



EVERYDAY LIFE IN THE MUSLIM MIDDLE EAST

THIRD EDITION

EDITED BY

Donna Lee Bowen

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Indiana Series in Middle East Studies



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GENERAL EDITOR

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1996); Donald Cole's book *Nomads of the Nomads: The Al Murrah Bedouin of the Empty Quarter* (Arlington Heights, IL: Harlan Davidson, 1975); and Anh Longva's "Nationalism in Pre-Modern Guise: The Discourse on Hadhar and Badu in Kuwait," *International Journal of Middle East Studies* 38 (2006): 171–87. Finally, interested readers might also consult my (Andrew's) own book, *City of Strangers: Gulf Migration and the Indian Community in Bahrain* (Ithaca, NY: ILR/Cornell University Press, 2010), and particularly chapter 7, which explores social differentiation in Bahrain.



11. Middle Eastern Masculinities in the Age of Assisted Reproductive Technologies

Marcia C. Inhorn

Too often, observers of the Middle East assume that patriarchal patterns of authority preclude kind, thoughtful, and involved husbands, fathers, brothers, and grandfathers. While one of the strongest ways to mark one's manhood has consistently been through virility and producing children, infertility is an increasing concern for many Middle Eastern men. It is particularly a problem given that some interpretations of Islamic religious law hold that formal adoption is heavily discouraged and that many forms of assisted reproduction are essentially adultery—infidelity to one's spouse. Some husbands dealing with infertility express their devotion to their wives by taking extra measures, which may be invasive and expensive, to give their wives the opportunity to enjoy the joys of family and children. —Eds.

Male infertility is one of the world's best-kept secrets. Few people realize that male infertility contributes to more than half of all cases of childlessness worldwide. In the Middle Eastern region, the rates of male infertility are even higher—generally 60–70 percent of all cases—with very severe forms that are probably genetic in origin and related to consanguineous (cousin) marriage. In such cases, the only solution is intracytoplasmic sperm injection (ICSI, pronounced “ick-see”), a variant of in vitro fertilization (IVF) designed in the early 1990s in Belgium to overcome male infertility. Since 1994, when ICSI first arrived in Egypt, demand for this assisted reproductive technology has skyrocketed across the Arab world.

Having interviewed more than three hundred infertile Middle Eastern men seeking ICSI in IVF clinics across the region, I argue that it is time to “reconceive” Middle Eastern manhood. Reconceiving Middle Eastern manhood requires scholarship that brings men back into the reproductive imaginary as progenitors, partners, decision makers, protectors, friends, lovers, companions, nurturers, and fathers. My own research shows that Middle Eastern men are often heavily involved and invested in many aspects of the reproductive process from impregnation to parenting.

Today, "new Arab manhood" may be technologically mediated, involving high-tech forms of assisted reproduction. New Arab manhood has also become globalized, involving men's transnational border crossings in pursuit of conception. Arab men's pursuit of these high-tech solutions provides an example par excellence of what I am calling "emergent masculinities," a term that attempts to capture all that is new and transformative in Middle Eastern men's lives in the twenty-first century. The term "emergent masculinities" is intended to encapsulate change over the male life course as men age; change over the generations as male youth grow to adulthood; and changes in social history that involve men in transformative social processes. In addition, emergent masculinities highlight the new forms of masculine practice, such as men's engagement with IVF and ICSI, which accompany these emerging social trends. The story presented here, of a man whom I shall call Fuad, is indicative of these changes in Arab manhood.

MEETING FUAD

At a clinic called Conceive, located on the border of Dubai, United Arab Emirates, I met a brooding but loquacious Lebanese man, Fuad,¹ who was seated at the bedside of his stunning Russian wife, Tatiana. Like fifty-five thousand other young Lebanese men of the "war generation" (1975–1990), Fuad had been sent to college in the former Soviet Union through a scholarship provided by a left-leaning Lebanese political party. As a student in Moscow, he learned to speak fluent Russian, later marrying the beautiful Tatiana, who was the mother of a nine-year-old daughter, Aleksandra. In an attempt to make a comfortable life for his bicultural family, Fuad settled Tatiana and Aleksandra in Dubai, the Middle East's only truly "global city." But living in Dubai was expensive, forcing Fuad to take a more lucrative telecommunications position in Riyadh, Saudi Arabia. Not wanting his beloved Tatiana to move again—and especially to a more conservative country—Fuad moved alone to Saudi Arabia, beginning his career as a "frequent flyer" across the Gulf.

At the time of our meeting, Fuad had also set in motion the family's immigration to Canada. Indeed, Aleksandra, now eighteen years old, had recently started college in Toronto, Ontario, and Fuad hoped that she would make her future life there. As for himself, Fuad had cut his ties to Lebanon, especially after the 2006 summer war with Israel. Nonetheless, as the only son, he was expected to support his aging Lebanese parents, making him effectively responsible for four households—his parents' home in Beirut, his wife's apartment in Dubai, his stepdaughter's dormitory in Toronto, and his own townhouse in a "foreigners' compound" in Riyadh. Fuad was clearly a "global cosmopolitan"—one of the new generation of educated, middle-class Middle Eastern businessmen whose lives are decidedly transnational, exceptionally mobile, markedly multicultural and multilingual, and at times extremely stressful. Indeed, Fuad was keen to narrate to me his tale of stress and woe, in which he punctuated the pathos with moments of ribald humor.

On the side of pathos, Fuad and Tatiana had struggled with long-term reproductive troubles. After nine years of "togetherness"—seven of them as a legally married couple—Fuad and Tatiana had still produced no child of their own. Fuad blamed this barrenness on his dislocation in Saudi Arabia, as well as both male and female infertility problems, which he narrated to me from Tatiana's bedside.

CONFRONTING INFERTILITY

"We were not thinking about it—pregnancy—or when it will come," Fuad explained. "But then we had an 'incident' in 2000—an ectopic pregnancy, 'outside the uterus.'² We were there in Lebanon, meeting my parents for the first time, and then we were supposed to go to Germany through Berlin to stay with my uncle. But she had severe pain, and it was an ectopic emergency, so we stayed in Beirut, where they treated her. Before that time, her [fallopian] tubes were fine. But now we discovered that one of her tubes is blocked, and we have to do IVF."

"On the initial test, the first test, my [sperm] count was also low, like 18 million, with 90 percent abnormal sperm.³ This is because of my 'lifestyle.' I'm smoking and consuming spirits. I'm a social drinker, but I have a lot of opportunity to drink! So I was tested again this year, and I started going over things, treating myself with vitamins. I decreased my intake of spirits. But I couldn't stop smoking. I still smoke one pack a day. But with these changes, my count was raised from 18 million to 45 million to 55 million. On the day of insemination⁴ it was 113 million, but still 85 percent abnormal."

"You know what? I'm not the first one with these [infertility] problems. I'm understanding that it's a common problem in the Middle East. It's the lifestyle, the stress, the money issues, and the lifestyle again. Most guys now have high blood pressure. Like me, I have high blood pressure, and for two years, I've been on medication. People in the States and in Canada, they walk, they play sports daily. They go to work, change their clothes at work, and go to the gym while working. Like it's a must—daily exercise. But here, it's a crazy society because of the weather [high heat], and traffic jams. People don't have time to exercise. People don't follow hobbies, and when they do, they don't really work on them. But it's worse in Saudi Arabia. I'm living in Riyadh and it's the worst place. It's landlocked, and there's no beach. I have economic reasons for being there, but it's not nice at all. For couples, especially expatriates, they can survive if they're both working. Otherwise, you'll be dying from doing nothing at home! You will gain weight as a woman, and so you have to work. You go inside a compound [for expatriates], and it's not a healthy environment. I live in a compound, and I'm the only Arab there! You drink the local stuff, the local spirits, which are not good for your health. So now I'm stopping all of this. In fact, I want to stop my job in Saudi Arabia, even though I can't afford to right now. I would prefer to have a Canadian passport, but to stay here [in Dubai]. There are a million and a half Lebanese in Quebec alone! But it is better to be there if you're young, right after graduation.

Not at this age. It's too late for me now, to start all over again from zero. If I were twenty-two or twenty-four, I would go there. It's a good place for the freshly graduated. I could stay six or seven years there, and then move to the Gulf. But we did the opposite!"

BECOMING A REPRODUCTIVE "TOURIST"

As I soon came to realize, Fuad and Tatiana were living "betwixt and between" three continents and five countries—the UAE, Saudi Arabia, Lebanon, Russia, and Canada. Thus, deciding where to pursue assisted reproduction was a difficult calculation. "We did a lot of research," Fuad said, "and not only on the internet. We did internet research about the process, all the IVF procedures and this ICSI. We did our own research on the doctors who do this. [Tatiana] has a beauty parlor [in Dubai]. She's a beautician, and so a lot of people come in there, and they told us why they had chosen to come here. It was word of mouth that got us to Conceive."

But "getting to" Conceive was not so easy. Indeed, Fuad was quite grumpy on the day of our conversation. "We did an insemination two weeks ago, and it was not a success. This is why I am pissed today. We were supposed to do IVF on February 25, but first she needs an operation to block the tube. It is filled with water, and it needs to be blocked so that it will not leak into the uterus.⁵ But then we have to wait for one more month before we can do IVF. So they should have checked the tube *before* insemination, because it was a wasted process—and a waste of money and time. I don't find flights easily from Saudi Arabia. I just arrived last night, and I'm leaving again in three hours."

Indeed, Fuad was a "man on a mission"—to fly across the Gulf in time to deposit his semen in the IVF laboratory and to support Tatiana through her various assisted reproductive procedures. Fuad's difficult commute between Riyadh and Dubai made the thought of trying reproduction elsewhere seem highly impractical. Although assisted reproductive technologies in both Russia and Canada are partially subsidized by the state, Fuad and Tatiana did not have full citizenship rights in either country. Furthermore, they had already experienced long waiting lists and a lack of individualized medical attention in previous visits to public clinics in those countries. Coupled with the long flights, travel costs, and lost work days, they decided that "reproductive tourism"—the term coined by scholars and media pundits to describe transnational IVF treatment quests—to either Moscow or Toronto was simply not worth it.

When I asked Fuad whether he considered himself to be a "reproductive tourist"—the term coined by scholars and media pundits to describe transnational IVF treatment quests—Fuad had this to say: "You can't mix 'tourism' in the title for this. I'm finding that it's difficult to travel like this. It's not about the money. It's about finding the right time. Today I should be working, but instead I'm coming here. And this has happened time and time again. I don't know how some people can afford it, because medicine and travel are expensive. But at the

end of the day, you don't want to say, 'This is it. We give up.' We need to feel that we're doing something [to have a baby]. But it's not a straightforward procedure. We're talking about two weeks of daily injections for Tatiana, and staying without sex before doing my test—the semen test.⁶ So imagine if you are flying! It is madness, and it's depressing! People usually fly to have fun—not this! So it's *not* 'tourism.' Even for those who are staying in a hotel, do you think they are having a nice time? At night, he should not touch her [to make love] because he has to come [to the clinic] in the morning and shake his thing—[i.e., masturbate] to do the semen test!"

PERPETUATING PATRILINEALITY

I asked Fuad what he hoped to achieve at Conceive. "I hope to have two—twins," he said. "But one is enough. If we have to repeat a procedure like this again, then we don't have time for two. But if two come at the same time, this will be a blessing." When I asked Fuad if he preferred boys or girls, he exclaimed, "Boys!" When I asked him why, he explained, "Because we have a girl already. I've raised her as my stepdaughter since she was nine years old. But this is a family issue—who will take the family name? In my [natal] family, there are three girls, and I'm the only boy. All over my family—my aunts, cousins, and uncles—each one of them has only one boy and a lot of girls."

I then asked Fuad if he would ever consider egg or sperm donation, practices that can increase the success rates of IVF and ICSI but which have been banned by Sunni religious authorities, including in the UAE, which passed a law against the procedures in 2010. He explained, "I'm Muslim, Sunni, but this is only on my ID card. I'm not practicing. I'm not a religious guy at all, since I drink. But I heard about it a lot—that you can have different eggs from different women. But, you see, I'm against it. It's not about religion, it's about DNA! And we have a kid already. We prefer to get our daughter married and then she will have her own children. It's better than having another person serve as a donor for us. I'll tell you who would do that—those who need the 'sensation' of kids. But we have that already because of our daughter. For me, it's not a moral issue. It's not a sentimental issue. I need the DNA! My family's name! And it's the same with adoption. When thinking about alternatives and different steps to having children, the last one is adoption. I won't go through with that. I'm not Angelina Jolie! We need *our* DNA. It's a good match!"

As we looked down at Tatiana, who was quietly resting, I felt compelled to mention to Fuad that she was certainly a beautiful woman. "Yes," he confirmed. "But even more from the inside than the outside." Tatiana, who spoke only Russian, was soon to be moved into the operating theater, for a diagnostic procedure to visualize the inner recesses of her barren womb. Whether she and Fuad went on to conceive the child of their dreams is unknown, for I only encountered them one more time in the clinic—and they were not yet pregnant.

BEING A NEW ARAB MAN

Fuad's story clearly demonstrates that Arab men today are changing their personal lives, interjecting new notions of manhood, gender relations, and intimate subjectivities into their ways of being. Although Middle Eastern Muslim men have generally been portrayed by the Western media since September 11, 2001, as terrorists, religious zealots, and brutal oppressors of women, most ordinary Middle Eastern men bear little resemblance to these vilifying caricatures. Rather, men in the Middle East today are enacting emergent masculinities in ways that defy both patriarchy and Western-generated stereotypes. These would include, for example, men's desire to date and sometimes live with their partners before marriage; men's acceptance of condoms and vasectomy as forms of male birth control; men's desires to live in nuclear family residences with their wives and children; men's encouragement of daughters' as well as sons' education; mass migration of men to the petroleum-rich Arab Gulf and to virtually every other continent; concomitant delays in marriage as young men and women "establish" themselves in new careers, new nuclear residences, and new lives different from their parents'; and emerging social movements, including recent protest movements against dictatorial regimes, which have been largely initiated by younger-generation men and which have spread like wildfire across the region via social media networks. In short, a veritable "revolution" in men's and women's social worlds and their interactions with each other is abundantly observable across the Middle Eastern region today, but is rarely noticed by scholars and media pundits.

Although it is little recognized or appreciated, the Middle East is also home to a high-tech health sector, offering the latest advances in most forms of science and medicine. Emergent masculinities in the Middle East are intersecting in complex ways with a variety of emergent health technologies, including assisted reproduction. If infertility threatens fatherhood, it is now typically viewed as a medical condition to be overcome through assisted reproductive technologies, rather than as a sign of diminished manhood. The modern-day treatment quest—which often includes repeated semen analysis, clinic-based masturbation, testicular needlework, genital surgeries, and other forms of embodied agony—is men's badge of honor, signifying the ways in which men suffer for reproduction and love. Their feelings of sympathy and sacrifice—of doing all of this "for her"—are prominent motivating factors in emergent marital subjectivities in the Middle East today.

Gender scripts surrounding conjugality are also being reworked in complex ways as ICSI and other assisted reproductive technologies reach wider and wider audiences in the Middle Eastern region. I would argue that assisted reproduction itself is changing the Middle East in unprecedented ways, creating many new possibilities for marital, gender, and family relations. The very growth of a booming Middle Eastern IVF industry—for example, there are nearly 250 IVF clinics between the three Middle Eastern countries of Turkey, Iran, and Egypt—bespeaks not only regional pro-natalism but also the physical, financial, and emotional commitments of thousands upon thousands of married couples. It is im-

portant to point out that Middle Eastern men embark on IVF and ICSI within marriage, which is highly valorized. Within contemporary Middle Eastern marriage, most men desire romantic love, companionship, sexual passion, and monogamy, surrounded by a sphere of conjugal privacy within a nuclear household setting. Increasingly, Middle Eastern couples are remaining together in long-term childless marriages while trying repeated rounds of IVF and ICSI in the hopes of achieving parenthood. Furthermore, Middle Eastern men work hard, often emigrating for periods of their lives, in order to save the money necessary for these IVF and ICSI cycles. Fatherhood of "test-tube babies"—sons, but also desired daughters—is wanted as much for sheer joy and marital fulfillment as it is for patrilineal continuity, patriarchal power, or old-age security.

Fuad's story is a reflection of many of these trends. He is what I am calling a "new Arab man"—a man who is self-consciously rethinking what it means to be a man in the twenty-first century. Although his desire to produce a male heir to "carry the family name" is a reflection of both Middle Eastern patriarchy and patrilineality, almost nothing else about Fuad can be described as conventional. He has married a foreign divorcée, becoming a devoted father to her daughter. He has forged a path to citizenship in Canada so that his stepdaughter may be educated and free to start a new life in a welcoming country. He has made tremendous personal sacrifices so that his beloved wife, Tatiana, may live in a culturally diverse, safe haven in the Arab world. And with her he has pursued a complicated, transnational, high-tech quest for conception to overcome, in part, a male infertility problem that he accepts with magnanimity and is attempting to overcome through lifestyle changes. Although he does not view donor technologies or adoption as viable routes to parenthood, he has sound reasons for these convictions, basing them on genetic arguments rather than the moral code of a religion, Islam, that he has largely forsaken.

Fuad's story is not remarkable. It is quite representative, in many ways, of the hundreds of stories I have collected from Middle Eastern men—poor, middle-class, and elite, from more than a dozen Middle Eastern countries—since the new millennium. These "new Arab men" are self-consciously rethinking what it means to be a man in the Middle East today. They are, perhaps, the "silent majority." Their lives, loves, dreams, and disappointments deserve our recognition but rarely make the headlines or incite our scholarly imagination.

NOTES

1. All names used here are pseudonyms.
2. Also called a "tubal pregnancy," ectopic pregnancies are life-threatening and must be removed from the fallopian tube through either medication or surgical removal of the tube itself.
3. Fuad suffers from both oligozoospermia, or a sperm count of under 20 million, and teratozoospermia, a condition of abnormal sperm morphology, or misshapen sperm.
4. Before trying the more invasive and expensive in vitro fertilization, Fuad and Tatiana underwent intrauterine insemination, in which Fuad's sperm were injected directly, via catheter, into Tatiana's uterus.

5. Because of her earlier ectopic pregnancy, Tatiana suffered from hydrosalpinx, or fluid in her fallopian tube. If this fluid leaks into the uterus, it can "prevent the embryo from implanting. Thus, Tatiana needed an operation to "block" or clip her fallopian tube at its connection to the uterus.

6. Physicians highly recommend sexual abstinence for several days before semen collection to ensure an adequate sample of spermatozoa.

FURTHER READINGS

- Inhorn, Marcia C. 2012. *The New Arab Man: Emergent Masculinities, Technologies, and Islam in the Middle East*. Princeton, NJ: Princeton University Press.
- Inhorn, Marcia C., and Soraya Tremayne, eds. 2012. *Islam and Assisted Reproductive Technologies: Sunni and Shia Perspectives*. New York: Berghahn.



12. Few "Gays" in the Middle East, but Significant Same-Sex Sexuality

William O. Beeman

Observers of the Middle East in Europe and the United States over the past several centuries have been fascinated by the question of Middle Eastern sexuality. This has often led to exaggerated or distorted claims of nonstandard sexual practice—particularly same-sex activity—that have frequently been assailed by Middle Eastern critics as exemplary of "Orientalism." At the same time, many other observers characterize Islam as vehemently opposed to same-sex sexual activity, making it seem that such activity would be impossible in today's world. The truth lies somewhere in between. Same-sex sexual activity definitely exists in the Middle East, but it is not always constructed or practiced in the same way as in Europe or the United States. —Eds.

Iranian president Mahmoud Ahmadinejad was derided for his statement in a September 24, 2007, speech at Columbia University that homosexuality doesn't exist in Iran. Though many Americans may find it incredible, differences in the construction of sexual behavior do exist across cultures. The Middle East in particular has had a long-standing set of behaviors and attitudes relating to sex and sexual activity that are different from those of the West.

Anthropologists can state with confidence that sexuality varies tremendously between cultures. The notion that one must be either "gay" or "straight" does not accord with what we observe in pan-human sexual behavior, which is far more flexible and nuanced. The gay/straight categorization is an artifact of American culture, which glories in binary categories for classifying people. Folks that identify as "bisexual" (yet another ambiguous category) in the United States often receive criticism from both the gay and straight communities for "deluding" themselves about their sexuality.

Of course it is impossible to discern precisely what President Ahmadinejad meant in his remarks. But what is true is the construction of same-sex behavior and, indeed, same-sex affection in Iran is extremely different than in Europe and America.