ABSTRACT

In Islamic jurisprudence, numerous wrongful acts of behavior are regarded as haram—sinful, illicit, prohibited, and unlawful. Such wrongful behavior can take many forms, with illicit sexuality constituting one of the major categories. Because heterosexual marital sex is the only licit form of sexual behavior according to Islamic jurisprudence, the potential for men to engage in zina, or illicit sexuality, is quite high. Although there are many “sinners,” Islam is not a religion that promotes individual confession. Muslim clerics generally do not take on a pastoral role as confessor, hearing individuals’ confessions of sin or offering forgiveness. Furthermore, religious forms of testimony, of the kind promoted in some Christian evangelical denominations, are not a part of the Islamic religious tradition. As a result, Muslims who have “sinned” do not have religiously sanctioned or socially condoned ways of unburdening their asrar, or “secrets,” including through support groups or psychotherapy. To that end, this article explores Arab Muslim men’s asrar jinsiyia, or “sexual secrets,” as well as their felt needs to unburden their feelings of guilt and shame. Through reproductive life histories undertaken in IVF clinics across the Middle East and Arab America, the anthropologist author—as a “sexually knowledgeable” female Western duktura—has listened to numerous sinful stories, involving excessive masturbation, premarital and extramarital sex, acquisition of sexually transmitted...
infections, out-of-wedlock conceptions, and the use of donor sperm. Because IVF ethnography takes place in private clinic settings, and involves discussion of the most intimate realms of male sexuality and reproduction, it becomes a site of confession, a mode of self-examination in which men attempt to reveal themselves. This piece explores the place of IVF ethnography as an ethnographic confessional—a safe space in which Muslim men may admit their past indiscretions for the first time and with cathartic relief. [Keywords: Ethnographic confessional, Islam, IVF, Muslim men, sex, sin]

[The] confession became one of the West’s most highly valued techniques for producing truth. We have since become a singularly confessing society. The confession has spread its effects far and wide. It plays a part in justice, medicine, education, family relationships, and love relations, in the most ordinary affairs of everyday life, and in the most solemn rites...One confesses in public or in private, to one’s parents, one’s educators, one’s doctor, to those one loves; one admits to oneself, in pleasure and in pain, things it would be impossible to tell anyone else, the things people write books about. One confesses—or is forced to confess.

—Michel Foucault (1990:59)

Introduction: Notes on Confession

In The History of Sexuality, Michel Foucault observes that “Western man has become a confessing animal” (1990:59). This confessional way of being has a long history in Western culture, dating back to the rise of the Roman Catholic Church. By the 13th century, annual confession had become a requirement for the Catholic faithful, with the role of confession becoming ever more prominent over the centuries (Brooks 2000). Kenneth Baker, author of the Fundamentals of Catholicism (1983), notes in his essay on “How to Be a Good Confessor”:

One of the important duties of priests is to administer the sacrament of penance—to hear confessions. Thus, one of the titles of a Catholic priest is confessor, that is, one who hears confessions. A major part of the training of seminarians to become priests is to learn moral
theology and sacramental theology so that they can become good confessors. (Baker 2011)

In his book *Troubling Confessions: Speaking Guilt in Law and Literature*, literary critic Peter Brooks (2002) argues that this confessional mode of religious practice, with its long history in Roman Catholicism, has been transformed in Western societies into a secular counterpart, namely, psychoanalysis.

Psychoanalysis, one of the most conspicuous inventions of the 20th century, offers a secular version of religious confession: it insists on the work of patient and analyst—comparable to confessant and confessor—toward the discovery of the most hidden truths about selfhood. (2000:9)

The role of confessor, then—whether it be the priest or psychoanalyst— involves trust, transference, and psychic relief. Private revelations of sin made by the confessant are transferred to the confessor, who is obligated to keep whatever sin has been revealed “a secret.” Indeed, the confessor “is obliged to the *sigillum*, the seal of secrecy without which oral confessions would be unable to operate” (Krondorfer 2010:13). This unburdening of secrets contains the potential for individual restoration and redemption for the one who has confessed:

Its restorative power lies in the listener’s pledge to guard the content of the confession from a potentially hostile, noncompassionate public. Because this transpersonal listener is not the confessing self’s intimate other (friend, wife, lover, parent) but operates as an impersonal channel, he or she is freed from the obligations normally required by law or social regulations…This kind of extraordinary power bestowed upon the listener by social agreement allows the individual sinner or patient to reveal, unravel, and then reconstitute the self. (2010:13–14)

In his book *Male Confessions: Intimate Revelations and the Religious Imagination*, Krondorfer is interested in how men, in particular, “articulate themselves in a self-examining mode” (2010:3). To undertake this analysis, he turns to the confessional writings of men, ranging from Saint Augustine and Jean-Jacques Rousseau to Nazi war criminals who converted to
Islam, Sex, and Sin: IVF Ethnography as Muslim Men's Confessional

Catholicism before they were sentenced to death. Krondorfer calls this genre of male writing “confessiography”—written documents in which men “have made an effort at revealing intimate, tender, shameful, or hidden aspects of themselves” (2010:10). He argues that such texts reveal battles with male identity, embodiment, relationality, and intimacy. “A confessional text offers a window into male interiority, into a man’s way of perceiving himself within the constraints and possibilities of his environment” (2010:7).

Krondorfer distinguishes confessiography, which is a form of confessional writing, from confessionals, or oral confessions, which are more dialogical in nature and have a much longer history in Western Christianity. In Krondorfer’s view, both written and oral confessions rely on “empathetic hearing” from a listening other, thereby allowing men to confess “their sins, their shame, their shortcomings, their deceptions, their desires” (2010:2). Both written and oral confessions ultimately help men to reclaim their “subjectivity-in-crisis”—rescuing and reconstituting the subject who is at “the brink of loss and despair” (2010:21). Indeed, confession can reconstitute a man’s moral agency by allowing him to be both responsible and accountable for his past deeds and present indiscretions.

Krondorfer also argues that men’s confessions are deeply tied to male embodiment and “sexual secrets” (2010:9). Although male confessants may claim to have left their sinful sexual pasts behind them, they still inhabit their bodies in the present, which may serve as painful reminders of prior sexual misdeeds:

Their bodies remind them of the past, of the desires they once felt and of the wrongdoings they once committed. Their embodiedness, however, forces them to live in the here and now. They still need to eat, drink, sleep, seek shelter, negotiate pleasure, manage human relations, and fend off allegations. In some cases, confessants find freedom from sexuality, yet they still deal with the body’s unruly desires. In other cases, they embrace sexual liberation but still encounter stubborn residues of repression. (2010:24)

Krondorfer goes on to offer a powerful critique of present scholarship on the male body. He argues that the body of heterosexual male confessants is rarely critically investigated from the standpoint of gender, masculinity, sexuality, or what he calls the “religious imagination”—“how men, given their personal religiosity in a given historical circumstance, imagine religion
and how they call upon the ‘religious’ to articulate themselves in a self-examining mode” (2010:3).

His analysis poses a number of interesting questions. For example, what do heterosexual male confessants have to say about their bodies? What counts as bodily wrongdoing? What counts as sexual sin? And according to what religious code or moral stance? Furthermore, in societies where confession is not part of organized religion, what form might a confession take? Who would serve as a confessor? What kinds of sins might be divulged?

These are the questions that I take up in this piece. Following Krondorfer’s call to take male, heterosexual embodiment and confession seriously, I want to forward two major arguments. First, I assert that anthropology’s core methodological strategy, namely, ethnography, can become quite confessional—to wit, a dialogical encounter in which the ethnographer serves as a confessor to a male confessant who unburdens his sexual sins. Furthermore, ethnographic confessions may be especially relevant and important in societies where confession—as a particular mode of religious self-revelation and absolution, or as part of the psychotherapeutic practice of self-disclosure and catharsis—is neither socially condoned nor regularly practiced.

Second, in such settings, the ethnographic confessional may provide entrée into what anthropologist Arthur Kleinman calls local moral worlds—“the moral accounts, [which] are the commitments of social participants in a local world about what is at stake in everyday experience” (1997:45). Kleinman appeals for an “ethnography of experience”—ethnography that captures human subjectivity within local moral worlds, especially when those worlds are deeply imbued by powerful religious discourses and ethical imaginations (Kleinman 2006, Kleinman and Kleinman 1992). To that end, the ethnographic confessional may shed clear light on the local moral worlds of sexuality and embodiment, including relevant religious theodicies about what constitutes good and evil, and particularly the nature of embodied sin. In short, anthropology—because of its empathetic, person-centered questioning, listening, and observing, which are the sine qua non of the ethnographic process (Levy and Hollan 2015)—may provide unique scholarly insights into hidden local moral worlds, where bodily sins are revealed, embodied secrets disclosed, and haunted psyches unburdened.

This article describes my role in this regard as a long-time ethnographer of Arab men’s reproductive and sexual lives. Through research over
safe space for pri-

private confession—often divulging their \textit{asrar jinsiya}, or “sexual secrets,” for the first time, and often with great relief. This article reflects upon sexual secrecy—\textit{sirriya jinsiya}—and the felt needs of Muslim men to share their “secret,” or \textit{sirr}, to an empathic, non-judgmental listener. Because such confessions of secret sexual histories are rarely encouraged in either the medical domain or in the Islamic religious realm in the Middle East, many Arab Muslim men suffer from debilitating guilt and anxiety for what they deem to be their sexual sins. Such moral angst, in turn, can affect their masculine personhood, their marriages, and their sexual and reproductive lives for many years to come.

As we will see, the Islamic concept of \textit{zina}—sexual sin—provides the local moral framework in which Muslim men’s sexual lives play out. The power of zina to turn Muslim men into sexual sinners will become clear in this piece, in which the sexual confessions of two men—one of whom engaged in numerous acts of premarital sex and the other of whom was an adulterer—are described. In both cases, these men attributed their current infertility problems to having committed zina. Indeed, infertility was seen by these men, and by many other Muslim men in my study, as God’s punishment for their sexual indiscretions. Here, then, I seek to examine the sexual confessions of heterosexual, married, Middle Eastern, Muslim men, whose sexual bodies once violated zina codes and whose reproductive bodies subsequently failed them. These men were seeking medical assistance in private in vitro fertilization (IVF) clinics, where I, a medical anthropologist, was undertaking a clinic-based ethnography, unwittingly becoming Muslim men’s \textit{ethnographic confessor} in the process.

\textbf{IVF Ethnography as Muslim Men’s Confessional}

I never intended to study Muslim men’s sex lives. Rather, I began my ethnographic career in the Middle East in the late 1980s, focusing on the social and gendered suffering faced by poor infertile women in urban Egypt (Inhorn 1994, 1996). As a female anthropologist, I had always argued to myself and others that Middle Eastern men were “off limits” to me, given
my focus on the gendered intimacies of reproduction, sexuality, and personhood. However, my initial forays into Egyptian IVF clinics in the mid-1990s convinced me of the need to rethink my own assumptions about the gendered division of ethnographic labor. In Cairo, I met many infertile couples involved in joint pursuits of assisted conception. In approximately 40 percent of my interviews in Egyptian IVF clinics, husbands volunteered to participate in my study along with their wives. Many of these men suffered from male infertility, and were often avid and loquacious interlocutors.

Once I recognized the high prevalence of male infertility cases in Egypt, I became convinced of the need to study male infertility in the Arab world. Yet, I was reluctant as an American woman to move forward with this project. When I discussed my reluctance with a Moroccan-born colleague—who was focusing his own scholarly career on “Islamic masculinities” (Ouzgane 2006)—he surmised that I might possess superior access to this sensitive research subject by virtue of my positionality. In our discussions, six reasons for me to pursue this particular line of ethnographic inquiry soon developed. First, if Middle Eastern men regarded their fertility as an important and somewhat homosocially competitive aspect of their masculinity (Ouzgane 1997), then it might be very difficult for them to discuss infertility with another man. As a woman, I might be better positioned to enter this secret world of reproductive shame, providing at least some men the only opportunity for frank discussion. Second, as a Western woman, coming from a different local moral world, I might be considered more “open” and knowledgeable about sex and conception, so that sexually troubled Middle Eastern men might be able to discuss their problems and questions more freely. Third, as an educated duktura and professor of medical anthropology and public health, I might be considered a potentially knowledgeable and empathic confidante, sworn to secrecy by virtue of both research and medical ethics. Fourth, as a middle-aged woman “past my prime,” I could represent a quasi-maternal and comforting presence, especially to younger men. Fifth, as a temporary visitor to these men’s social worlds, I might be seen as taking men’s “secrets” far away, providing a fleeting moment in their tortured lives for honesty, candor, and catharsis. Finally, as a non-Muslim, I could not be expected to share local moral attitudes toward sex and zina, which might make it easier for Muslim men to speak to me, rather than a more judgmental fellow Muslim.

Persuaded by my colleague’s encouragement, I went to Lebanon in 2003, where I carried out detailed reproductive life history interviews with
220 Lebanese, Syrian, and Palestinian men, 120 of whom were infertile and 100 of whom were supporting their infertile wives in Lebanese IVF clinics (Inhorn 2012). The majority of these men were Muslim (70 percent)—about half Shia (35 percent), half Sunni (30 percent), and a small number of Druze (4 percent) and Alawi (1 percent) (both minority Shia Muslim sub-sects). Following this Lebanese study, in 2007, I undertook ethnographic research on infertility and assisted conception in the United Arab Emirates (Inhorn 2015). In addition, I undertook a five-year study (2003–2008) of infertility among poor Arab migrants and refugees living in Dearborn, Michigan, the so-called “capital” of Arab America.

As a result of these various ethnographic research projects, I have ended up interviewing approximately 330 mostly Muslim men from 14 different Middle Eastern countries. The main regions included the Levant (Jordan, Lebanon, Palestine, Syria), the Arab Gulf (Bahrain, Oman, United Arab Emirates, Yemen), and North Africa (Egypt, Morocco, Sudan), as well as the war-torn country of Iraq and the non-Arab Middle Eastern countries of Iran and Turkey. These Middle Eastern men came from a variety of social and educational backgrounds. For example, among my interlocutors were Lebanese taxi drivers, Syrian university professors, Egyptian businessmen, Iraqi Shia clerics and refugees, Yemeni auto workers, Palestinian shopkeepers, Emirati engineers, Bahraini oil executives, Jordanian Bedouin shepherds, Sudanese doctors, and many Lebanese men living in the African and Latin American diasporas.

In addition, during my 2007 ethnographic project in the UAE, I interviewed Muslim men from many different parts of South and Southeast Asia (e.g., India, Pakistan, Sri Lanka, Malaysia, Indonesia), as well as East Africa (e.g., Somalia, Djibouti, Tanzania) (Inhorn 2015). In all of these cases, men were seeking assisted conception with their wives, and were interviewed by me in either Arabic or English, with or without their wives, in private rooms designated for this purpose in a number of different IVF centers.

In many cases, I interviewed husbands alone, hearing their reproductive and sexual stories, and how they (or their wives) came to be infertile. In both my Lebanese and Dearborn studies, I interviewed the majority of men without their wives, undertaking detailed, male-centered reproductive life history interviews (Inhorn 2012). In these interviews, I asked my male interlocutors to answer a brief series of questions about sex, including age of sexual initiation, their numbers of sexual partners (past and present), their histories of sexually transmitted infections (STIs), if any,
as well as any current sexual problems. Exactly one-quarter of the men in my Lebanese study and about one-fifth of the men in my Dearborn study reported intimate and often painful stories involving their perceived sexual misconduct, various past or present sexual problems, and related guilt and shame. Indeed, these interviews sometimes opened a veritable floodgate of emotional angst regarding perceived zina—zina that revolved around masturbation, premarital sex, use of prostitutes, STIs, infidelities, mistresses, or secret polygyny. In many cases, men ascribed their current male infertility problems to their having committed zina. Some men, in fact, were quite explicit that male infertility was God’s “punishment” for their having “wasted” or “destroyed” their reproductive potential, or their very reproductive organs, through zina-related sex.

Especially in Lebanon, where most of my interviews were conducted with husbands alone in a private interview room, men’s sexual confessions often came tumbling out, with seemingly taciturn men “warming up,” even becoming garrulous. Interviews sometimes lasted two to three hours, because many of the men in the study shared information that was often deeply personal and painful, usually telling me that this was the first time they had ever spoken about these issues to anyone. In hearing men’s sexual confessions for the first time, I often discovered that men’s feelings of being a sexual sinner had caused them to suffer in silence over many years.

Unfortunately, anguish over perceived zina is not easily dissipated. At the time of my study in Lebanon, for example, there was only one sexologist, a woman, just as there was only one female sexologist in Egypt at that time (El Feki 2013). Furthermore, whether Middle Eastern men feel comfortable seeking help from a local female sexologist remains uncertain. Very few of the men in my study described seeking psychotherapeutic or support group services of any kind, given that “therapy” is uncommon in the Arab world and is stigmatized by virtue of its relationship to mental illness (Inhorn 2003). Instead, the minority of men who had sought help for sexual problems had done so through other medical channels, usually by asking the advice of a male urologist or IVF physician. Most men suffering from sexual problems (e.g., erectile dysfunction, premature ejaculation) were told by doctors that their sexual problems were “psychological”; yet, they were rarely, if ever, directed to a psychologist or sex therapist. Instead, Viagra or testosterone injections were prescribed as “magic bullets” for male sexual dysfunction, with most cases of sexual dysfunction going completely unrecognized and untreated. In Middle Eastern clinical settings, then, a “don’t
ask, don’t tell” policy prevails, rendering sexual problems invisible (Inhorn 2005). As one Lebanese Muslim IVF physician admitted,

This problem of sexual dysfunction is definitely much higher than what we discuss with our patients. Few volunteer this information unless we ask. It’s definitely very common; at least one-third have some kind of sexual problem. Because in addition to our strict social community, where parents teach children that sexuality is bad, haram, there are strict religious beliefs. So this makes a higher percentage of sexual difficulties. And we doctors don’t ask all the time. In fact, it’s very, very common that we don’t go further into these problems.

Given this general reluctance to inquire about men’s sexual histories or problems—even on the part of Middle Eastern IVF physicians who might otherwise be expected to do so—it was probably surprising to men in my studies that I was interested in hearing about their sex lives as part of their reproductive histories. Although I usually prefaced these questions by explaining that they were “personal” in nature, and also offered to skip them altogether if a man seemed uncomfortable, most men wanted to talk. Indeed, some men wanted to discuss their sex lives in considerable detail. As a willing listener, I soon came to realize that some of the men in my studies were using the ethnographic encounter as a unique opportunity to unburden themselves of zina secrets that they had been carrying like lead weights on their shoulders for many years.

In the next section, I want to describe the meaning of zina to Middle Eastern Muslim men, and how it provides a powerful moral scaffolding in defining rightful from wrongful sex. I also want to suggest that the potential for Middle Eastern Muslim men to commit zina remains high, partly because of the contemporary political and economic instabilities that are leading to delayed marriage across the region (Assaad and Roudi-Fahimi 2007, Dhillon and Yousef 2009, Singerman 2013, Singerman and Ibrahim 2004). Furthermore, beyond the Middle East—in Muslim societies ranging from Nigeria to Pakistan—new zina laws are being re-enacted, often based on centuries-old zina laws that had been made legally obsolete (Khan 2006, Mir-Hosseini 2011). Feminist scholars worry that the re-criminalization of sexuality in countries such as Pakistan constitutes a new form of violence against women (Mir-Hosseini 2011). This is particularly true for poor women, who are the ones most vulnerable to accusations
and imprisonment under the new zina ordinances (Khan 2003, 2006). In short, the crime of zina is being prosecuted with renewed vigor in some parts of the Muslim world, making the topic of zina an especially important issue to interrogate.

The Power of Zina
What is zina? In Islamic law, zina refers to any form of unlawful, sexual intercourse between two individuals who are not legally married to one another. Although Islam deems sex to be a human right not bound by procreative purposes (as in Catholicism), Islam mandates that sex occur within the bounds of marriage, meaning that all forms of non-marital sexual practice fall into the category of zina. Zina thus includes premarital, extramarital, or homosexual sex, which are all generally regarded as unlawful (Khuri 2001, Musallam 1983). Masturbation, too, is considered either haram, religiously forbidden and unlawful, or makruh, religiously allowed but reprehensible, in most of the Islamic legal traditions (Khuri 2001). In short, the only form of truly licit, or halal sex, is sex between two legally married partners. All other forms of sexual practice are considered religious sins.

In his seminal text on Sexuality in Islam, Abdelwahab Bouhdiba (2008) devotes an entire chapter to “Sexual Prohibitions in Islam.” He notes that there are at least 27 Qur’anic verses devoted to zina, effectively constituting a “body of sexual law” (2008:14). Because zina is a capital sin, committing zina represents “a break with the Muslim community,” tantamount to being banished from the community of Muslim believers (2008:16). As noted by Bouhdiba, sexual relations in Islam are “bound by strict marital fidelity” (2008:15). Thus,

any sexual relation outside marriage...is reprehensible. Premarital relations are condemned. Nevertheless this kind of sin is quite minimal beside that committed by a married man with a woman who may have a husband. The penalty incurred for this crime is maximal: stoning to death. (2008:15)

Proving zina, however, is exceedingly difficult, which is why instances of these punishments are rarely documented in Islamic history (Mir-Hosseini 2011). According to Muslim jurists, there are only two possible ways of proving zina: the first being the free and willful confession of the person
who has committed zina, and the second being the eyewitness testimony of at least four reliable Muslim men. Both forms of proof—witnessing couples in acts of illicit sex or eliciting true confessions about it—are difficult to obtain, but are required to prevent frivolous accusations of illicit fornication or adultery. If zina is proven, however, the Islamic legal tradition treats it as a crime (Mir-Hosseini 2011). For the unmarried, the punishment for zina includes being flogged with 100 lashes. For the married adulterer, the punishment is being stoned to death.

Given the severity of these punishments, why would a Muslim who has committed zina confess to illicit sex? And to whom would such confessions be made? These remain ongoing issues in the Muslim world, given that Islam does not promote a kind of “confessional practice” for those who have committed zina. Muslim clerics may answer individuals’ questions about matters of religious doctrine and comportment, including questions pertaining to rightful and wrongful sexual practices. However, Muslim clerics do not train to be “good confessors” in the way that Catholic seminarians do (Baker 2011). Furthermore, Muslim clerics are not expected to offer support or guidance for those who have sinned, nor do they relieve sinners of their burden of moral guilt through rites of penitence and absolution. This lack of clerical mediation for the sinner derives from the strong belief within Islam that there can be no human intervention in an individual’s relationship with God. Only God can forgive the sinner before the Day of Judgment, with forgiveness a sign of God’s mercy and compassion.

Furthermore, religious forms of testimony, of the kind promoted in some Christian evangelical communities, are not a part of the Islamic religious tradition. Muslims do not attend community forms of worship where they are encouraged to confess their sins in public, nor do they publicly repent and or seek divine redemption. Thus, quite unlike some forms of Christianity—where private confession and public testimony are morally encouraged and tied to salvation—Islam does not condone these clerically or community-mediated confessional practices.

Given this Islamic local moral world, Muslims who have sinned—including by committing acts of zina—do not have a religiously or socially sanctioned way of unburdening their moral angst and sexual guilt. As a result, those who have committed zina may live a life of moral agony, wondering whether they will be found out for their sins, or whether God will enact divine retribution.
The moral suffering of zina is taken up quite directly in the recent volume, *Sex and the Citadel: Intimate Life in a Changing Arab World* by Shereen El Feki (2013). El Feki, a former medical scientist, journalist, and HIV/AIDS activist, is quite critical of the current sexual and moral climate across the Muslim Middle East. As she states,

In today’s Arab world, the only widely accepted, socially acknowledged context for sex is state-registered, family-approved, religiously sanctioned matrimony. Anything else is ‘ayb (shameful), illit adab (impolite), haram (forbidden)—a seemingly endless lexicon of reproof. That vast segments of the population in most countries in the region are having a hard time fitting this mold...is increasingly recognized, but there is widespread resistance to any alternative. (2013:4)

According to El Feki (2013:22), the “sexual terrain” of today’s Arab world is shaped by this powerful discourse of zina, condemning all forms of non-marital sex. This, in turn, leads to many negative effects on the sexual lives of Muslims, especially for those without the means to marry for many of their young adult years:

Sex outside of marriage roundly condemned; young people, unable to get jobs, afford marriage, or find moments of privacy, reduced to furtive relations without adequate contraception or sufficient information, storing up sexual problems for later life; women whose sexual needs, beyond reproduction, were ignored or suppressed, held to double standards of virginity before marriage and chastity ever after, even in the face of miserable, unsatisfactory unions from which there was little escape, given the trouble and stigma of divorce. Abortion outlawed, masturbation condemned, sexual education suppressed—in short, “sexual misery of the masses.” (2013:22)

El Feki goes on to document a widespread “culture of censorship and silence” surrounding a great number of sexually “taboo” subjects in the Arab world. These include, inter alia, masturbation, premarital sex, extramarital sex, oral sex, anal sex, homosexuality, loss of virginity and hymen “repair,” unwed motherhood, various forms of temporary marriage, abortion, prostitution, pornography, and HIV/AIDS. In many ways, El Feki’s book is a bold
attempt to overcome these sexual silences, especially in Egypt, the country from which she draws most of her contemporary examples.

El Feki’s desire to speak openly about sex in the Arab world is shared by at least some younger-generation Egyptian activists. In Spring 2014, Egyptian youth launched a new interactive website called Al-Hubb Thaqafa (“Culture of Love” in Arabic; “Love Matters” in English). Speaking at the website launch, Egyptian actor and activist Khaled Abol Naga opined: “There are three taboos in Egypt: politics, religion, and sex. The Egyptians were able to break the first two and I’m positive that the people in the street will break the third taboo soon” (AMEWS E-Bulletin 2014). These Egyptian attempts to promote frank discussions on “all topics related to love, sex, and relationships in the safety of virtual space” are path-breaking. Not surprisingly, the site has attracted more than 50,000 unique visitors each month of operation.

In Egypt as elsewhere in the Middle East, amidst growing economic and political turmoil, it is becoming increasingly difficult for many young men and women to complete their education, obtain employment, earn a living wage, set up a household, and marry. Diane Singerman (2013), a political scientist working in Egypt over many years, has coined the term “waithood” to describe the significant disruptions and delays that today’s youth face, many of whom are forced to postpone marriage and family life well into their 30s and even 40s. Because of the Middle East’s current “youth bulge”—or the high percentage of young people between the age of 15 and 30 in the overall population (Assaad and Roudi-Fahimi 2007, Eberstadt and Shah 2012)—waithood is affecting significant segments of the Middle Eastern population. Particularly in resource-poor nations such as Egypt, Jordan, Lebanon, Morocco, Palestine, and Tunisia, millions of un- and under-employed youth are stuck in a kind of prolonged adolescence. Literally, a “generation in waiting” (Dhillon and Yousef 2009), their economic futures are grim, and their ability to save for a wedding difficult, thereby postponing their chances for marriage and the establishment of their own future families (Assaad and Roudi-Fahimi 2007). According to Singerman, such youthful frustrations have been one of the major factors fueling revolutionary sentiments in the current decade.

If waithood—accompanied by significant sexual frustration—is one of the main triggers of 21st century political revolutions, which is Singerman’s (2013) thesis, then waithood has had significant effects in the private realm as well, as sex researcher El Feki (2013) would suggest. Waithood
is leading to the Islamic problem of zina, or forbidden sex, committed outside the bounds of legal matrimony. Yet, premarital sex is morally condemned in Islam, leading to problems of sexual guilt among the Muslim population. Without such social spaces for frank discussion of sexual matters, sex remains deeply private and hidden across much of the Middle East. Many Arab men who have not received sex education and who have engaged in sexual practices that are considered zina go on to feel haunted by sexual guilt. Sad and silent, they have few, if any, outlets to discuss their sexual regrets.

**Zina Confessions**

IVF ethnography, I argue, can be such an outlet. As shown in the remainder of this piece, IVF clinics can be safe havens for self-disclosure among at least some married Arab Muslim men. In general, IVF clinics are places where married, presumably heterosexual, Muslim men come with their wives to overcome both male and female infertility problems. IVF clinics are, thus, spaces where the most intimate details of reproduction are routinely discussed with IVF clinicians. As I will demonstrate, IVF clinics may also become sites of zina confessions, where past indiscretions are revealed in the course of ethnographic interviews revolving around reproduction and sexuality.

It was in IVF clinics in Lebanon in 2003 that I first learned the zina concerns of my male Muslim interlocutors. Men’s zina stories involved masturbation, premarital and extramarital sex, acquisition of STIs, out-of-wedlock conceptions, and the use of donor sperm. Furthermore, among the men who were infertile, many linked their past and present zina acts to their current infertility problems. Among the 220 men I interviewed in Lebanon, I asked specific questions about sexuality as part of their reproductive histories. I learned that nearly one-third of the men in my study had had only one sexual partner—their current wife. Of these men, most had had their first sexual encounters on their wedding nights. However, exactly two-thirds of the men I interviewed had experienced premarital sex, usually with a small number of sexual partners. As one Lebanese man explained, “It is very rare in Lebanon to have multiple partners, or sex before marriage.” Another put it more whimsically, “In Lebanon, because of religion, you have to take sex like a thief! Lebanon is not sexually open like America.”
Having said this, 17 percent of the men I interviewed in Lebanon claimed to have had more than 100 sexual partners in their lifetime. Virtually all of these men had spent significant periods of their youth outside the Arab world, mainly in West Africa, Europe, North America, and Latin America. These diasporic Arab men had often emigrated for work or to avoid youthful military conscription. But once outside of the Arab world, many of these young men lost their virginity, going on to have multiple sexual partners over time.

These sexually active Muslim men often explained during ethnographic interviews how the sexually open climates of host countries had encouraged them to engage in premarital sex. But once they married, usually to an Arab woman, their premarital sexual histories came back to haunt them. Finding themselves infertile, some blamed their promiscuous youths, believing that they were being punished by God for their premarital zina. Excessive premarital sex, encounters with prostitutes, and the contraction of STIs, were mentioned with particular regret, being seen as the cause of dissipated reproductive potential. Not all men were certain that they were being punished by God for their premarital sexual acts. In fact, a few men I interviewed told me that they did not feel guilty whatsoever for having engaged in premarital sex, especially when it was with a beloved girlfriend. However, the general view of premarital sex among the hundreds of Muslim men in my Lebanese study was that it was haram, or sinful. When a few men were bold enough to ask me what I thought about their sexual histories, I simply stated that premarital sex was ‘aadi fi Amrika—“normal” or “common” in America. This seemed to put some men at ease. So I began repeating this statement often when men told me about their premarital sexual histories. Furthermore, since most cases of male infertility have nothing to do with the men’s sexual histories, I sometimes told these guilt-burdened men that sex and male infertility are not interconnected, medically speaking. In other words, in my role as unwitting ethnographic confessor to these often anguished and infertile Muslim men, I did my best to ease the zina guilt. Furthermore, I would sometimes differentiate male infertility as a medical condition from sexual wrongdoing and divine punishment.

While most men in my Lebanese study admitted that they had engaged in premarital sex, the majority were adamant that they had been faithful to their wives over the course of their marriages. Indeed, in all of the studies that I have conducted in Egypt, Lebanon, the UAE, and Arab America, I have found that most husbands are deeply devoted to their wives, even if
their wives are infertile (Inhorn 1996, 2003, 2012, 2015). Given men’s devotion to marriage, it always came as a bit of a surprise to me when men confessed their extramarital affairs, usually explaining at great length how these situations had developed. Such infidelities, it seemed, were usually the result of tensions developing over time within childless marriages. A few men told me that they had become extremely sexually frustrated within their marriages, given that their wives were clear that they did not enjoy having sex. In most cases, however, it was the infertility itself—namely, the social tensions surrounding the childlessness and the feeling that marital sex was only for the purposes of procreation—that had led to marital strain. These tensions, in turn, had caused a few men to seek extramarital relationships with other women.

Of the 220 men in my Lebanese study, only nine—four infertile men and five men married to infertile wives—admitted to marital infidelities. Similarly, small numbers of men in my other studies also confessed their infidelities. In fact, in the UAE, where I met Muslim men from many different nations, a few volunteered for my study simply to divulge the stories of their troubled marital and sexual lives.

Although most of the zina confessions I heard were in Lebanon, I want to share the stories of two men, both of whom I met in later studies, one in Dearborn, Michigan, and the other in the UAE. The story of Ali, an Iraqi refugee, is interesting because of its location: namely, Ali’s sexual life was carried out almost entirely in the US, but his feelings of zina-related guilt harkened back to his Iraqi Shia local moral world. Similarly, despite residence in Dubai, the Middle East’s most “open,” cosmopolitan city, Amr, a Palestinian Sunni Muslim man, was wracked with guilt over his extramarital affair with a married Emirati woman, who was also a Sunni Muslim. In an attempt to purify himself, Amr turned to his local moral world of Muslim pilgrimage. However, coming to an IVF clinic for a male infertility consultation, he sought out the American anthropologist, divulging his morally complicated tale for the first time in the ethnographic confessional.

Stories of Zina

Ali’s American Sex Life
I met Ali on a very cold and gray January day in Dearborn, Michigan, the place where I traveled each Friday afternoon to conduct research in an
Islam, Sex, and Sin: IVF Ethnography as Muslim Men’s Confessional

Arab-serving IVF satellite clinic. Locally, the clinic was known for its “famous” Arabic-speaking, Lebanese-American IVF physician. Infertile patients from the southeastern Michigan Arab community—also known as “Arab Detroit” (Abraham and Shryock 2000)—regularly attended this clinic, particularly Shia Muslim war exiles and refugees from Lebanon and Iraq, as well as Sunni Muslim economic migrants from the impoverished country of Yemen.

On this particular Friday afternoon, I met Ali, a 37-year-old Iraqi refugee, who had come to the clinic on his own to consult with the Lebanese physician. When he learned about my study, he was eager to participate. Together, we discussed Ali’s reproductive life history, with Ali answering my questions and asking his own.

From the beginning, it was clear that Ali had had a very difficult life. As a young man in Basra, Iraq, Ali had been a Shia resistance fighter, participating in the intifada (uprising) to remove Saddam Hussein from power following the First Gulf War. Ali was shot in the pelvis, spending four months in a Basra hospital following surgery to remove the bullet fragments. But, shortly after Ali’s release, Saddam’s forces crushed the Shia-led uprising. Ali fled to Saudi Arabia with thousands of other Shia fighters. There, he was imprisoned in an isolated, desert refugee camp, the conditions of which were appalling. However, it was back in Iraq that Ali’s family faced Saddam’s revenge. Ali’s older brother, the father of four young children, was taken from his home by soldiers. As Ali lamented, “I lost my brother because of me. After I left, they took him. He has four children, and they never heard from him again.”

Ali could not go back to Iraq. So, after six years in Saudi custody, he was admitted to the US as a refugee. Already 30 years old, Ali had experienced sexual intercourse only twice in his life, both times back in Basra before the First Gulf War. With his arrival in America, however, Ali soon discovered a more “open” sexual environment. With his good looks and decent English language skills—acquired as an engineering student in Iraq—Ali was considered attractive by American women. Thus, Ali began having numerous sexual liaisons, a fact that he confessed to me sheepishly:

**MI:** Have you had more than one sexual partner?
**Ali:** Yes. Do I have to say the number?
**MI:** Only if you want to.
**Ali:** Okay, say five.
I began to write, and Ali started to laugh with embarrassment. Realizing that Ali might want to revise his answer, I asked him this “leading” question:

**MI:** Was it more like 100?

**Ali:** One hundred, no! But it was more like 50.

**MI:** Okay, that’s pretty normal.

**Ali:** Well, I am blaming myself. My libido is high, and maybe I “spent” all of my sperm back before marriage, because I had an active sex life. I don’t know sometimes, I did what I did, but it wasn’t right, just for sex, sex, sex! I used girls. Why? Maybe one or two, they loved me for me, but I was thinking something else. It’s good for me [i.e., the sex], but from God, maybe God wants to punish me. It’s “payback” time. In seven years, I had over 50 women. What kind of person is that, a dog? *Ali laughed, guiltily.*

**MI:** Well, did any of those relationships turn into something more serious?

**Ali:** I always used to tell people, “I can’t go any farther. This is just for fun.” But I broke some hearts; even American women, they have hearts!

Ali then went on to describe how he had once loved a young woman in Missouri, the state where he was initially resettled. But the steering wheel on a U-Haul truck he was driving locked in place, causing the truck to crash, killing his American girlfriend in the passenger seat. Ali spent a year in the hospital with multiple fractures. But the death of his girlfriend caused Ali significant stress and feelings that he was now responsible for the loss of two loved ones. Recuperating alone in an American hospital, Ali spoke to his father back in Iraq. “Why do you have such a tough life?” his father asked him. “You need to settle down.” The family began looking for an Iraqi wife, one who would be willing to move to America to be with Ali.

After his release from the hospital, Ali eventually moved to Arizona, then to Dearborn to be part of a larger Iraqi refugee community. There, he began thinking about marriage, and he let his family intervene. This is how Ali met Amira, his younger sister’s friend and a high school chemistry teacher in Basra. Amira and Ali courted for several months by long-distance telephone calls, before he eventually traveled to Jordan to meet her and sign the marriage contract. Although it took several months, Amira eventually joined Ali in Dearborn as his wife. But after a year of living together, with sex almost every day, Amira was not getting pregnant. Haunted by his
I happened to meet Ali soon after he had received the devastating news of his very low sperm count. Ali lamented to me, “I was shocked. I cried, ‘cause I want a baby. I feel upset. I feel like I’m not a normal person. She [Amira] is the strong one. She said, ‘I don’t care, as long as I have you. We do our best, and that’s it.’ But, especially among Arab people, I feel like I’m not a man. It’s a bad feeling. I don’t know where it comes from, but I feel this.”

At this point, I wanted to offer Ali some kind of solace, so I told him, “But it’s just a medical condition like any other condition.” He then replied, “Well, this helps to calm me down. I am beginning to feel like that—like some people are born and don’t have nice hair. It’s just something I’m born with.”

Whether Ali truly believed that his male infertility was a medical condition and not God’s punishment for his zina-filled past, it was telling that he was seeking medical therapy when I met him, hoping to “activate” his sperm production by taking medication. Although the Lebanese doctor could offer him no such miracle cure, I gave Ali an ethnographic opportunity to share his confession, perhaps alleviating in some small way his tremendous burden of zina-related guilt.

**Amr’s Adultery and Paternity Woes**

Exactly three years after I met Ali in Dearborn, I met a man named Amr in an IVF clinic on the outskirts of Dubai. As soon as he saw my study advertisement posted in a clinic waiting area, Amr offered to speak to me. Almost immediately and without prompting, Amr launched into his self-described “tragic” story, telling me that he had never before shared it with anyone else. Over several hours in the back room of the private clinic, I listened to Amr, interjecting questions only for further edification. Amr’s free-flowing narrative is dramatically condensed, but its essence is contained here, explaining why he had become a zina-tortured soul.

Amr hailed from a large Palestinian family, one that expected him to produce many children, especially sons. However, he and his wife had had a difficult reproductive history, producing only two daughters and one eight-year-old son over many years of marriage. Assuming (incorrectly) that his wife was the infertile party, Amr considered remarrying in order to produce more sons for his family. To that end, Amr began carrying on what he described as a “secret life” with an Emirati junior colleague at the oil
company where they both worked. Amr’s colleague, also a Sunni Muslim, told him that she was unmarried and attracted to him, the “boss” of their unit. Thinking of her as a potential marriage partner, Amr had sex with her three times in the office, avoiding pregnancy by “pulling out.” He recorded the exact dates of these illicit relations in a personal diary, and these dates later became extremely important to him. When Amr’s Emirati lover became pregnant, she claimed that the baby was his—a claim that did not necessarily coincide with the dates of his sexual liaisons with her. Amr’s lover, he soon discovered, was actually married to an Emirati man, and was known to have taken other lovers at the oil company. Still, Amr could not be certain of the child’s paternity, and he was tortured over whether he had, in fact, impregnated his colleague.

When I met Amr at the IVF clinic, he was living in agony, trying to figure out through the diary that he showed me whether the exact dates of his extramarital encounters could have produced his lover’s child, another baby girl. Amr considered his acts of zina—three extramarital sexual encounters, leading to a potential out-of-wedlock pregnancy and illegitimate child—“the worst mistake I’ve ever made.” He explained to me,

When I came to know that she is pregnant, from that day ‘til now, I cannot sleep from thinking: Is it mine? Not mine? I’ve started having high blood pressure and high cholesterol because I feel I’m guilty. I feel really guilty. I’m crying all the time, saying “What did I do?” I don’t know if the child is mine, and we ended with a big fight, me and her. Legally, I can’t tell anyone, because the punishment here would be severe, especially with a “local” [Emirati woman]. And it’s not only the zina, it’s not just that. I feel I have my baby outside—my baby is outside with someone else. My baby, what can I do for her? In the future? Is it mine? Not mine?

What was worse, Amr was forced to see his ex-lover every day at their workplace. Although she would no longer speak to him, Amr had thought about paying for the infant girl’s paternity test, an option that he realized was implausible.

It’s a tragedy. I can’t take that little girl from her house for a paternity test, and I can’t meet her mother anywhere to do it. I was her boss for five years. Afterward, she told me, “I just wanted your protection
at work.” What was she doing? Just playing with my emotions? Now she’s going for another illegal love. It really is rubbish. She is a material girl—to take my support, and when the support is over, she doesn’t care about me. If there was no baby, I wouldn’t care about it so much; it would be over. But I still feel that pain in the “inner core.”

I asked Amr if his wife had suspected anything. “I didn’t tell my wife,” he said. “But, yeah, she felt there was something wrong. She tried to become very close to me at certain times, because during that time, my [sexual] relations with her, I let them go. She had her suspicions and doubts, I’m sure: ‘My husband is going with another woman.’” He then added, “I don’t drink, and I’m not in the habit of going looking for women. I never, never did this before. But I lost my grip on myself, just for a few months. And this is the biggest mistake in all my life. After that, I felt real guilty. And being a Muslim, I did a big mistake. I blame myself.”

In an attempt to assuage his guilt and to get back on the straight path of Islam, Amr took his wife on an umrah pilgrimage to Mecca, where he hoped to “cleanse” himself of the zina he had committed. He also took his wife to an IVF clinic in Nablus, Palestine, where he learned that his own sperm count was very poor. His newfound male infertility, he surmised, was God’s retribution for his moral failing. Nonetheless, through assisted reproduction, Amr’s wife became pregnant with their fourth child, another daughter. When I asked Amr how he felt about having another daughter, he claimed that he was happy, adding wistfully, “As we say: Something is better than nothing.”

As we wrapped up our lengthy interview, Amr reiterated, “I never, ever told anyone. This is the first time I’ve told my story. It’s ‘top secret.’ But I like Americans, and I felt you would understand.” As Amr stood up to leave, he handed me his business card, saying, “You gave me support. You gave me great psychological relief. I cannot thank you enough, Sister. I am at your service.” Then, as he closed the door behind him, he added, “you made my day.”

**Conclusion**

This piece has focused on the intersection of Islam, sex, and sin—including the discourses and practices that shape Arab Muslim men’s sexual, moral, and emotional lives. As we have seen in this article, the Islamic religious
tradition has been very clear in demarcating licit (marital) from illicit (non-marital) sex. Yet, as is also clear from my own ethnographic research in several countries, Muslim men—perhaps the majority—may end up committing zina and then blaming themselves later for their male infertility problems.

Male infertility is a common reproductive health condition in the Muslim Middle East—a region with some of the highest rates of male infertility in the world, and with many cases that are severe and of probable genetic origin (Inhorn 2012). Yet, few infertile Arab men are aware of this regional male infertility profile. Instead, most suffer alone and in silence, often blaming the condition on their prior sexual histories. Indeed, in the hundreds of reproductive life histories that I have collected from infertile men in Egypt, Lebanon, the UAE, and Arab America, I have heard anguished stories of sexual guilt, with men blaming themselves for their current reproductive problems. Some argued that they had “used up” all of their “good sperm,” while others stated bluntly that they were being punished by God.

As seen here, premarital sex is a common form of zina among Muslim men in a changing social and economic world characterized by long periods of presumed premarital celibacy, as well as the disruptions of war and diasporic exile. When “waithood” does not entail waiting for sex, and when zina occurs outside of marriage, there are no culturally sanctioned outlets for male sexual disclosure or expression. As powerfully argued by El Feki in Sex and the Citadel (2013), sexuality is a sphere of Muslim life marked by “censorship and silence.” Muslim men are thus not encouraged to reveal their sexual secrets in a moral environment where zina violations are well-defined, and the threat of punishment potentially severe. Furthermore, Islam itself does not promote religious confession or public testimony. As a result, the Muslim “sexual sinner” bears the burden of his guilt alone, often telling no one of his premarital or extramarital sexual affairs.

Indeed, when I entered the field back in the late 1980s, I never imagined that I would eventually hear the sexual confessions of hundreds of Arab men. But IVF ethnography has provided an exceptional opportunity for morally troubled Muslim men to admit their past and present sexual indiscretions to a non-judgmental anthropological “Other.” Never trained as a “confessor,” I was unprepared to encounter men’s felt needs to confess, or the ways in which many Muslim men tied their sexual histories to their present infertility problems. Nonetheless, over the years, I have tried my best to listen empathically to my male interlocutors, and to provide a safe ethnographic haven for men’s sexual disclosure and catharsis.
Such ethnographic confessionals, I would argue, are clearly needed in the Arab world (Inhorn 2014). There, research on sex has barely begun (El Feki 2013), but the potential for sex, sin, and resulting guilt remains quite high and deeply hidden among the male Muslim population.

As an anthropologist, I am committed to ethnography as the best way to explore Arab men’s changing social worlds and their embodied experiences of sexuality. I believe that it is crucial to undertake ethnographic studies of real men’s lives, ones that can account for their most intimate revelations, their embodied “being-in-the-world,” and their moral responses to new social and economic realities. Indeed, men live their lives within social and physical worlds that are constantly changing. That many Middle Eastern Muslim men today are defying expectations of sexual “waithood”—and are committing acts that are clearly defined as zina—speaks to one of the ways in which Arab male embodiment might be changing in the 21st century, including in the sexual realm.

Eventually, the local moral worlds of zina may shift—at least in social attitudes and sexual practices, if not in religious law per se. And the sexual silences that currently pervade Muslim men’s lives may, too, be broken. As noted by Krondorfer in his book on Male Confessions, confessional writings constitute “a transformative ‘moral space’ for men orienting themselves anew” (2010:5). So, too, may the ethnographic confessional be transformative—constituting a safe moral zone for Muslim men to reveal and reimagine less haunting intersections between Islam, sex, and sin.

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Endnotes:

1 Although Middle Eastern Christian men may also commit sexual acts that are considered sinful within various forms of Christianity, they are also freer to confess these sins (especially if they are Catholic), or seek other forms of pastoral care and counseling. Thus, the Christian men in my various studies told me about their premarital (and occasionally, extramarital) sex lives, but rarely went on to describe moral agony over sexual guilt. Premarital sex, especially with committed girlfriends, seemed more accepted among the Christian Middle Eastern men I met. Having said that, a further study of sexuality among Middle Eastern Christians would be worthwhile, and I appreciate one reviewer’s suggestion that this angle is missing when only Middle Eastern Muslim men’s lives are highlighted.

2 The remaining men in the Lebanese study, nearly one-third (30 percent), were Christians from a variety of denominations, including Maronite Catholic (14 percent), Greek Orthodox (8 percent), Armenian Orthodox (2 percent), and Roman Catholic (2 percent).

3 All of these research projects received Institutional Review Board (IRB) approval at the University of Michigan, where I was a professor at the time and where the IRB committee was especially concerned about maintaining the ethicality of its faculty’s international research.

4 More than half of the interviews in Lebanon were conducted in Arabic (57 percent), and about one-third in English (35 percent), with the remainder involving both languages (8 percent). Many of the men in the study had lived outside the Middle East and spoke excellent English (along with other languages in many cases).

5 Missing from this list is homosexuality. None of the men in any of my studies admitted to having sex with other men. I was frankly reluctant to ask this question in these “very married” IVF clinic settings, where men were attempting to conceive with their wives. In retrospect, it would have been interesting to know more about homosexuality, which is considered in Islam to be a grave form of zina. Yet, childlessness may, in fact, be the outcome of sexual problems induced by mandatory heterosexuality within the Middle East, in which enforced marriages are bound to fail “in the bedroom,” if not elsewhere. Some men in my various studies admitted to having little interest in sex with their wives, and a few men were totally impotent within marriage. Men who desire men, but who feel forced by social propriety to marry women, may lack the capacity to undertake the mandatory heterosexual sex act, which, as we have seen, is the only legitimate form of sex condoned by Islam.


7 In men, some sexually transmitted infections (STIs), particularly gonorrhea and chlamydia, can cause blockages in the vessels essential in sperm transport. The result is obstructive azoospermia, in which no sperm are released in the ejaculate due to these infection-induced blockages in a man’s testicles. However, most cases of male infertility have nothing to do with sex or STIs. Instead, male infertility is usually attributable to spontaneous or inherited genetic mutations of the Y chromosome.

8 All names are pseudonyms.

9 The umrah is a pilgrimage to Mecca, Saudi Arabia, which can take place at any time of the year. Sometimes called the “minor pilgrimage” or the “lesser pilgrimage” when compared to the major hajj pilgrimage, the umrah is not compulsory but is highly recommended. The hajj, on the other hand, is compulsory for every able-bodied Muslim who can afford it.

References:


Foreign Language Translations:
Islam, Sex, and Sin: IVF Ethnography as Muslim Men’s Confessional
[Keywords: Ethnographic confessional, Islam, IVF, Muslim men, sex, sin]

Islam, секс и грех: IVF-этанография (по искусственному оплодотворению) как черта мусульманской мужской исповедальни.
[Ключевые слова: этнографическая исповедальня, ислам, IVF, мужчины-мусульмане, секс, грех]

Islão, Sexo e Pecado: Etnografia da Fertilização in Vitro Enquanto Confessionário Islâmico Masculino
[Palavras-chave: Confessionário etnográfico, Islão, fertilização in vitro, homens muçulmanos, sexo, pecado]