to the Gulf countries.

Legal specialists agree that this law is unconstitutional since it discriminates on the basis of gender. There is a

strong movement presently in Egypt to amend the law. In Libya women are legally prohibited from marrying non-Arabs, and men can only do so with written governmental approval.

The Tunisian nationality law is the only one that gives the mother the right to participate in choosing her children's nationality if the father is not Tunisian. It is the only country in the Arab world that gives nationality according to maternal linkage as well as paternal linkage.

### Indicator 7: Family Law

Family laws are probably the most widely publicized and contested by Arab women because of gender disparities. Despite a long history of struggle to liberalize these laws, only a few have been reformed over the years. This is a partial reflection of strong opposition to change from some quarters of the religious establishment. The following tables summarize the gender specific nature of family law in selected Arab countries.

COUNTRY	LEGAL MINIMUM AGE AT MARRIAGE	CONDITIONS
Bahrain	not specified	According to Islamic Shari'a (at puberty or when menstruation starts).
Egypt	16	Illegal under age.
Jordan	18	Must have reached puberty in all cases. Under-age marriage requires a court order.
Lebanon	variable	Depends on each religious group.
Libya	21	Before legal age, a court order is required.
Morocco	16	Under-age marriage requires a court order.
Sudan	Puberty	May be as young as 11 years. A girl could be married at 10 years if her guardian convinces the court that there is a benefit to her.
Syria	18	Between the ages of 15 and 17, a court order is required.
Tunis	17	Under-age marriage can be permitted only by a court order.
Yemen	not specified	According to Islamic Shari'a (at puberty or once menstruation starts).

' Lebanon passed a nationality law during the publication of this report. The new law is reported to give a woman the right to grant her nationality to her children and her foreign born husband.

### LEGAL AGE AT MARRIAGE FOR WOMEN

# CONSENT TO MARRIAGE AND THE RIGHT TO SIGN MARRIAGE CONTRACT

COUNTRY	WOMAN'S RIGHT	FATHER'S / GUARDIAN'S RIGHT	COURT INTERVENTION
Bahrain	NO. Father's/guardian's attendance mandatory.	YES. Father can annul marriage for any reason he chooses.	YES. Court can annul marriage according to father's wish.
	YES. Divorcee or widow can marry without permission.		
Egypt	YES. May marry without consent	NO. Can request annulment through court on basis of incompatibility.	YES. May interfere in cases of dispute.
Jordan	YES. Full rights to marry at will.	NO. Strict rule prohibiting father from interfering.	YES. In favor of woman. Father can be held in contempt of court if he interferes.
Lebanon	YES. If woman is of legal age. Under legal age father's consent is mandatory.	NO. Except if under legal age. Cannot annul marriage after it occurs.	NO. Court consent needed for marriage under legal age.
Libya	NO. Father or court has to approve marriage.	YES. Approval mandatory	YES. Marriage may be annulled by father/guardian.
Morocco	NO. Father's/guardian's consent mandatory.	YES.	YES. In cases of dispute final decision left to judge.
Sudan	NO. Only father/guardian can sign the contract.	YES. Absolute right.	YES. May intervene in cases of dispute
Syria	NO. Needs father's consent except with "Urfi" or civil marriage.*	YES. Father's consent mandatory	YES. Court could accept "Urfi" marriage if already consummated."
Tunis	YES. Full right to enter marriage at will.	NO.	NO. Court intervention not permitted.
Yemen	NO. Presence of father / guardian mandatory.	YES.	YES. Court may replace guardian when there is none.

"An "Urifi" marriage is a civil marriage or a marriage not performed through a relegious sheikh.

# THE RIGHT TO DIVORCE

COUNTRY	HUSBAND HAS	WIFE'S	DIVORCE	WIFE'S RIGHT	
COUNTRY	REPUDIATION RIGHT	RIGHT TO DIVORCE	ONLY THROUGH COURT	TO INITIATE DIVORCE <sup>b</sup>	NOTES
Bahrain: <i>Sunni</i>	YES	YES	NO		According to the Sunni sect, divorce is the absolute right of the hus band. A wife may ask for a divorce, but the judge will approve it only with much difficulty.
Bahrain: <i>Ga'fari</i> (Shiite)	NO	-	YES	-	According to the Ga'afari sect, divorce must take place before the judge.
Egypt	YES	YES	NO	YES (rare)	A husband may divorce his wife, but he is obliged to notify her beforehand. A wife may ask for a divorce from the court on a limited basis, and may be grant- ed it only after all stages of litigation are completed.
Jordan	YES	YES	NO		The husband has an absolute right to divorce, and the wife has the right to ask for indemni- ty. The wife can ask for divorce due to disagree ment and conflict.
Lebanon: Sunni	YES	YES	NO	Through court	A Sunni has the right to divorce without the approval of the wife. She may go to the judge soliciting divorce.
Lebanon: Shiite	YES	NO	NO	NO	A Shiite divorce is the absolute right of the man. The wife has no right to ask for divorce, for any reason.

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THE RIGHT TO DIVORCE (Cont.)

COUNTRY	HUSBAND HAS REPUDIATION RIGHT*	WIFE'S RIGHT TO DIVORCE	DIVORCE ONLY THROUGH COURT	WIFE'S RIGHT TO INITIATE DIVORCE <sup>10</sup>	NOTES
Libya	NO	YES	YES	- ,	Divorce takes place only before the judge. If wife refuses divorce, judge
					denies it.
Morocco	NO	YES	YES		Divorce takes place only before the judge. An attempt must be made to reconcile before divorce takes place. A husband's request for divorce <u>must</u> be granted, while the wife's request may be denied.
Sudan	YES	YES	NO	YES (rare)	The husband has the absolute right to repu diate at will. A woman may ask for divorce in
					court but the husband still must grant it.
Syria	NO	YES	YES	YES (rare)	Divorce takes place only before the judge. <sup>e</sup>
Tunis	NO	YES	YES	YES Available legally	Divorce takes place only before the judge. Both parties have the right to
				but rarely needed	ask for divorce without giving reasons except the desire not to continue married life. <sup>e</sup>
Yemen	YES	_	NO	-	A husband can divorce his wife with out any restrictions.

>⊙+€



# PROTECTION AGAINST POLYGAMY

COUNTRY	PERMITTED FREELY	PROHIBITED BY LAW	PERMITTED ONLY IN COURT	NOTES
Bahrain	YES	NO	NO	
Egypt	YES	NO	NO	Husband must inform existing wife.
Jordan	YES	NO	NO	
Lebanon	YES	NO	NO	
Libya	NO	NO	YES	Husband has to obtain approval of existing wife.
Morocco	NO	NO	YES	Husband must inform existing wife and obtain approval of new wife.
Sudan	YES	NO	NO	
Syria	NO	NO	YES	
Tunis	NO '	YES	NO	Offenders face a prison sentence and a fine.
Yemen	YES	NO	NO	

# MOTHER'S CUSTODY RIGHTS AND AGE OF CUSTODY FOR SONS AND DAUGHTERS

A mother's right to the custody of her children is limited by their age and whether they are girls or boys. Girls are usually allowed to stay longer with their mothers.

COUNTRY	MAXIMUM AGE FOR GIRL'S CUSTODY	MAXIMUM AGE FOR BOY'S CUSTODY	NOTES
Bahrain: Sunni	7	7	
Shiite	until marriage	14	
Egypt	12	10	May be extended to marriage for girls and 15 for boys by a court order.
Jordan	until puberty	until puberty	
Lebanon	9	7	
Libya	until marriage	until puberty	
Morocco	16	16	
Sudan	9	7	May be extended to marriage for girls and puberty for boys by a court order.
Syria	9	9	
Tunis	all ages	all ages	Mothers' right to custody may be chal lenged in court on the basis of chil dren's best interest.

# CONCLUSION

Women in Arab countries enjoy some legal rights (to property and commercial transactions) that were long denied to women in other countries. On the other hand, they still have a long way to go before enjoying legal equality with men and full protection of their human rights. The discrepancies between some laws and national constitutions, and the wide differences among Arab countries in interpreting Islamic Shari'a laws, point to the need and the possibility for change in a number of laws that affect women. Furthermore, even where laws do not seem to contain a gender bias, the forces of tradition and culture are found to hinder their full application.

It is important to add, however, that social and cultural norms do not always work against women. In many instances family protection and close social bonds work to buffer women against unjust laws.

This effort to draw together laws in a comparative form should be considered a first step toward stimulating further research and analysis. A logical next step will be to document and monitor the link between the text of the law and its application.

#### Notes

1. The interviews were conducted by Amira Bahyeldin with senior lawyers during a meeting of the Arab Lawyer's Union in Tunis, in 1994.

2. Data refer mostly to the period before the Islamic Front came to power in 1989 and the passing of the Muslim Act in 1991.

3. The constitution has been suspended since early 1994.

4. Information refers to Yemen after unification on 22 May, 1990.

5. From the Green Book 1990 published by the

International Center for Studies and research of the Green Book Tripoli.

6. Sudan never passed a permanent constitution. The last Transitional Constitution was drafted in 1985 and repealed after the coup in 1989. Currently, only *Constitutional Decrees* are passed by the government. The first such Decree acknowledges all international and regional treaties to which Sudan is party. No other rights are explicitly mentioned.

7. In Sudan, women judges were first appointed in the 1960s. A ban was later enforced, which was then lifted under the Numeiri regime in 1976.

8. Reed Boland and Jan Stephan, Annual Review of Population Law, 1990 Vol 17, p 576. (UNFPA, New York and Harvard Law School Library, Cambridge, MA, 1993)

9. Asma A'Haleem, Claiming Our Bodies and Our Rights: Exploring Female Circumcision as an act of violence, In Freedom From Violence, ed. Margaret Schuler (OEF International, 1992). Available from Women, Ink., New York.

10. Unsafe Abortion and Sexual Health in The Arab World Report of the conference held in Damascus 1-3 December 1992, International Planned Parenthood Federation, Arab World Region, p 10 and 11.

11. Dr Youssif Khalifa Abu Bakr, *Islam and family Planning*, (Sudan Family Planning Association, 1979). In Arabic p7.

12. Sheikh Awadalla Salih the mufti of Sudan, *The Islamic Opinion of Family Planning* (Sudan Family Planning Association, 1976) In Arabic p 8.

13. Some laws allow abortion for health reasons only under four months while others do no specify a gestational age.

14. Reed Boland and Jan Stephan, 1993, op. cite p 347.



# **Further resources:**

The number of organisations primarily devoted to women's issues in Arab countries is growing rapidly, and only representative selection could be listed here. For further information regarding in-country activities please contact the organizations listed. We welcome receiving information about additional organizations to update this list.

# Algeria:

### S.O.S. FEMMES

ex Cite d'Enfance Challet 11 et 12 Algiers, Algeria Tel: 667431/668725 Fax: 736059

### Association Independante pour le Triumphe des Droits des Femmes

Complexe Culturel de la Jeunesse d'El Biar 2eme etage Chateauneuf Algiers, Algeria Tel: 503142 Fax: 651341

# **Comite des Associations s'Occupant de la Famille** Cite Al Khodja El Bina

Algiers, Algeria Tel: 717928 Fax: 717927

### **The National Union of Algerian Women** 123, Tarablous Behsein Day St. Algiers, Algeria

### Bahrain:

Association for the Enhancement of Bahraini Girls P.O. Box 26726 Manama, Bahrain Tel: 262237

Bahrain Association for Family Planning and Welfare P.O. Box 20326 Manama, Bahrain

Women's AWAL Association P.O. Box 22162 Al-Mahrek, Bahrain

# Egypt:

### Alliance for Arab Women 28. Adly Street

Apt# 7 Cairo, Egypt Tel: 3939899 Fax: 3936820

### Association for Development and Enhancement of Women (ADEW)

P.O. Box 1065, Ataba Cairo, Egypt Tel: 3502267/3502021/921144

# New Women Center for Research & Training

2, Al Amir Qadadar Street 2nd floor, Apt# 62 Cairo, Egypt Tel: 3543553

### Iraq:

**The General Union of Iraqi Women** Ali bin Abi Taleb St. Al-Waziria Baghdad, Iraq Tel: 4225008

# Jordan:

General Federation of Jordanian Women P.O.Box 922126 Jabal El-Hussein Amman, Jordan Tel: 670325 Fax: 694810

### Jordanian Women's Union

P.O. Box 961188 Amman 11196 Jordan Tel: 649827 Fax: 692574

# Business and Professional Women's Club P.O. Box 910415 Amman, Jordan

Tel: 910415 Fax: 690092

Arab Association for Women and Development P.O. Box 5118 Amman, Jordan Tel: 818241 / 825241 Fax: 827350

### Kuwait:

The Women's Social and Cultural Association Block 2, St. 2 Al Khalidia, Kuwait

### Lebanon:

The Institute of Women's Studies in the Arab World (IWSAW) Beirut University College West Beirut, Lebanon

### Libya:

The General Union for Women's Associations Al-Gamahiriya St. Tripoli, Libya

### Morocco:

Association de Femmes et de Jeunesse en Meghreb (AFJEM)

9, Block Hussania Hay Nahda Rabat, Morocco Tel: 758259 Fax: 755183

### Femmes Maghreb 2002

12 Avenue Ben el Bin El Ouidana Agdal Rabat, Morocco Tel/Fax: 777958

Association Democrate des Femmes Marocaines 63, Rue Cadi Ayyad Diour Jamaa Rabat, Morocco

# Union de l'Action Feminine

425, Avenue Hassan II, Apt. 13 Rabat, Morocco Tel: 727722/738259

### Oman:

**The Omani Women's Association** P.O. Box 539 Muscat, Oman

# Palestine:

#### Institute of Women's Studies

Birzeit University P.O.Box 14 Birzeit, Israel Tel: 952428 Fax: 957656

### **Center for Women's Affairs**

P.O. Box 1194 Nablus West Bank, Occupied Territories via Israel Tel: 76250 Fax: 76250 Tel/Fax: 374655

# Women's Studies Centre (Jerusalem)

P.O. Box 19591 Jerusalem, Occupied Territories via Israel Tel/Fax: 958848

### Saudi Arabia:

**The Faisal Voluntary Women's Association** Mouftah Al-Saad Street Al-Rowayes Jeddah, Saudi Arabia P.O. Box 10011, Jeddah 21433 Tel: 5611664/6535000 Fax: 6517382

### The Association for the Voluntary Enhancement of Women P.O. Box 7 Riadh 11411

Saudi Arabia Tel: 4650029 Fax: 4540100

### Sudan:

Babikir Badri Society for Women's Studies Ahfad University for Women P.O. Box 167 Omdurman, Sudan

Women's Studies Program Development Studies and Research Centre University of Khartoum P.O. Box 321 Khartoum, Sudan

El Manar Consultancy P. O. Box 946 Khartoum, Sudan

## Syria:

The Syrian Women's Union El-Mehdy Ben Baraka St. Damascus, Syria

### Tunisia:

Centre de Recherches, de Documentation, et d'Information sur la Femme (CREDIF) El Malik Fahd Ibn Abdel Aziz Street 2092/7131 El Manar 2

Tunis, Tunisia Tel: 885717/8 Fax: 752606

Association Tunisienne des Femmes Democrates (ATFD) 6, Rue de Liban b.P. 107 - Cite Mahrajen - 1002

Tunis, Tunisia Tel/Fax: 794131

National Women's Union of Tunisia 56, Bab Banat St. Tunis, Tunisia

Association des Femmes Tunisiennes pour la Recherche sur la Developpement (AFTURD) Cite Sprois, Rue 7301

Bloc 9, El-Menzah Tunis, Tunisia Tel: 884205 Fax: 568954

# United Arab Emirates:

The Emirates Women's Union P.O. Box 130 Abu Dhabi, U.A.E. Tel: 477048/477049

The Association for the Development of Women in Ras Al-Khima P.O.Box 1469 Ras Al-Khima, U.A.E. Tel: 32778 Abu Dhabi Women's Society P.O.Box 4088 Abu Dhabi, U.A.E. Tel: 669982

### Yemen:

**The Yemeni Women's Association, Taiz** P.O. Box 6299 Taiz, Yemen

**The Yemeni Women's Association** Sheoub Sana'a St. Sana'a, Yemen

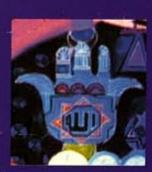
### Regional:

Arab Women's Center for Training & Research 44 Nahj Bolonia, Bab Saadoun 1005 El Omran Tunis, Tunisia Tel: 571945/571867 Fax: 574627

NOUR Publications 9 Mudiriyat El Tahrir Street, Garden City Cairo, Egypt Tel/Fax: 3553825

League of Arab States Department of Social Affairs Women's Affairs Office P.O. Box 11642 Tahrir Square Cairo, Egypt Tel: 5750511 Fax: 5740331/779546/761017





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