

Nawal El Saadawi: Woman and Psychological Struggle

"Al Mar'a Wal Sira' Al Nafsi" (Woman and Psychological Struggle) by Dr. Nawal El Saadawi is an analysis of the problem of neuroses among Egyptian women.*

From her long experience with women patients Dr. El-Saadawi had observed that a large number of them exhibited neurotic symptoms. This caused her to find out more about the problem.

She first conducted intensive investigations at the psychiatric clinic of Ain Shams University. The results were astounding: 9.1% of all female students were diagnosed as neurotic compared to 6.2% of the male students. To control the factor of education, she then examined records of one of the governmental clinics in Cairo serving employees and workers, most of whom did not have more than elementary school education. The records revealed that 7.17% of all female workers had been diagnosed as neurotic compared to 5.02% of the male workers. Thus two things seemed clear: First, that Egyptian women exhibit a higher rate of neuroses than Egyptian men and, second, that educated women exhibit a higher rate of neuroses than uneducated ones. Why is this so? What are the main reasons behind neuroses among Egyptian women? These are the question which the book tries to answer.

Before starting to search for the causes of neuroses, Dr. El-Saadawi raises the problem of defining the term. There has been a lot of controversy among medical doctors and psychologists over the meaning of neuroses. This, she argues, is due to the misunderstanding of the causes and the nature of the problem. One thing is clear: it's a psychological, not a mental, problem.

In general terms, neuroses can be defined as certain patterns of behavior which result when a person has difficulties in adjusting with internal and external pressures. These patterns often appear in the forms of depression, unhappiness, headaches, laziness, lack of initiative, insomnia, nightmares, loss of appetite, loss of sexual desire and others.

To study the problem, Dr. El-Saadawi interviewed a purposive sample of 160 Egyptian women divided into four categories: educated neurotic, educated "normal", uneducated neurotic, and uneducated "normal." Her interviews with



these women were indepth, unstructured, and informal. They were meant to break all barriers between her and her interviewees and, hence, to help them talk freely about their feelings and pasts.

The factors she thought could be most relevant, and therefore conducive, to neuroses were the woman's childhood, teenage years, work, marital status, and psychological conditions such as dreams, fears, attitudes, memories, etc.

Results showed that the main reasons behind neuroses among Egyptian women were:

1. Male domination in the family (found in 29% of the neurotic cases).
2. Failure to fulfill one's self or ambitions (28%).
3. Failure in emotional and marital relationships (22%).
4. Failure in sexual satisfaction (13%).
5. Other reasons (8%)

These factors slightly varied between educated and uneducated women. Among the uneducated neurotic women, the male domination factor is the most important (36% of all the cases). Among the educated neurotic women, failure to fulfill one's self or ambitions had more importance (30%).

When comparing neurotic women to "normal" ones, the study reveals that neurotic women in general are more ambitious and more rebellious against their social environment. The educated neurotic woman faces conflicts when she has to choose between her ambitions, education and career on the one hand, and her duties as a housewife on the other.

At the same time, neuroses appear in the uneducated woman when she feels that she has lost her opportunities for an education or a career. Hence, she becomes reduced into a baby-making machine without any chances to develop herself outside her house and family.

The "normal" Egyptian woman, however, is the one who accepts her fate and her conditions without questioning them.

As Dr. El-Saadawi puts it, one of the most important results of the study was that intellectual and social problems play a much more important role in neuroses than sexual and emotional problems.

The study reveals that the suppression of sexual desires is closely related to the suppression of intellectual satisfaction. When a woman loses her opportunity to become aware of her conditions

and to think freely, she loses her opportunity to act freely.

Another misunderstanding of neuroses which the study refutes is that it is hereditary or a physical problem which allows doctors to cure their patients by giving them tranquilizers, pills and shots. These kinds of treatments, Dr. El-Saadawi argues, are useless and will not cure the patient.

Doctors must understand, she says, that the causes of neuroses lie not in a woman's head or body, but in her social conditions: in her school, family, and street.

In conclusion, Dr. El-Saadawi states that the problem of neuroses is a political problem as much as it is a medical one. One of the most serious drawbacks of the medical profession in our age is that it separates the human body from the social factors surrounding it. Curing women's problems is closely related to women's liberation, and in turn women's liberation is closely related to social liberation — the liberation of the human being from all forms of discrimination and exploitation.

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