On Women's Health and Rights
Lectures, Speeches and Statements
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Violence against Women
The Perspective of a Health Professional

Alexandria Regional Centre
for women health and Development
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I hope in this presentation to leave you with three take-home messages:

- Violence against Women (VAW) is a Health Problem AND is a Human Rights Issue.
- VAW is a Public Health Problem in view of its Prevalence and in view of its Health Consequences.
- VAW, as a Public Health Problem needs more that the medical science and the healthcare profession; it needs social action that has been long overdue to correct injustices to women.
Violence Against Women (VAW) is a Public Health Problem AND is a Human Rights Issue.

VAW, irrespective of its health consequences remains a human rights violation, violation of the human right of the woman not to be subjected to inhuman or degrading treatment.

VAW is a Human Rights Issue

“States should condemn violence against women and should not invoke any custom, tradition or religious consideration to avoid their obligations with respect to its elimination. States should pursue by all appropriate means and without delay a policy of eliminating violence against women.”

According to article 4 of the United Nations Declaration on the Elimination of Violence Against Women, States have an obligation to condemn violence against women and should not invoke any custom, tradition or religious consideration to avoid their obligations with respect to its elimination. States should pursue by all appropriate means and without delay a policy of eliminating violence against women.

On December 17, 1999, the UN General Assembly designated November 27 as the annual date for the International Day for the Elimination of Violence Against Women, in commemoration of the Mirabel sisters. The Mirabel sisters were four Dominican political dissidents who opposed the dictatorship of Rafael Trujillo. The sisters were upper class, well cultured, married family women. They were nicknamed the “butterflies” the underground name of Minerva, one of the sisters. Two of the four sisters were incarcerated and tortured on several occasions. While in prison they were repeatedly raped. Three of the sisters’ husbands were incarcerated in prison in Santo Domingo. The sisters were assassinated in Santo Domingo on November 25, 1960. The three sisters were on their way back from visiting their husbands in prison. They were intercepted and led into a sugar cane field. The unarmed sisters and their driver were beaten to death. The car was later thrown off a mountain in order to make their death look like an accident.

I have never been to a law court, at least so far, not even on the witness stand. But I have been one of the people to advocate for a partnership between the women’s health profession and the legal profession to protect, promote and implement women’s right to health. In 2003, I collaborated with two law professors in Toronto (Rebecca Cook and Bernard Dickens) to write a book for the health and legal professions on Reproductive
Health and Human Rights, Integrating, medicine, Ethics and Law, published by Oxford University Press.

*When laws condoned wife beating*

Law has not always been on the side of women. A Report of the United States Commission on Civil Rights in 1992 on battered women and the administration of justice stated that “common law reflects the customs of the people of a nation and American law is built upon the British common law that condoned wife beating and even prescribed the weapon to be used. This "rule of thumb" stipulated that a man could only beat his wife with a "rod not thicker than his thumb".
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In our health field, a problem assumes a public health dimension if two conditions are fulfilled: first if it is prevalent, second if it has a serious impact on health. VAW is both prevalent and serious.

Prevalence of VAW

- World Bank report on investing in health
- Beijing World Conference on Women
- WHO Multinational Study
- Demographic and Health Surveys
- Egypt Demographic and Health Survey
To highlight the prevalence of VAW, I want to share with you briefly some data mostly from the health literature, from the World Bank, from the UN Beijing World Conference on Women, from the World health Organization Multinational Study, from Demographic and health Surveys (DHS) and from Egypt DHS.

Violence against women- A public Health Problem

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Violence against women has only recently been viewed as a public health problem. A World Bank report attempted to quantify the burden of disease for different health problems. Rape and domestic violence account for about 5 percent of the total disease burden among women ages 15-44 in developing countries (World Bank 1993). This burden is much more than that of many common diseases.
Violence against women is pervasive

"In **all** societies, to a greater or lesser degree, women and girls are subjected to physical, sexual and psychological abuse that cuts across lines of income, class and culture."


The Report of the Fourth World Conference on Women, in a damning statement, declares that in **all** societies, to a greater or lesser degree, women and girls are subjected to physical, sexual and psychological abuse that cuts across lines of income, class and culture. The reference to **ALL** societies in this statement reminds me of an occasion when I was with the World Health Organization in Geneva in the early 1990’s. I was invited to the opening of a centre dealing with violence against women. Where? In Sweden, in the old and prestigious Uppsala University. It first occurred to me that this is probably a problem of some immigrant communities in Sweden. No. They told me that Swedish women, with all the gains they made, are still subjected to this violation.

In 2005, WHO published the results of a Multi-country Study on Women's Health and Domestic Violence against Women (WHO, 2005; Moreno et al. 2006).
Data collected in household surveys by trained female interviewers from over 24,000 women in 15 sites in 10 geographically, culturally and economically diverse countries (not including Arab countries) confirmed that violence against women is pervasive and that violence by the intimate partner is the dominant form of violence in women's lives, compared to that from other perpetrators.

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For ever-partnered women, the lifetime prevalence of physical or sexual violence, or both, by an intimate partner ranged from 15 percent to 71 percent in the different study sites. Across all counties, between 20 percent and 75 percent of women had experienced one or more acts of emotional abuse. (WHO 2005)

The study reported that for ever-partnered women, the lifetime prevalence of physical or sexual violence, or both, by an intimate partner ranged from 15 percent to 71 percent in the different study sites. Across all counties, between 20 percent and 75 percent of women had experienced one or more acts of emotional abuse. I was asked by the International Medical Journal. The Lancet, to write a commentary on this large WHO study.
When home is no longer safe-
Intimate partner violence

Commentary in The Lancet (Fathalla 2005)

The title of my commentary was “When home is no longer safe- Intimate partner violence”. You can say that violence, in general, is pervasive and we all may be exposed to it. But you can protect yourself if you go inside your home, close all doors, shut all windows, and feel safe in the company of your close family. For women, violence occurs behind these closed doors, hidden from the public view, and the aggressor is one who is supposed to be your loving protective intimate partner. Demographic and Health Surveys in a number of countries have also documented the prevalence of intimate partner violence.
The proportions of ever-married women reporting spousal/ intimate partner violence varied across countries: highest at 48 percent in Zambia, and lowest at 18 percent in Cambodia. The proportion of women who reported spousal abuse during pregnancy were highest in Colombia and Nicaragua at 11 percent, and lowest in Cambodia at 1 percent.

“Profiling domestic violence- A multi-country study” (Kishor and Johnson 2004).
Nearly half (47.4 percent) of ever-married women age 15-49 reported that they had been hit, slapped, kicked, or subjected to some other form of physical violence at some point after their fifteenth birthday.

About one-fifth of the women reported that they had been subjected to some form of physical violence within the 12-month period before the survey interview, 6.9 percent reporting it as “often” and 15.7 percent reporting it as “sometimes”.

Urban and rural women were equally likely to have ever experienced physical violence. The prevalence was somewhat higher in the Urban and Lower Egypt Governorate than in Upper Egypt, and was lowest in the Frontier Governorates.

EDHS 2005

In Egypt, the 2000 DHS found that nearly half (47.4 percent) of ever-married women age 15-49 reported that they had been hit, slapped, kicked, or subjected to some other form of physical violence at some point after their fifteenth birthday. About one-fifth of the women reported that they had been subjected to some form of physical violence within the 12-month period before the survey interview, 6.9 percent reporting it as “often” and 15.7 percent reporting it as “sometimes”. Urban and rural women were equally likely to have ever experienced physical violence. But I was happy to note that the prevalence was somewhat lower in Upper Egypt (where I live and practice) than in the Urban and Lower Egypt Governorates: either the Upper Egypt woman is more powerful, or the Upper Egypt men are more gentlemanly. It was lowest in the Frontier Governorates.

Health consequences of VAW
Health consequences of VAW

- VAW is different from other types of injuries
- Impact of VAW on mental health
- Rape: A horrendous crime
- So-called “honor killings”

VAW is different:

- It can be **chronic and recurrent**.
- It can be a risk factor that increases women’s risk of a variety of diseases and conditions.
- By damaging a woman’s physical, mental and emotional capacity to care for her family, violence also hurts the health of other family members, particularly young children.

From a health point of view, VAW is different from other types of injuries. Domestic violence is not a one time injury. In our medical language, it can be chronic and recurrent. Second, it is not only the direct outcome of the injury that counts. It can be a risk factor that increases women’s risk of a variety of diseases and conditions. Third, the
consequences go beyond the woman. By damaging a woman's physical, mental and emotional capacity to care for her family, violence also hurts the health of other family members, particularly young children.

Health consequences of VAW

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Another point I want to emphasize about health consequences is the impact on mental health. Please forgive the medical jargon.
Impact of VAW on mental health
Post-traumatic stress disorder
Loss of self esteem
Depression
Suicide or attempted suicide
Psychosomatic disorders including chronic pelvic pain and irritable bowel syndrome
Sexual problems
Functional gynecological disorders
Drug and alcohol as a way to escape.

The following long list of mental health consequences reported in various studies is not exclusive:
- Post-traumatic stress disorder
- Loss of self esteem
- Depression
- Suicide or attempted suicide
- Psychosomatic disorders including chronic pelvic pain and irritable bowel syndrome
- Sexual problems
- Functional gynecological disorders
- Drug and alcohol as a way to escape.
Wounds of the body heal sooner or later, leaving only scars. Wounds of the soul take much longer to heal and can bleed again any time.

There is one thing in common about these types of psychological and mental consequences which differentiates them from physical injuries. Wounds of the body heal sooner or later, leaving only scars. Wounds of the soul take much longer to heal and can bleed again any time.
A Chinese proverb says that a picture is better than one thousand words. This photo from the website of UNIFEM illustrates the mental impact on a battered woman. You don’t need the medical jargon to describe it.

Health consequences of VAW

- VAW is different from other types of injuries
- Impact of VAW on mental health
  - Rape: A horrendous crime
  - So-called “honor killings”
Rape and sexual assaults, more than other types of injuries, cause both physical and profound emotional trauma. Victims also face the risk of unwanted pregnancy and sexually transmitted infections, including HIV, and in many societies a social stigma.

I want to share with you two quotations about gang rape, one from old history and one from contemporary history. The first account is from the Holy Bible, the Old Testament, the Book of Judges.
"...and they abused her all night, taking turns raping her until morning. Finally, just at dawn, they let her go. She fell down at the door of the house and lay there until it was light... found her there, fallen down in front of the door with her hands digging into the threshold...But there was no answer, for she was dead"

Holy Bible: Judges: 19

In the second account from contemporary time, 1999, a woman from Kosovo (former Yugoslavia) describes her horrible experience.

April 18, 1999
THE SUNDAY TELEGRAPH

“They kept their masks on. I could see only their eyes. Their breath stank. It was the worst thing that could happen to a woman”
Hundreds, perhaps thousands of women trying to flee Kosovo have been raped.

It shows that humanity has not advanced much beyond biblical time. It is gratifying that rape is now considered a war crime under international law.
Health consequences of VAW

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We cannot leave the subject of health consequences without mentioning so-called honour crimes.

"So-called" Honour crimes

Honor killings have been reported in: Pakistan, Turkey, Jordan, Syria, Egypt, Lebanon, Iran, Yemen, Morocco and other Mediterranean and Gulf countries. Germany, France and the United Kingdom within the migrant communities.

United Nations Special Rapporteur for Violence Against Women
Honour killings have been reported in countries of our region, and now also in immigrant communities in the west, by those who believe that the honour of men lies between the legs of women.

As he was speaking, the Jewish leaders and pharisees brought a woman caught in adultery and placed her in front of the staring crowd. “Teacher” they said to Jesus “This woman was caught in the very act of adultery. Moses’ law says to kill her. What about it? They kept demanding an answer, so he stood up Again and said, “All right, hurl the stones at her until she dies. But only he, who never sinned, may throw the first.” And the Jewish leaders slipped away one by one, beginning with the eldest, until only Jesus was left in front of the crowd with the woman.

Holy Bible: John 8:3,4,7,9.

Whenever adultery is mentioned, I recall this quotation from the New Testament, about the woman brought to Jesus Christ to be stoned. His great words still ring loudly across the centuries: “Only he who never sinned may throw the first stone at her.” Another thing which strikes me from this great story is that they brought the woman only. Her male partner who has committed adultery is not shown up. It is the old double standard.
VAW, as a Public Health Problem needs more that the medical science and the healthcare profession; it needs social action that has been long overdue to correct injustices to women.

At the end of a long professional career in women’s health, I realize that we, as health professionals, have to declare to society that there is a limit to what we can accomplish for women’s health, without society taking the necessary actions to correct injustices to women.
My last book was to give this message to society from the old doctor. The title of the book is “Issues in Women’s Health and Rights- International, Arab regional and Egyptian perspectives”. The book has been published and made available free by the International Planned Parenthood Federation, Arab World Region. Violence against women, or what I call: Victimization as part of being female” is one chapter of the book.

**VAW: the hidden epidemic**

- A state of denial
- A culture of silence
- Gender inequity
We in the health profession feel somewhat helpless when a health problem is hidden. VAW is a hidden pandemic. It is a hidden pandemic because of a state of denial, a culture of silence and gender inequity.

Many societies believe that if you close your eyes and shut your ears, a problem will disappear.

An Indian poet wrote that too many women in too many countries speak the same language of silence. Without women speaking up, violence against women will remain a hidden pandemic.

The culture of silence is not only in poetry. It is documented in surveys. In the Egypt Demographic and Health Survey 2005, two thirds of the women subjected to domestic violence did not seek help and gave different reasons. Many accepted it as a part of life.
VAW- A culture of silence

Of the women who had experienced an episode of violence at the hands of their husband within the 12 months before the survey, two thirds did not seek assistance to deal with the violence, giving one or more of the following reasons:

- 46 percent considered it not important;
- 14 percent accepted it as a part of life;
- 14 percent were embarrassed;
- 5 percent were afraid of getting the husband in trouble;
- 4 percent were afraid of divorce/desertion;
- 4 percent were afraid of further beatings;

Then let us recall that VAW is only one problem in a long chain of what a woman can expect as apart of her lot in an unjust life. It starts with birth in a society of son preference.

This picture of how a husband reacts to the birth of a second girl. The poor mother feels
guilty. The grandmother is presenting the newborn girl. The older girl does not understand what it is all about. This reminds me of a verse in the Holy Qur'an:

*The Bee “Al-Nahl” 16:58-59.* “When one of them is given news of the birth of a baby girl, his face darkens and he is filled with gloom. In his shame he hides himself away from his people because of the bad news he has been given. Should he keep her and suffer contempt or bury her in the dust? How ill they judge!”

Let me conclude by reminding you again of the take home messages:
Let me end with another verse from the Holy Qur’an. I think this verse should be framed and be part of the furniture of all new-wed Muslim couples.

“Another of His signs is that He created spouses from among yourselves for you to live with in tranquility: He ordained love and kindness between you. There truly are signs in this for those who reflect.”