This chapter explores the translations of sexology into Hebrew and Arabic during the 1920s and 1930s. It turns to translation to trace how ideas traveled from Europe, and especially German sexology, to the Middle East, before exploring how the new sexological knowledge was transmitted into popular culture and received by some of the women and men who turned to sexual advice columns to better understand their bodies and desires. While sexology is commonly understood as a scientific project that supports modern European nation formation, I argue that sexological debates also played a significant role in the shaping of ideas about both the individual body and the national body in Palestine and Egypt.

The chapter begins with a discussion of the medico-scientific context in Palestine and Egypt in the 1920s, before examining the writings of two medical doctors—Avraham Matmon in Palestine and Faraj Fakhri in Egypt—who were key figures in the scientific debates about sexuality in their respective societies. Both men authored books and articles on sexology, both studied—ten years apart—in Magnus Hirschfeld’s Institute for Sexual Science in Berlin, and both were self-professed sexologists. Their work not only demonstrates the contribution of sexology to the nation-building efforts in Egypt and Palestine, but it also indicates what was acceptable to say about sex in Tel Aviv and in Cairo during the 1920s and 1930s. The remaining part of the chapter explores in more detail the dissemination and reception of sexology in these two cities—and beyond—by examining the sexual advice columns that were published in health journals. These columns provide further
insights into the gendered reception of sexology in Egypt and Palestine, as they include the voices of women and men who turned to the scientific knowledge on sexuality, for instance to better control their desires or to lead more fulfilling marital lives. By examining the scientific and popular translations of sexology in this way, the chapter aims to gain a better understanding of the social history of sexuality in Egypt and Palestine. It reveals that both Jews and Arabs, in parallel trajectories, translated the new scientific ideas about sex into pedagogical practices that aimed to support national health and strength by transforming individual lives, adapting “European” sexology to form distinct discourses about sex, society, and the nation.

The Translation of Knowledge:
Sexology in Hebrew and Arabic

In comparable yet distinct ways, Jews and Arabs (as well as other colonized peoples) were constructed as the “others” of modern medicine whose norm was the (male) white body. Sander Gilman has shown how central anti-Semitism was to the European medical understanding of sexuality, where deviance, neurosis, and lack of self-control became markers of Jewish masculinity.1 Edward Said in turn has famously highlighted the significance of sensuality and uncontrollable sexuality in Orientalist constructions of the Muslim.2 Historians of colonial medicine have further demonstrated how those assumptions were translated into medical theorizing and practices, for example in North Africa.3 Building on this research, I add consideration of the translations of sexology into Hebrew and Arabic to show how Jewish and Arab medical doctors alike engaged with the European ideas about sex. I suggest that their translations of the European knowledge both refuted racist assumptions but also internalized them, as they urged a reform of the Jewish or Arab (male) body.

Modern debates about sexuality had first emerged in these communities in the later nineteenth century. Medical doctors educated mainly in Cairo and Beirut started publishing monographs on sex around the 1880s. Their writings were premised on the assumption that rationality could now answer questions that had previously been relegated to superstition and religion. These authors deliberated such controversial issues as the permissibility of masturbation, the intensity of the female orgasm, and the regulation of prostitution. The Yishuv (Jewish community in Palestine) in turn witnessed its own renaissance of sexual medical literature. Medical doctors who immigrated to Palestine from both Germany and Russia formed the core of its nascent medical profession and were also the ones who opened and operated sexual consultation centers in Tel Aviv.4
In the 1920s, Egyptian medical practitioners started reclaiming their professional status and identity against the domination of foreign doctors and demanded recognition in the local and international spheres. Unlike other colonial contexts, Egyptian modern medical education and practice had been well established prior to the British occupation. The professional struggles of the 1920s may thus be seen as a “re-Egyptianization” of the profession: establishing a medical association with its own bulletin, conducting scientific research, specializing in certain medical fields, and by the late 1920s, enhancing their professional status through legislation. The re-Egyptianization of education, practice, and research in the medical profession, as well as others, was seen as a national goal. Medical research conducted by local doctors on “Egyptian problems” (such as bilharzia, a parasitic infection endemic to the Nile valley, and parasitology in general) was seen as a sign of indigenous competence and intellectual success, further buttressing the legitimacy of the Egyptian medical profession.

Palestine did not have its own medical school until the establishment of the State of Israel. Jewish medical doctors were educated mostly in Europe, and to a lesser extent, in Cairo and Beirut’s medical schools. European schools were opened to Jewish students only in the late nineteenth century, and in spite of quota limitations, they came to be overrepresented in the medical profession, particularly in Central and Eastern Europe. From 1933, however, when Nazi persecution specifically targeted Jewish doctors, many of them lost their public jobs and left Germany in large numbers, often resettling in Palestine, but some of them also made their way to Egypt.

Jews had been immigrating to Egypt for decades, and the Egyptian Jewish community grew from seven thousand in the late nineteenth century to about seventy thousand by the 1930s, about 10 percent of them European Jews. However, despite the fact that Jews were generally well received in Egypt, and the general condemnation of their prosecution in Germany in the local press, the Egyptian government and the Egyptian Medical Association opposed the immigration of Jewish doctors, who constituted unwelcome competition so shortly after securing a monopoly over the profession. While some Jewish physicians did manage to restart their careers in Cairo (including Hirschfeld’s colleague at the Berlin Institute, Ludwig Levy-Lenz), the official position of the Egyptian Medical Association was to pressure their government to curtail the immigration of Jewish doctors. This meant that while the Egyptian medical community readily absorbed the sexological knowledge produced in Central Europe, it largely refused to accept the Jewish medical doctors who left Berlin from 1933 onward. Thus while the ideas of Jewish sexologists such as Hirschfeld were widely read and debated in Egypt, the people behind them were seen as a threat to the Egyptian medical profession and as such not welcomed.
The situation in Palestine was almost the exact opposite. Here Jewish immigrant doctors were part of the national project from the outset. Not necessarily Zionist, they fled to Palestine from a homeland that had rejected them, to become part of the growing Yishuv. This led to an oversupply of doctors. Some of them found employment among Palestine’s Arabs, while others remained unemployed or underemployed. In contrast to Egypt, the ideas were welcomed but not the people; Jewish doctors were more than welcome as individuals in Palestine, but their radical ideas were rejected. While sexological knowledge thus played a more affirmative role in modern Egyptian nation-building, it was deemed as too threatening in Palestine, especially for the emerging vision of Zionist masculinity and pro-natalism.³

Matmon and Fakhri: Norms and Innovation

The careers of two medical doctors—one based in Palestine, the other in Egypt—illustrate the different issues at stake in establishing sexology in these two countries. Avraham Matmon and Faraj Fakhri both returned from Berlin to the Middle East after studying sexology in Berlin, with the purpose of bringing the knowledge they had acquired to their respective societies: Fakhri returned to Cairo in 1921 and Matmon to Tel Aviv eleven years later. Matmon founded the Institute of Sexual Science in Tel Aviv, where he offered weekly lectures and consultation hours. In 1932–1935, he also edited a monthly health journal that included a sexual advice column. A book he authored on sexual life was published in eight editions from the late 1930s onward; in 1933 he also published a booklet on eugenics.⁴ Fakhri in turn authored several monographs on female sexuality, prostitution, venereal diseases, and sexual deviance. Upon returning from Berlin he gave public talks on sexology at the American University in Cairo, and these were published in the Egyptian Medical Association’s journal. Unlike Matmon, he did not edit his own journal, but he did contribute regularly to the popular Cairo monthly al-Riyada al-Badaniyya (literally, bodily culture; henceforth, RB), which also featured an advice column. His plan to establish a sexual science institute in Cairo never materialized.⁵ While the particulars of their careers may differ, their contributions to the development of sexology in Egypt and Palestine via sexual advice columns, journals, and clinical practice clearly followed what both men had learned in Berlin.

The writings and the career paths of Matmon and Fakhri reflect the large variety and scope of contemporary sexology in the Middle East. Reflecting a general medical skepticism toward sexology, both doctors were marginal figures in their respective scientific communities. Fakhri’s lectures were not welcome outside the American University, and in his books he complained about being misunderstood, in spite of his potential contribution to
Egyptian public life. In 1931 he was charged (and subsequently acquitted) for a lecture he had held on the need to reform the personal status law. Of Matmon’s institute we know very little outside the accounts he gives in his own journal, which is one indication of its relative marginality. Another indication is Matmon’s regular letters to the Tel Aviv Municipality, asking for a tax reduction because of the deteriorating state of one of its rooms, which he evidently could not afford to renovate.

While both Matmon and Fakhri saw sexology as a pedagogical project, the aims and conclusions of their work differed in many respects. To Matmon, sexual science should serve the formation of a normative family and a better nation, composed of fit individuals and lasting marital unions. Assisting the heterosexual couple and preventing marital problems were central to his project. Furthermore, his fields of interest included eugenics, which he considered key to promoting the Jewish race. Fakhri, on the other hand, saw science as a new arbiter on social and moral questions, which had the potential of destabilizing, rather than reaffirming, existing social norms. On many issues, though not all, he maintained that what used to be seen as the truth could now be put into question. The difference between the two doctors reflects tensions within the German sexual reform movement and the challenges it was facing. It may also be related to the timing of their studies. Fakhri arrived in Berlin shortly after Hirschfeld’s institute had been founded in 1919, at the height of a brief moment of freedom in the Weimar Republic. Matmon, in contrast, left Berlin around the same time as Hirschfeld, at a time of increasing Nazi agitation. The Nazis would shut the institute down in May 1933.

Matmon had a keen interest in communicating sexological ideas to a wider public. He held a series of lectures on anatomy, physiology, hygiene, sexual development, and pathology, attended by dozens of men and women. Both of his books were based on lectures held in his Tel Aviv institute and were later published in his journal. Furthermore, he offered two weekly consultation hours for men, and a colleague of his offered weekly consultation hours for women. The institute also issued health certificates for couples intending to get married. Every couple, he believed, should consult a doctor before marriage, to make sure they did not harbor an ailment that could be passed on to the spouse and to future offspring. Importantly, his definition of ailments also included social ills such as prostitution, alcoholism, and homosexuality. Matmon reminded his readers that such consultation could prevent the birth of individuals who would burden their families and the public. “Protect your future and the future of the nation!” was his motto. Matmon saw eugenics as a progressive idea, promising to eliminate so-called undesirable elements from the nation. He preached against what he saw as ignorance that threatened the reproductive couple, the basic unit of the
nation: “Any disorder leads, even unwittingly, to a deep fracture in family life, one that will never heal, and only deepens as long as the disorder lasts. How many families were destroyed, and how many divorces could have been prevented had people known that they had to seek advice on sexual matters at the right time.”

Fakhri’s main agenda was different, but like Matmon he was interested in developing sexology in his own country. His lectures at the American University dealt with questions he would later develop in his books, such as the male and female orgasm, sadism, premature ejaculation, and the physiology of erection. Fakhri concludes a March 1925 article by stating that he would like to establish a sexology school in Egypt, “as a service to our profession and our patients.”

Fakhri clearly situates his own writing as more advanced than that of earlier generations, particularly among the Arabs, whose writing on sexuality “we now might find embarrassing.” In a 1923 lecture to the Egyptian Medical Association, later published in their journal, Fakhri reproached his hosts for censoring its title: “The Physiology of Reproduction” instead of “The Physiology of Orgasm”: “Your association, may God forgive it . . . succumbed to the usual embarrassment when one speaks of anything directly or indirectly related to reproduction.” For this reason, he continued, the science of sexology remained buried under the feet of reactionary forces for centuries. Elsewhere in the civilized world, and particularly in Germany, he insisted, reproduction was a serious science, with its own research, associations, and journals, studied without the slightest embarrassment, but with courage and zeal aiming to unveil its mysteries.

Here Fakhri presented his project as an effort to promote free speech in a field dominated by silence and euphemism. To him, talking about sex was not only medically important; it also distinguished the civilized from the less civilized nations.

In contrast to Matmon, Fakhri wrote extensively about non-normative sexual practices and marginalized individuals and practices. In Paris, he visited brothels specializing in sadomasochistic services. He knew little about the prevalence of such practices in Egypt, he explained, but maintained that these would correlate with “the spread of modern civilization,” for better or worse. In line with conventional ideas about active masculinity and passive femininity, he argued that sadism was more “natural” for men and masochism for women. Yet he also pointed out that these “natural” dispositions were subject to social influence. For instance, he argued that sadism could erupt as a result of “a sudden transition of the ignorant to a great fortune or a much higher social position,” such as from a servant to the master’s wife.

Given Fakhri’s concern with societal influences on sexual behavior, his discussion about homosexuality stands out for its assertion that homosexuality is a universal phenomenon and that it constitutes a “defect” or an “illness”
rather than a “crime,” which is why consensual homosexual acts should not be criminalized.\textsuperscript{24} These ideas are clearly influenced by Hirschfeld. However, Fakhri adapts Hirschfeld’s views by contextualizing them in relation to homosexuality in Arab and Islamic society. Arguing that homosexuality has existed throughout history, including Pharaonic and Islamic times, he points out that texts ranging from the medieval poetry of Abu Nawwas and Ibn al-Farid to Arabic belles lettres (\textit{adab}) and the \textit{Arabian Nights} are all evidence of the historic existence of homosexuality and the availability of knowledge about it to every Arabic reader. Like Hirschfeld, then, Fakhri claims that homosexuality is present in all cultures, but in contrast to Hirschfeld, who looks across cultures to stake his claims, Fakhri turns to evidence from his own cultural—and national—context.

In summary, then, the sexologies of Matmon and Fakhri indicate a shared commitment to advancing sexual knowledge, which they nevertheless interpreted very differently. To Fakhri, sexology meant studying the wide range of human sexuality, and breaking taboos was a sign of progress as science enabled him to diagnose the pitfalls of Egypt’s encounter with modernity. To Matmon, it meant specifically improving the welfare and sexual lives of married couples, as basic units of the nation. Their respective foci on non-normative sexualities versus marriage may help to explain their distinct reception in their own countries: while Fakhri in many ways remained a lone voice in the Egyptian scientific and reform communities, Matmon’s concern with heterosexuality fit in well with the project of nation-building in Palestine.

**Gendered Nation-Building and the Emergence of Sexual Advice Columns**

While historians of sexology and sexual knowledge tend to focus on producers and translators of such knowledge—medical doctors and to lesser extent, novelists and public intellectuals—I am concerned also with how the sexological ideas were received by “lay” women and men. Advice columns published in both Arabic and Hebrew newspapers in the early 1930s offer insights into the way sexology entered popular discourse and how debates about “sex” and nation were gendered. This line of investigation follows Paul Ryan’s work on Irish advice columns, which has examined how Irish men (and to lesser extent, women) learned from such popular columns new ways to communicate their problems and pains and readjust their sexual and emotional lives to the cultural transformations of the middle decades of the twentieth century. In a culture in which sexual ignorance was seen as a norm, or even a virtue, advice columns were legitimate venues for sexual
Taking Ryan’s work as a model, I situate the advice columns within the historical contexts that produced them—the migration of medical knowledge in the 1930s; the Egyptian and Zionist national projects; and finally, the medical profession and the transformation it underwent, in both locales, in the interwar period. I argue that these advice columns not only reflect historical change and the specific cultural circumstance of Egypt and Palestine, but they also allow glimpses at the ways in which the “expert” sexological knowledges became popularized.

In Palestine, Matmon published a journal titled *HaBr’iut* between 1932 and 1935, which featured original and translated medical articles, as well as Matmon’s own lectures. Around the same time, in 1928, three Egyptians—Muhammad Fa’iq al-Jawahiri and his two brothers, Mukhtar and Ra’uf—opened a physical education center in Cairo. *RB* began appearing the following year and remained in publication until the early 1950s. The journal’s editor, Muhammad al-Jawahiri, claimed that his mission was to educate the public about “sex, love, and physical beauty.” Both *HaBr’iut* and *RB* featured an advice column, which ended up being dedicated mostly to sexual questions. Both journals advocated sexual education for youth and condemned their ignorance and especially the role played by laypersons in educating youth about sexuality. Both promised their readers an individualized answer if they enclosed a stamped envelope to their letters.

*RB* has been analyzed in depth by Wilson Jacob in his influential work on masculinity in early twentieth-century Egypt. Arguing that the journal self-consciously mimicked the terms, loci, and visions of the European social order, Jacob demonstrates how readers, particularly men, wrote to *RB* and expressed their gratitude after it had helped them return to the straight and narrow, for example, to stop frequenting prostitutes. Wilson sees *RB* as an artifact of colonial modernity: a style of performing gender that emerged in other parts of the world as well since the second half of the nineteenth century. Since these new discourses were presented specifically in terms of national modernity, they constantly confronted the Egyptian premodern self and contributed to the formation of bourgeois subject. In the process, *RB* normalized heterosexuality as a key to Egyptian modernity, criticizing “deviation” as the result of a lack of masculine self-control, namely excessive sexual energy, directed either at oneself or at prostitutes.

Similarly, *HaBr’iut* can be situated within the context of the emergence of modern nationhood, here specifically in relation to Zionist constructions of masculinity. Sex and the body were part of the Zionist project, which both rejected and adopted contemporary scientific ideas, but related notions about respectability and manliness also became a vital part of many other nineteenth-century national movements. Whereas in contemporary European medical discourses the Jewish male was constructed as effemi-
nate and degenerate, the “other” of modern masculinity, Jewish thinkers sought to counteract this stereotype by creating a new “muscle Jew” devoted to physical exercise and self-restraint, a Jew who would liberate diasporic Jews not only from tradition but also from the confines of the diasporic body. Immigration to Palestine and renewed connection to the land were to free the Jewish body from the degenerating effects of diasporic urban life.28

The emerging advice columns thus indicate some of the gendered assumptions that underpinned ideas about sex and the national body in both Egypt and Palestine, and they also make clear the complex processes by which sexual discourses in these countries adopted and adapted colonial ideas and negative cultural stereotypes.

Supporting Marriage

Providing marital sexual advice became increasingly important to European sexology in the early twentieth century. It was central to the work of Hirschfeld’s Berlin Institute, and marriage columns also flourished from the mid-1930s onward in Britain, a country where the work of Marie Stopes would become hugely influential for transmission of sexual knowledge and in shaping attitudes toward sex and marriage.29 Similarly, marital sex played a crucial role in sexual advice columns in Egypt and Palestine.

The ideal of marriage began to change for the emerging Egyptian middle class in the early decades of the twentieth century. More couples (and particularly men) were choosing their marital partners and could get to know each other before marriage. The average age of marriage was rising, and the bourgeois press advocated love-based companionate monogamous marriage over the previous norm of arranged marriage, as well as over the relatively rare but religiously sanctioned polygamy. At the same time, the national press lamented a perceived marriage crisis, which was emblematic of a national one. Egyptian nationalists used images of homes, marriages, and domestic relations to demonstrate their preparedness for self-rule. The Egyptian elites linked monogamy with modernity, in response to the colonial emphasis on polygamy and domestic practices as indicative of Egypt’s degraded national culture. In this context, debates over women’s status in Egyptian society revolved around their education, seclusion, and veiling. Educated women could make better wives and thus secure more stable marital unions and also nurture better national subjects. Nevertheless, the ideal bride remained a sexually ignorant virgin, while no such requirement was made of men.30

The Zionist case was somewhat different but nevertheless also concerned with the transformation of women’s role within their families and communities. Young men and women emigrated to Palestine from highly patriarchal, gender-segregated, traditional Jewish societies, in which women were
supposed to enjoy no break between their role as daughters and their roles as wives and mothers; they immigrated to a new national project in which they were supposed to participate in the labor force and in nation-building. Immigration thus freed them from the confines of communal control but also deprived them of the support networks traditional Jewish communities could offer. Furthermore, in spite of the Yishuv’s purported egalitarian vision, women continued to perform the bulk of housework and childrearing in addition to their integration into the workforce. As in other national projects, their role as mothers took precedence, and choosing to refrain from motherhood was considered a betrayal of both their biological essence and their national role. At the same time, motherhood and housework were medicalized, in the sense that they were no longer seen as natural but rather as requiring expert guidance—and this was offered in both the national press and in childcare clinics across Palestine.  

Both RB and Matmon’s HaBr’iut emphasized men’s responsibility for their wives’ sexual pleasure and rebuked men who failed in this regard. One A. Sami from Cairo wrote to RB complaining that his sexual relations with his wife of seven years were no longer satisfactory. The editors’ reply laid the responsibility strictly on the husband’s shoulders and recognized women’s sexual subjectivity. It was his sexual incompetence, weakness of nervous system, and selfishness that probably accounted for his marital problems: “You care only for your own pleasure, without concerning yourself with hers.” Matmon similarly reprimanded a man for being oblivious to his wife’s sexual experience with him. He advised L.S. of Petakh Tikva about his wife’s “frigidity” and explained that it could be ascribed to an internal resistance to the act, which might stem from either fear of sex or fear of pregnancy. “Now, after she agrees, after persistent seduction, or because she felt she must obey her husband’s demands, she sees it as rape on her husband’s part. Her reaction is thus indifference and incompliance to sexual life she does not fancy.”

In a long article, Mukhtar al-Jawahiri explains that men should be better informed on the nuptial night. Brides, he explained, are normally virgins, undress for the first time in the presence of a stranger, have no idea what to expect, and often find their first sexual experience traumatic, painful, and degrading. Men, in contrast, often do have former sexual experience, normally with prostitutes, and thus treat their bride like one. This why for al-Jawahiri premarital education is important, because it would teach men that women also have sexual desires, and this knowledge would help prevent marital problems, which currently begin with this first sexual encounter. While women’s own experiences were not heard in such discussions, but rather dubbed by experts such as al-Jawahiri, women’s sexual pleasure was nevertheless now taken into account.
Contraception and abortion were part of the new marriage discourses. In contrast to Matmon and Fakhri, who were inspired by Central European sexology, Jawahiri, RB’s chief editor, was clearly inspired by Stopes. He published translations of her articles about contraception and female sexual pleasure, and some of the journal’s original articles also touched these topics. Responding to criticism, moreover, RB’s editors explained that they did not, by any means, encourage premarital sex or childlessness. Instead, they encouraged an ideal average of three or four children per family to afford a better quality of life for all family members. They argued that contraception was legitimate for newlyweds who needed an adjustment period, or in cases of inherent defects in the family of one of the spouses or in their older children. Not every form of contraception was recommended, however. A certain H. Kasim was told, for example, that coitus interruptus was not an effective contraceptive, but it was harmful to the nervous system, particularly of the wife, who would not be sexually satisfied as a result of the practice. It should be noted that RB’s attitude toward abortion was not as positive, as it restricted permissible abortions to life-threatening situations. To one A.Z. Sh. from Khartoum the editors replied that abortion was absolutely illegal, unless performed by a medical doctor and only if absolutely necessary to save the woman’s life. Abortions performed by midwives were dangerous and might cause sterility or even death. Midwives had neither training nor sterile equipment and thus could cause potentially fatal internal bleeding. A man who considered aborting a fetus conceived before he and his wife realized they were inflicted by syphilis was reprimanded and strongly advised not to do so.

Rather similarly, Matmon’s responses to questions on contraception and nonreproductive sex were both medical and moral. He noted the effectiveness of certain contraceptives but at the same time warned his readers that marital abstinence could be harmful to the nervous system and that marital happiness, eventually, lay in reproduction. He advised readers to refrain from coitus interruptus because of its adverse effects on the female nervous system and claimed that mutual manual stimulation was but a form of masturbation and as such should also be avoided. Condoms were preferable to other forms of contraception, but not as license for nonmarital or even commercial sex. Even within marriage, however, “the culmination of happiness can be reached if all contraceptives are abandoned with the purpose of having children.” Matmon was rather ambivalent about abortions. To one Lina S. he wrote that abortion in the fifth month of pregnancy could be dangerous to the woman. This was followed, however, by nonmedical advice to use rabbinical or civil courts to force the child’s father to marry her, at least until birth, after which she was advised to divorce him, since this was not the kind of man one would want to spend her life with. “There is no
shame here,” he concluded, “since motherhood is an honor to a woman, not disgrace.” It was not her who should be ashamed, but rather the man and his like “who become abundant in our country, to our great dismay, who tarnish women’s name and honor.” To one Rachel Naiman, he wrote that he did not consider abortion a socialist question but a medical one. Permitting abortion would liberate neither the worker nor the proletariat. Abortion should be overseen by a committee of medical doctors who would take both medical and socioeconomic factors into account.

The fact that medical doctors in Cairo and Tel Aviv were asked similar questions and reached similar conclusions indicates a generational shift in attitudes toward sex. The marital ideal was changing in both places, to a companionate marriage in the Egyptian case and to an egalitarian one in the case of the Yishuv. Women’s role in society was also changing, as their education and integration in public life increased including via the opening of new roles as wage earners. In this context the marital bed, as much as the baby’s crib and housework in general, were undergoing medicalization—and men and women were told that they needed expert advice to engage in lasting and fulfilling marital life. As young couples were readjusting to new marital realities—more couples were choosing their marital partners and marrying later in life, and control of the family and community was less strict than in their parents’ time—they appreciated the advice columns for offering insights into a reality their parents could not comprehend.

Self-Control, Masturbation, and the (National) Economy of Sperm

If the Arabic and Hebrew advice columns thus encouraged both men and women to commit to lasting marital unions, then the related discourses about health and self-discipline nevertheless tended to focus specifically on male sexuality. The most common questions in HaBr’iut concerned masturbation and the related issues of morning erections, spontaneous ejaculation, and nocturnal emission. This pattern was consistent with late-turn-of-the-century European advice columns, which shifted from outright condemnation of masturbation to presenting it as a habit to be overcome, as evidence of manliness and self-restraint. For instance, Matmon advised one reader to urinate upon waking up and reassured him that the phenomenon he described was normal and would be resolved upon marriage. To another reader, Matmon advised physical exercise, bathing in the sea twice a day, taking a shower before bedtime, and covering himself with a light blanket at night. He advised a reader who appeared obsessed with sexual thoughts to concentrate on his work and prescribed Émile Coué’s method of autosug-
gestion. To another reader concerned with masturbation, he explained that although his habit was not harmful in itself, it should be avoided, for reasons of courtesy and decorum, because of its negative mental impact, and since “in a few years you will no longer be able to conceal it from society.” This habit should be combated soon, “as long as you are young and full of life,” since later he would not have the power to prevent it from occupying “a significant place in your life and your being.”

In a similar vein, one article in RB argued that masturbation was harmful to the nervous system because it caused excessive agitation and could result in degeneration of the nervous system and subsequently insanity. In response, a certain M.N. from Cairo wrote to the journal and cited a medical doctor and a mufti, both of whom claimed that masturbation was permissible especially for single men and was preferable to nonmarital sex. The editors replied that the opinions cited were minority views, and that complete abstinence, rather than masturbation, was the solution for single men. This indicates the conflicting kinds of authorities men turned to for advice, even as it suggests that on the topic of masturbation RB was more conservative than some other parts of the medical profession and religion. RB seemed to draw a somewhat curious distinction between masturbation—on which they frowned—and sexual dreams, which they thought permissible. To one Amil S. from Alexandria, RB replied that nocturnal emissions were nothing to worry about and no impediment to marriage, but that they were natural for men leading a healthy life and avoiding “unnatural” sexual relations.

In other words, then, RB treated sexual dreams and acts differently.

But this disciplining of individual bodies was not merely the concern of a “civilizing” elite of medical doctors. In both Cairo and Tel Aviv, men wrote to the press in order to find out how to control their urges and secretions. The privileged status of medicine in regimenting individual and national life was clearly internalized by these individuals. Indeed, echoing the European medical discourse that marked both the Jew and the Arab as lacking in self-restraint, emerging medical advice columns in Palestine and Egypt urged young men to practice self-restraint and better control their bodies. The debates about marriage suggest, then, that the sexual advice columns were not entirely radical in the advice they gave, as they maintain some older anti-sex attitudes even as they also helped to educate people about sex and free them from some negative sexual norms.

(Un)Speakable Homosexuality

While homosexuality was a central concern of European sexology, it featured only rarely in the Hebrew and Arabic advice columns. When homosexuality was mentioned, the advice given tended to be negative, arguing that homo-
sexual attraction should be either ignored or overcome. Nevertheless, the very existence of a homosexual discourse in these journals is significant because homosexuality generally was rarely mentioned in contemporary Arabic and Hebrew writing, and female homosexuality was an even rarer topic to enter public discourse. Against this negative representation, Fakhri’s writings acknowledged, legitimized, and historicized male homosexuality—even as his discussion of female homosexuality was much more implicit. For instance, on one occasion a girl wrote to RB explaining that she was in love with a female school friend of hers. “I studied in a foreign school,” she explains,

and . . . she studied there with me. We slept together, studied together, we shared our study room . . . I could not bear being apart from her. She still visits me every day. She recently told me that she is distressed because her family had her engaged to a man. I cried, and she cried with me. I realize I love her, and the jealousy, that thought of her getting married, is nearly killing me. I read about sexual problems, and I don’t think that this is a perverse desire. I am very distressed and need advice. 

RB’s response to the letter was discouraging. Yet its very publication publicized the existence of love and desire between women, which otherwise tended to remain unspoken in public.

HaBr’iut does not contain similar testimonies by women. A reply by Matmon to Ita B. nevertheless indicates that female same-sex sexuality played a role: “Your case is very interesting, though not very rare at all,” he writes, diagnosing her “sexual complex” as a probable internal secretion problem. The “proof,” he explains, is that “alongside your ‘disgust’ with sexual relations with a man, you also long to be a mother. You might be suffering from a homosexual problem, which requires rectification.” He advises her to contact a sexologist, since “based on experience, such phenomena can be set to rights.” Curiously, this discussion also anticipates much later debates about lesbian parenting. She asks him about the possibility of artificial insemination, to which he replies that the success rate of such a procedure is merely 1 percent.

In both cases, then, a woman’s desire for another woman is presented as something to be abandoned or even corrected. However, it is significant that both cases testify to the existence of female same-sex desire even if they try to suppress or pathologize it. Ryan argues that in the Irish case, publishing letters by homosexual readers gave voice to men and women whose lives were understood only in language of pathologies; their readers thus learned that they were not alone. While such evidence in both the Arabic
and Hebrew cases is scarce, it nevertheless suggests that the advice columns
gave voice and public presence to homosexual desires, making it part of the
national discourses about sex that circulated at the time.

**Conclusion: National Sexologies**

By tracing how European scientific sexology was translated and incorpo-
rated into local professional communities in both Cairo and Tel Aviv, this
chapter has shown that sexual discourse was used to serve the national
cause in both Egypt and Palestine. Both the Egyptian and the Zionist sexual
advice projects were designed to resolve the perceived crisis of the family.
Emerging medical discourses in both national contexts furthermore told
ten their bodies were deficient because they did not know how to control
themselves—thus responding to and adopting European medical discourses,
which portrayed the Jewish or Arab body as lacking self-control and thus
unworthy of integration or national independence. At the same time, these
columns also sought to instruct men how to be better husbands, better att-
tuned to the sexual needs of their wives. As the Jewish traditional family was
dislocated with the immigration to Palestine, and as monogamous marriage
were advocated in both societies as the hallmark of national modernity, men
were to be taught how to cope with the new woman—now a companion, or
a partner to the national project.

Comparing Fakhri and Matmon makes the Egyptian sexology project
seem more liberal than the Zionist one. However, close attention to their
sexological translations and the public debates about sex at the time reveals
that both Hebrew and Arabic sexual discourses operated within and against
a scientific discourse that saw Jewish and Arab sexuality as perverse and was
designed to correct and discipline Jewish and Arab bodies to strengthen the
nation. While Matmon and Fakhri promoted rather different sexologies—
the Jewish doctor totally ignored the more radical, destabilizing aspects of
German sexology, while his Egyptian contemporary made them his main
concern—the sexual advice columns show that sexology in both Tel Aviv
and Cairo was part of a strictly normalizing discourse about sex and gender.
Attention to the specific translations of European sexology indicates that
certain negative aspects were adopted—such as the assumption that medical
knowledge could engineer individual and national lives—while other, more
progressive aspects, such as the strong support of many European sexolo-
gists for homosexuality, were left out. These transformations mark the spe-
cific contours that define how European sexological discourses were adapted
to open up new discursive spaces in both Egypt and Palestine, where they
shaped new national discourses about sex, gender, and the body.
NOTES

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10. Avraham Matmon, Hayey HaMin shel HaAdam [Human sex life] (Tel Aviv: Hamakhon le-Higyena U-Madei Hamin, 1939); Avraham Matmon, Hashbakhat HaGeza
13. Tel Aviv Municipality Archives, 9 Hertzl Street file.
14. “MiYediot HaMakhon LeHigyena UMadei HaMin BeTel Aviv” [Some news from the Institute for Hygiene and Sexual Sciences in Tel Aviv], *HaBr’iut* 1, no. 4 (1932): 8.
17. A., “Al Tahanat ha-Hitya’atsut be-She’elot Haye ha-Min ve-ha-Nisu’in she-al Yad ha-Makhon le-Higyenah u-Made ha-Min be-Tel Aviv” [On the consultation station for sexual and marital life at the Institute for Hygiene and Sexual Sciences in Tel Aviv], *HaBr’iut* 1, no. 1 (September 1, 1932).
21. Ibid.
22. Ibid., 95–123.
23. Ibid., 104.
27. Ibid., 156–185.


37. “Istisharat Sihiyya” [Health advice], RB 10, no. 279 (June 1938): 587; see also an article about abortions, Dr. Mustafa al-Qalali, “Al-Ijhad” [Abortion], RB 11, no. 338 (August 1939).


40. Q&A, HaBr’iut 1, no. 6 (October 27, 1932): 52.


42. Q&A, HaBr’iut 1, no. 22 (July 18, 1933): 186.

43. Q&A, HaBr’iut 2, no. 8 (June 17, 1934): 74.

44. Q&A, HaBr’iut 3, no. 3 (November 21, 1934): 32.


46. Q&A, HaBr’iut 1, no. 18 (June 1, 1933): 151.

47. Q&A, HaBr’iut 1, no. 2–3 (September 1, 1932): 8.

48. Q&A, HaBr’iut 1, no. 5 (October 1, 1932): 42.


51. RB 7 no. 139 (November 1935): 1269–1271.

52. “Madha ta’malu fi Hadhihi al-Hala” [What would you do in such a situation], RB 8, no. 158 (February 1936): 210–212.


54. Ryan, Asking Angela Macnamara, 165.