

Violence against Women and the Dream of Empowerment in Africa

**Asmaa Abdel Aziz^{1*}, Mohamed Saeed Ahmed¹, Mustafa Osama Saad¹, Nourhan Amin
Abdel Rashid¹, Yolyana Wael Edwar¹, Karim Bahaa Ahmed¹, Mohamed Hisham
Mohamed¹**

Faculty of Arts, Cairo University

*Corresponding author: Asmaa Abdel Aziz

Abstract

Undoubtedly, there is no disagreement about the pivotal role of African women in their society. Likewise, no one can ignore or deny what these women endure in their childhood, adolescence, and youth in the form of the various violations and abuses since ancient times. Despite signing the convention to eliminate all forms of discrimination against women in 1979 as well as the Maputo Protocol in 2003 to protect the rights of African women, and committing to achieving gender equality in the Millennium Development Goals in 2015 and subsequently in the Sustainable Development Goals for 2030, discrimination against African women persists throughout their daily lives at home, work, school, and on the streets, even during times of peace and war. In the prevalent conflicts and civil wars in many African countries, both the army and rebel groups perpetrate sexual violence and physical and psychological abuse against women. This hinders any initiatives, policies plans aimed at empowering African women socially, economically, and politically. Therefore, this research paper seeks to present these violations, investigate their root causes, explore ways to confront them, and attempt to devise scenarios for empowering African women.

Keywords: Human Rights - Discrimination- Woman Empowerment – Sexual Violence- Genital Mutilation – Civil War.

1. Introduction:

The rising incidence of violence against women in all its forms claims lives across the African continent. Consequently, the Protocol on the Rights of Women in Africa, an annex to the African Charter on Human and Peoples' Rights, known as the Maputo Protocol, explicitly prohibits all forms of discrimination based on gender, race, religion, and so forth, in Article 2. In Article 18, the protocol calls on all member states to eliminate all forms of discrimination against women and ensure their rights as stipulated in all international human rights instruments, especially the Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights, and the International Covenant on Economic, Social and Cultural Rights. This reaffirms women's rights and their crucial role in the development process according to United Nations plans.

And it is worth noting that this protocol did not emerge in a vacuum but rather as a result of the immense volume of violations experienced by African women since birth in all aspects of life, including family, household, workplace, streets, and public transportation throughout their day. They are the most vulnerable to sexual violence, which takes various forms, such as reproductive mutilation, a serious and multidimensional problem in Africa. It adversely affects women's reproductive health, marital life, and social rights, posing a significant challenge that requires immediate action to prevent this practice.

Additionally, there is sexual violence by intimate partners, also known as 'marital rape,' which some countries still do not recognize as a crime against women. This can lead to psychological disorders, diseases, and sometimes fatalities, as seen in countries like Egypt, Cameroon, Ivory Coast, and others. Furthermore,

there is rape and human trafficking, especially during periods of conflicts and civil wars, where military militias persist in their actions against women. This has been evident with the Boko Haram group in Nigeria, which continues to rape, kidnap, and forcibly marry women. Two hundred girls remain missing following the Chibok schoolgirls kidnapping incident. In addition to early and forced marriages, with an estimated 39% of girls marrying before the age of eighteen in Sub-Saharan Africa, rising to 68% in Central Africa and Chad, reaching the highest rate of 70% in Niger. This information is based on a study on child marriage in West and Central Africa published by UNICEF and UNFPA.

Finally, and not least, in this study, we delve into a sensitive and painful subject. There is no doubt that all of these practices have serious health and psychological effects on women in Africa, representing a blatant violation of human rights and the sexual and reproductive rights of women. Therefore, in the following sections, we will attempt to identify the percentages of women who experience reproductive mutilation and sexual violence, as well as the health consequences of both on them.

ii. Methodology

This research paper examines the phenomenon of violence against women in African countries, which vary culturally and linguistically and are largely classified as developing nations striving for development through comprehensive approaches and partnerships to achieve progress and sustainability. The choice to study forms of violence and violations against girls and women in Africa was made despite the global prevalence of this issue for several reasons. Firstly, the researchers themselves are Africans living in countries on the continent. These abused women and girls are our mothers, sisters, and daughters. Additionally, various forms of violence persist, and some even receive support in several countries, despite these nations signing agreements, charters, and protocols to protect women's rights. However, these efforts have proven futile, hindering the achievement of women's empowerment and gender equality by 2030 according to the Sustainable Development Goals. This prompted an investigation into the prevalence of violence against African women in its various forms and identifying the countries that are most violent towards women, especially given the lack of data on certain forms of violence in many countries due to known and cultural reasons, such as sexual violence, due to fear of rumors, violence, or marital rape, which is still not recognized as a crime against women in many African countries, including Egypt and Cameroon. The study aims to explore ways to reduce and eliminate this crime.

As for the data and information relied upon in this paper, a research strategy was followed to explore the literature related to the aspects of the study's subject. The search involved a set of key Arabic and English terms in some international databases available through the Egyptian Knowledge Bank and the National Network for Scientific and Technological Information affiliated with the Ministry of Higher Education and Scientific Research. The investigation included searching some international databases available through the Egyptian Knowledge Bank and the National Network for Scientific and Technological Information affiliated with the Ministry of Higher Education and Scientific Research, such as:

DATABASE	SEARCH CRITERIA (ITEM TITLE)	NO OF ARTICLES
SAGE	Violence against women in Africa	500
JSTOR		1 (BOOK CHAPTER)
Britannica		0
Emerald insight		1

The volume of scientific production on the topic of violence against women varies between articles and scientific journals worldwide in the four databases. In Britannica, the number of articles was 22,935 and 300 journals. In Saga, the number of articles reached 3,372. In JSTOR, the volume of practical production was 46,767. As for Emerald Insight, the scientific production under this title amounted to 3,000 articles and journals.

In addition to searching in search engines such as Google, Google Scholar, and Bing. It is worth noting the scarcity of data on the numbers of abused women and the difficulty in obtaining it in many countries on the continent. The reasons for this could be attributed to two main factors. First, the customs and culture that force women into silence, fearing the shame that will follow if they disclose physical or sexual assault. Also, the normalization and acceptance of violence against women as a societal norm. Second, it may not be in the interest of these countries to know the numbers of abused women, which could negatively impact them in international reports.

iii. Results and Discussion

3.1 Reproductive Mutilation and Sexual Violence:

The practice of female genital mutilation, known as 'female genital cutting,' is an inherited tradition that has persisted over centuries, undoubtedly impacting the lives of millions of girls and women in the African continent. It is a harmful practice that leads to serious health and psychological consequences for these individuals and constitutes a blatant violation of human rights in general, and women's sexual and reproductive rights in particular. According to the World Health Organization and UNICEF data in 2013 on their respective websites, approximately 200 million girls and women have undergone female genital mutilation across three continents, including Africa. More than 125 million girls and women are currently living with the consequences of genital mutilation in 29 countries in Africa and the Middle East, according to the United Nations Population Fund website.

It is noteworthy that the prevalence rates of female genital mutilation vary among different countries in Africa. For instance, the prevalence rate in Somalia, Guinea, and Djibouti reached 90% and above, meaning that at least 90% of women and girls in those countries have undergone this practice. Meanwhile, the rates range between 20% and 50% in other countries such as Nigeria, Egypt, and Sudan (WHO, 2020).

When we talk about female genital mutilation in Africa, it is important to note that it is usually performed at an early age, before adolescence. This practice is not medical, and naturally, it is illegal and carried out without the consent of the victims. These survivors often experience severe consequences, including profuse bleeding, the inability to urinate normally, recurrent vaginal infections accompanied by intense pain and urination problems, complications during childbirth, and sometimes infertility. Additionally, they may face psychological deformities and the destruction of their sexual lives with their partners.

It is known as "female genital mutilation," and it involves all procedures that entail the partial or total removal of external female genitalia for cultural or other non-medical reasons. These procedures are often carried out through various inherited and cultural methods, such as the hot water hose technique, which is considered a form of torture rather than just mutilation. In some societies in Africa, women are placed in a position where they hold their knees to their chest, and then a hot hose is applied to their genitalia. Perhaps the most well-known and brutal forms of female genital mutilation experienced by African women are commonly known as "infibulation" or "pharaonic circumcision." In this practice, the clitoris is partially or often entirely excised, along with the removal of the small labia. The large labia are then stitched together to seal the vagina, leaving only a small opening at the base for the passage of urine and menstrual blood. This procedure may hinder the monitoring of cervical dilation and the progress of natural childbirth (delivery).

In many cases, it can lead to prolonged fetal retention, increasing the risk of severe damage to the mother's tissues (tears and fistulas) and fetal death. Consequently, the removal of infibulation during pregnancy or labor becomes a critical necessity to preserve the life of the fetus. What benefit does it serve if its occurrence is detrimental, and its removal is essential for the completion of a natural childbirth?

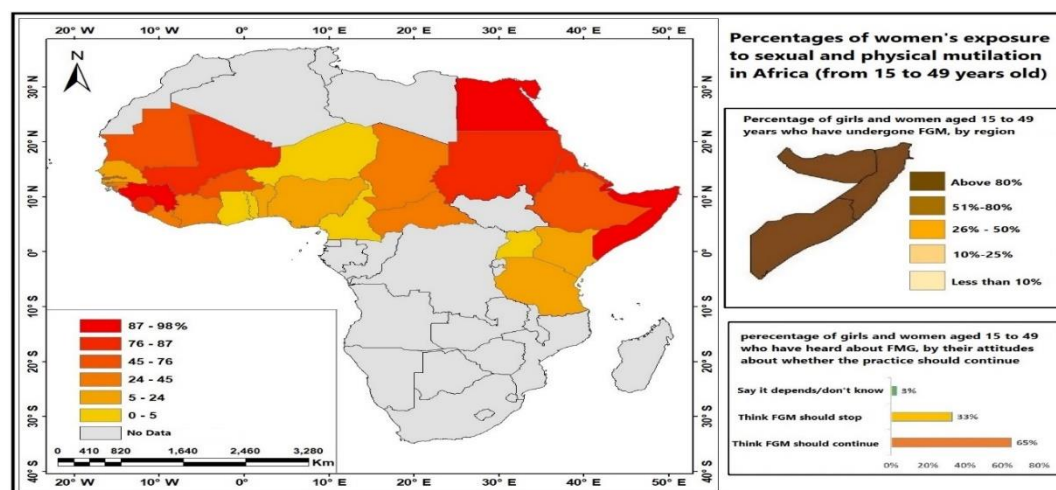
Based on a 2016 study conducted by the United Nations Children's Fund (Odukogbe, A. A., et al., 2016), female genital mutilation is performed individually, but in most African countries, it is carried out during communal celebrations where groups of girls or women undergo the procedure. It is estimated that during the current decade, 30 million girls will undergo female genital mutilation. According to the statistics from

this study, significant variations exist in the prevalence of this practice among women and girls aged 15-49 in African countries. Somalia ranked highest with a rate of 98%, while Uganda had the lowest rate at 1% (Figure 1).

This calls for pause and contemplation: According to UNICEF statistics in 2019 and surveying Somali citizens about this dangerous and harmful practice that devastates their women and daughters, leading to their deaths, a staggering 65% of Somalis support and endorse female genital mutilation, advocating for its continuation. Moreover, Somali migrants returning to their homeland during holidays engage in performing these procedures on their daughters, viewing it as a means to preserve the modesty of girls, prepare them for marriage, and ensure their purity. A vivid example of this is the story of activist Huda Ali, who faced such a situation and almost lost her life. According to the non-governmental Somali organization "Ifrah," only one out of every 100 women in Somalia does not undergo genital mutilation. This alarming statistic compelled her to champion the cause and advocate for the rights and lives of Somali women (UNDP, 2012).

As for the practice of female genital mutilation in Egypt, it remains widespread despite continuous condemnation. Ninety-two percent of women and girls aged 15 to 49 have undergone some form of genital mutilation, with 72% of them having the procedure performed by doctors. Despite a positive shift in women's attitudes towards genital mutilation, there is still widespread support for its continuation in Egypt. Sixty-three percent of women aged 15 to 49 believe that the practice should continue, especially as, in some cases, the procedure is linked to religious beliefs and husbands' preference for circumcised women to prevent adultery. This is despite the issuance of a fatwa by the Grand Mufti Ali Gomaa condemning female genital mutilation and a statement by the Supreme Council for Islamic Research at Al-Azhar clarifying that female genital mutilation has no basis in the fundamental Islamic Sharia or any of its specific rulings, as stated in 2007 (Egypt-UNFPA, Oct 2023).

Egypt has attempted to address and eliminate the practice of female genital mutilation through awareness campaigns, education, and organizing informational campaigns to discuss the risks and effects of female genital mutilation on physical and mental health. Workshops and seminars have been organized to raise awareness about the need to stop this practice and encourage communities to reject it. Several legislations have been enacted to combat female genital mutilation. In June 2008, the Egyptian parliament criminalized female genital mutilation in the Penal Code, setting a minimum imprisonment term of three months and a maximum of two years, or an alternative penalty ranging from a minimum of 1000 Egyptian pounds to a maximum of 5000 Egyptian pounds. The new Child Law includes the establishment of child protection committees at various national levels with responsibilities to identify children at risk of neglect and abuse, including girls at risk of genital mutilation, and to support and monitor them.



In addition, the Egyptian Ministry of Health issued Ministerial Decision No. 271 in 2007, prohibiting all healthcare practitioners from performing female genital mutilation (FGM) in government or non-government hospitals/clinics. In September 2012, the Egyptian Union of Obstetricians and Gynecologists released a statement declaring that FGM is not a medical procedure and is not included in any medical curriculum. It is considered a practice that should be prohibited, and therefore, the law does not provide protection for doctors who engage in it.

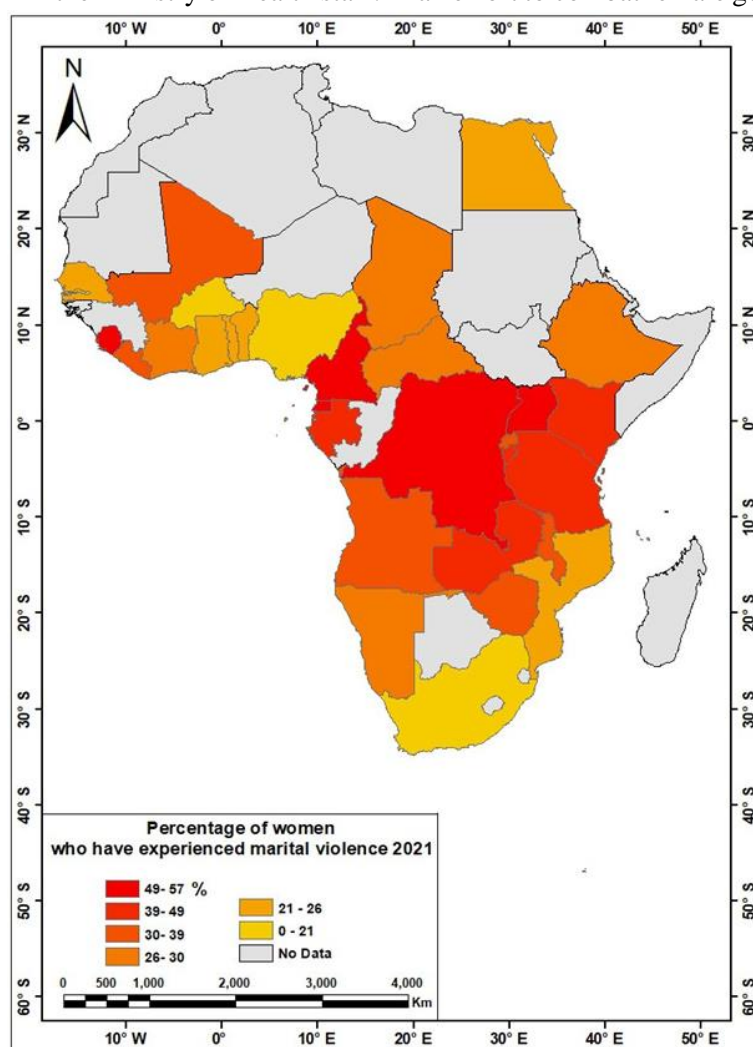
In the last five years, several campaigns and initiatives have been launched, such as the National Door-Knocking Campaign, to reach women, girls, and their families in rural areas through home visits for awareness and counseling on eliminating female genital mutilation (FGM). The Rural Leaders' Team participated in 26 governorates, reaching over 2 million beneficiaries in 2019. Additionally, the United Nations Population Fund (UNFPA) supported the National Council for Childhood and Motherhood to launch the "Dooe" initiative. "Dooe" means a voice with impact and resonance. This initiative aims to represent a community that supports girls in realizing their full potential. It focuses on activities like interactive community theater, intergenerational dialogues, digital platforms, and educational entertainment to facilitate changing social expectations in four governorates.

The United Nations Population Fund (UNFPA) supported the National Council for Childhood and Motherhood by training non-governmental organizations to address harmful practices in four governorates and enable the implementation of Dooe initiatives. The UNFPA also supported the National Council for Childhood and Motherhood to activate and disseminate the Dooe initiative among the Ministry of Health staff. In an effort to combat female genital mutilation (FGM) and early marriage

in provinces where they are prevalent, the UNFPA supported 31 community development associations to raise awareness and provide prevention and response services regarding FGM and early marriage in three governorates (Egypt-UNFPA, Oct 2023).

3.2 Domestic and Sexual Violence against African Women:

Toxic relationships always involve an imbalance of power and tenderness, where the toxic party in the emotional relationship uses threats, hurtful words, and behaviors to impose control and dominance over the other party. Intimate and non-intimate partner violence is a serious issue affecting many women worldwide, not just in Africa. According to a 2013 report from the World Health Organization (WHO), 35% of women globally experience intimate partner violence and sexual violence. Additionally, according to their 2021 report on 'Violence against Women,' more than a quarter of women aged 15-49 in sexual relationships experience physical or sexual violence from their partners at least once in their lives (from the age of 15). Estimates related to the prevalence of family



violence against women during their lifetime reached 33% in the WHO African Region. The same report highlighted that lockdown measures during the COVID-19 pandemic had social and economic impacts, leading to increased rates of women facing harm from their partners while simultaneously limiting their access to services (WHO. Oct 2023).

In the 2021 Human Development Report, rates of violence against women increased in some African countries, reaching the highest levels of exposure to violence. The rates reached 57% in Equatorial Guinea, as well as in a group of Central African countries ranging from 39% to 56%. In other countries, such as South Africa, the rates were lower, reaching 21% (Figure 2).

Here, it should be noted that this percentage may be much lower than the actual rate due to the unavailability of data in many countries. This does not imply its absence in those countries; on the contrary, for example, in a country like Somalia, it is implausible for it to have the highest rate of circumcised women and yet not experience domestic and sexual violence.

As for domestic and sexual violence against women in Egypt, statistics released in early 2021 by the Egyptian Central Agency for Public Mobilization and Statistics indicate that nearly eight million women and girls experience violence annually in Egypt. A significant portion of this violence falls under the category of domestic violence, while the remaining percentage falls within the realm of societal violence. There are no explicit and specific legal provisions against domestic violence in current laws, and the confidentiality of victims' data is not protected (News.UN. Nov 2023).

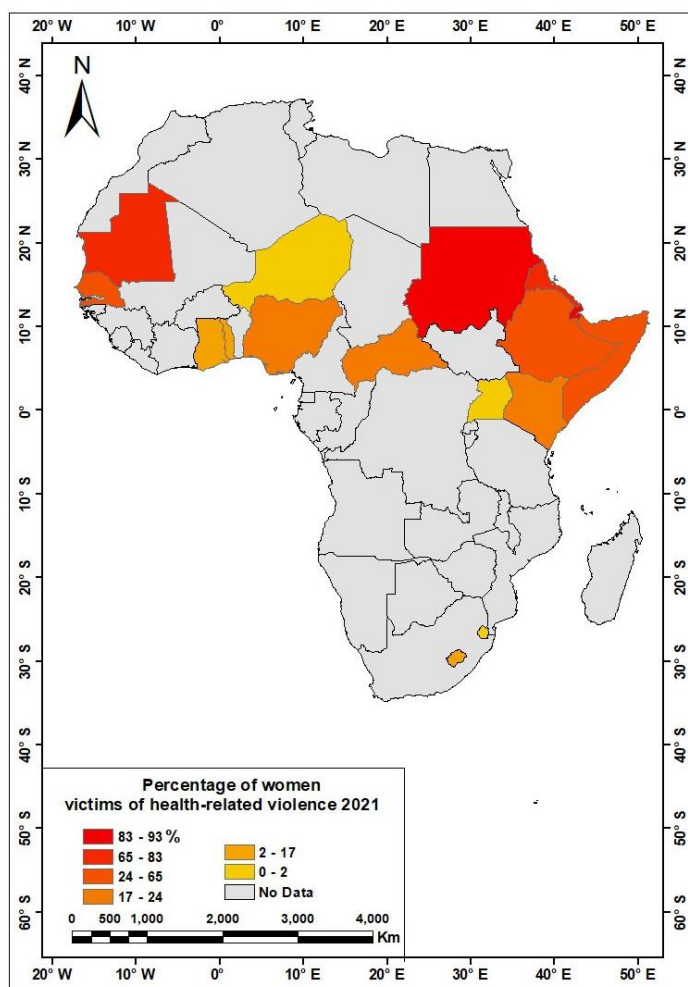
But on a global scale, there is increasing evidence of effective measures to prevent violence against women based on well-designed assessments. In 2019, the United Nations Entity for Gender Equality and the Empowerment of Women, with the support of 12 other UN agencies and bilateral agencies, published the framework titled 'RESPECT' – an acronym for the seven strategies to prevent violence against women directed at policymakers. Each letter of the word 'RESPECT' represents one of the following strategies: Relationship skills promotion; Empowerment and protection of women; Services provision; Poverty reduction leadership and ensuring a safe environment (schools, workplaces, public places); Protecting children and adolescents from harm; and Promoting positive concepts and beliefs.

We can attribute domestic violence in Africa to various causes, with one of the most prominent being the toxic masculine culture accustomed to controlling women, gender discrimination, and social values that restrain women's rights. Additionally, ignorance, poverty, and economic marginalization are significant contributors, as they collectively lead to increased rates of domestic violence, causing intense frustration and a sense of helplessness among men due to their inability to meet their families' needs.

No doubt, the repercussions of domestic and sexual violence are manifold, negatively impacting not only women but also children. Children growing up in families experiencing violence may suffer from various behavioral and emotional disorders. Moreover, exposure to violence during childhood could lead to the perpetration or acceptance of violence later in life. The consequences of familial and sexual violence may also extend to social and economic problems that affect the entire community. Women subjected to sexual and physical abuse face isolation, limited work capacity, income loss, restricted participation in regular activities, and diminished ability to care for themselves and their children.

3.3 The Health Consequences of Violence in its Various Forms on African Women:

Violence in its various forms (physical, sexual, and psychological) causes women to suffer from severe physical, psychological, sexual, and reproductive health issues in both the short and long terms. The percentage of women experiencing violence and suffering injuries has reached 42%. For example, sexual violence, whether by an intimate partner or a non-intimate partner, can result in unwanted pregnancies, intentional abortions, and women's health problems. According to a report on the prevalence rates of family and sexual violence and their health effects issued by the World Health Organization in 2013, violence during pregnancy is associated with an increased likelihood of spontaneous abortion, preterm birth, and low



birth weight. The same study found that women experiencing family violence are 16% more likely to have a spontaneous abortion and 41% more likely to have a preterm birth (WHO. NOV 2023).

In addition, there is the risk of sexually transmitted infections (STIs), including Human Immunodeficiency Virus (HIV). The study confirmed that women who have experienced physical or sexual violence are more likely to contract sexually transmitted infections such as syphilis and gonorrhea, as well as Human Immunodeficiency Virus (HIV) in certain regions, by 1.5 times more than women who have not experienced sexual violence. Moreover, they are twice as likely to experience miscarriages compared to others.

Here, it is essential to note that women who experience domestic or intimate partner violence, as well as those subjected to family violence, suffer from health and psychological issues. These include depression, anxiety, and other mental health disorders such as post-traumatic stress disorder (PTSD). They also endure difficulties in sleeping, disruptions in eating habits, suicide attempts, headaches, and pain syndromes (such as back pain, abdominal pain, and chronic pelvic pain), as well as

gastrointestinal disorders, limited mobility, and overall compromised health.

While preventing and addressing violence against women requires a multi-sectoral approach, the health sector plays a crucial role in this effort. It can undertake the following:

- Advocating for the rejection of violence against women and addressing it as a public health issue.
- Providing comprehensive and quality services focused on survivors of violence, raising awareness among healthcare providers, and training them to meet the needs of survivors in a compassionate and non-judgmental manner.
- Preventing the recurrence of violence by proactively identifying women and children affected by violence and providing appropriate care, referrals, and support services.
- Promoting gender equality standards as part of life skills and comprehensive sexual education for youth.
- Generating data on effective measures and the scale of the problem through population surveys, incorporating violence against women into population-based demographic and health surveys, as well as in monitoring and health information systems.

The member states of the World Health Assembly in May 2016 approved a global action plan to enhance the role of health systems in addressing interpersonal violence, particularly against women, girls, and children. The plan outlines various tasks, with a notable focus on establishing a database on the scale and nature of violence against women in different locations. It supports efforts by countries to document practices of this violence, estimate its rates and consequences, including improving methods for assessing violence against women in the context of monitoring Sustainable Development Goals. This is essential for

understanding the global scale and nature of the problem and taking necessary actions at both local and global levels.

In addition to enhancing the necessary research and capabilities to assess interventions aimed at preventing and addressing violence against women, principles and implementation tools are being developed to strengthen the health sector's response to family and sexual violence. This includes collaboration with partners in the United Nations system and other international organizations to reduce and eliminate violence globally through initiatives such as the Research Initiative on Sexual Violence, Together for Girls initiative, and the joint program of UN Women and WHO on enhancing the estimation, data collection, and utilization of data on violence against women.

3.4 Factors Contributing to the Continuity of Violence Against African Women:

Violence against women is a global issue that particularly affects African women, with several economic, social, and cultural factors contributing to the persistence of this destructive phenomenon. In this article, we will address some of these factors and shed light on how they impact the lives of women in Africa.

3.4.1 Economic Factors:

1. **Poverty:** Poverty is one of the key factors that increases the vulnerability of African women to violence. Women living in challenging economic conditions may find themselves in a precarious position with their partners, making them more susceptible to exploitation and domestic violence.
2. **Economic Inequality:** Women in Africa face significant challenges in accessing equal economic opportunities. This disparity in opportunities can lead to a lack of financial and economic independence for women, making them more prone to violence.

3.4.2 Social Factors:

1. **Social Discrimination:** African women face social discrimination based on their gender. This discrimination can lead to a lack of protection of their rights and reduce their chances of accessing justice when subjected to violence.
2. **Marriage and Family Traditions:** Marriage and family traditions in some African societies tend to discriminate against women and reinforce the power dynamics favoring men. This can make women vulnerable to violence by their spouses without sufficient legal protection.

3.4.3 Cultural Factors:

1. **Cultural Endorsement of Violence:** In some African societies, traditions and customs may encourage violence against women as a means of asserting control and demonstrating masculinity, such as physical abuse or humiliation in cases of disputes.
2. **Weak Laws and Legislation:** In some African countries, there is a lack of enforcement of laws protecting women's rights and punishing violence against them. This can lead to the persistence of violence without legal consequences.

To combat this serious phenomenon, African communities must work towards achieving economic and social gender equality. It is essential to raise awareness about women's rights and challenge cultural ideas and concepts that endorse violence against them. Additionally, governments should tighten laws and rigorously enforce them to combat violence against women and protect their rights.

It is also crucial to promote education and awareness of women's issues, encouraging women to speak out and report the violence they experience. These collaborative efforts can contribute to reducing instances of violence against African women and achieving more just and equal societies.

iv. Conclusion And Recommendations:

Despite Africa's persistent efforts for development and progress, numerous human challenges hinder these attempts. The ongoing issue of violence against women stands out as one of the prominent challenges. Gender equality remains elusive, and African women continue to face social, economic, and political disadvantages. Societal discrimination and male preference persist, preventing women and girls from achieving psychological, economic, and political success. Female genital mutilation (FGM) remains

widespread, with 125 million girls subjected to various, often brutal, forms of the practice. The cultural belief linking FGM to a girl's chastity persists, perpetuating violence and inequality.

Furthermore, economic, social, and cultural factors contribute to the persistence of violence. In countries like Equatorial Guinea, 57% of women still experience domestic violence, hindering the achievement of global development goals by 2030. This paper recommends several measures to mitigate different forms of violence against African women, aiming to eliminate these challenges for a better life and future for women, their children, and the continent as a whole. The recommendations include:

- Focus on African tribes, promoting their human development, encouraging integration, and fostering openness to the external world. Prioritize education and socio-economic empowerment to enable them to understand the harms of female genital mutilation (FGM) and violence.
- African governments should enact stringent legislation criminalizing all forms of violence against women, with swift and strict penalties for offenders. Governments should provide necessary support to judicial institutions and law enforcement to investigate crimes and prosecute perpetrators.
- Raise awareness of the importance of respecting women's rights and gender equality in schools, universities, media, and local communities. Challenge cultural beliefs such as marital rape, considering it unacceptable and punishable by law.
- Enhance access to legal services and legal counseling for affected women.
- Establish government-supported support centers providing health, psychological, and material support for survivors. Ensure they receive timely, affordable health services, including health promotion, treatment, rehabilitation, and non-violent, non-discriminatory support.
- Promote the role of men and encourage their active participation in combating violence against women. Enhance their understanding of gender equality and mutual respect through targeted awareness programs.
- Support government development projects and vocational training for women to empower them economically, improve employment opportunities, and enhance financial independence. Ensure women can make independent decisions without pressure or violence.
- Strengthen regional and international cooperation to work together, exchange experiences, and share best practices in combating violence against women.

This paper recommends the establishment of an international council at the continental level, namely the "International Council for African Women." It should administratively follow the African Union Commission, with its primary objective being to address all matters related to African women and provide support at all levels. The council should have the authority to conduct surveys and assessments in all African countries. This is for two main reasons: first, to monitor the conditions of women and girls and the challenges they face, and second, to ensure the monitoring of cases of violence and their numbers. This is crucial for eliminating violence and enabling the imposition of appropriate sanctions on countries that do not adhere to legislation and laws safeguarding women's rights.

Indeed, achieving gender equality and reducing violence against women requires a concerted effort from governments, international institutions, communities, and individuals alike. While these recommendations are proposed for Africa, they are applicable to any society to promote women's rights. This can be achieved by adapting and implementing them, taking into consideration the cultural and social contexts of local communities.

V. References

Frequently asked questions: Types of violence against women and girls. Accessed On (25/5/2023).

https://arabstates.unwomen.org/en/what-we-do/ending-violence-against-women/faqs/types-of-violence_arab

Guedes, A., Bott, S., Garcia-Moreno, C., & Colombini, M. (2016). *Bridging the gaps: A global review of intersections of violence against women and violence against children.* Global Health Action, 9(1), 31516. Available on: <https://doi.org/10.3402/gha.v9.31516>.

Jewkes, R., Sen, P., & Garcia-Moreno, C. (2002). Sexual Violence. In E. Krug, L. L. Dahlberg, J. A. Mercy, A. B. Zwi, & R. Lozano (Eds.), *World report on violence and health* (pp. 147-182). World Health Organization. Available on: https://www.who.int/violence_injury_prevention/violence/sexual_violence.pdf

- Odukogbe, A., Afolabi, B., Ect. (2017). *Female genital mutilation/cutting in Africa*. Transl Androl Urol., 6(2), 138–148. Available on: <https://doi.org/10.21037/tau.2016.12.01>
- Take Five: We must invest more in health and prevention of violence for adolescent girls in humanitarian settings*. Accessed On (7/6/2023). <https://africa.unwomen.org/en/stories/take-five/2022/08/take-five-we-must-invest-more-in-health-and-prevention-of-violence-for-adolescent-girls-in-humanitarian-settings>
- UNICEF. (2013). *Female Genital Mutilation/Cutting: A statistical overview and exploration of the dynamics of change*.
- United Nations Children's Fund (UNICEF) - *Female Genital Mutilation/Cutting*. Available on: <https://www.unicef.org/protection/female-genital-mutilation-cutting>
- Violence against women*. Accessed On (3/6/2023). <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>
- What is female genital mutilation?* Accessed On (29/5/2023). <https://www.unicef.org/stories/what-you-need-know-about-female-genital-mutilation>
- World Bank and United Nations. (2019). *Addressing the Drivers of Violence Against Women in Africa*. Available on: <https://openknowledge.worldbank.org/handle/10986/31545>.
- World Health Organization. (2020). *Female genital mutilation*. Available on: <https://www.who.int/news-room/fact-sheets/detail/female-genital-mutilation>
- World Health Organization. (2021). *Violence against women: Intimate partner and sexual violence against women*. Available on: <https://www.who.int/news-room/fact-sheets/detail/violence-against-women>.
- "A report by the World Health Organization highlights violence against women as a 'public health issue with epidemic dimensions'".* Accessed On (Oct 2023):<https://www.who.int/ar/news/item/11-08-1434-violence-against-women-a-global-health-problem-of-epidemic-proportions>
- "Efforts to issue a unified law to combat violence against women in Egypt"*. Accessed On (Nov 2023).: <https://news.un.org/ar/story/2023/11/1126357>
- "Violence against women"*. Accessed On (Oct 2023):<https://www.who.int/ar/news-room/fact-sheets/detail/violence-against-women>