

معهد شؤون الخليج

Institute for Gulf Affairs

Killing Them Softly

How Saudi Ban on Women's Sports is Harming Their Health

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Killing Them Softly?

Women in Saudi Arabia are being killed softly by their government. Not by public executions or brutal rapes and beatings, but by day-to-day restrictions imposed on them by their government. Decades ago, the Salafi/Wahhabi religious theology fully embraced by the Saudi government instituted a host of limitations for women that are not always in plain sight nor easily understood.

The treatment of women in Saudi Arabia has been a subject of many scholarly and media reports. However, those tend to focus on the most obvious restrictions, such as the ban on women driving or restrictions on educational and employment opportunities without approval of their families. Yet there is another, more insidious hazard affecting the lives of women in the kingdom that isn't often discussed. This hazard poses a very tangible threat to the health and wellness of Saudi women, and it is an almost completely sedentary lifestyle forced on women by the government through a de facto ban on physical education and sports participation for women that stems from the Wahhabi imperative of "keeping women unseen".

Saudi Arabian government bans physical education for girls in all government schools. There are no women clubs, athletics federations, sport teams or tournaments, and any organized women sporting events of any kind. Saudi Arabia remains the only Gulf Cooperation Council country that does not have women sports. GCC countries such as Kuwait, Qatar, Oman, Bahrain and the United Arab Emirates have women teams and participate in the annual Gulf Women Cup. Saudi Arabia is alone in not attending the cup. Young girls and women are thus denied the right to lead an active lifestyle that is so crucial to physical development and overall health in young adults. Women are also banned from forming or participating in sports teams. And while gyms and other health facilities are not explicitly banned, the government keeps refusing to issue licenses to women facilities. This report focuses on the perilous health consequences of this forced physical inactivity that has led to a host of illnesses threatening the health of the nation.

Health Hazards Triggered by Physical Inactivity

Obesity

The decade-old official ban on physical education in schools, private women's gyms as well as sports participation of any kind for women has led to a massive health decline in the Saudi female population. The official ban on sport and physical education have caused the death of thousands of women and permanently damaged the health of countless others, making it possibly the number one killer of women in Saudi Arabia.

As King Saud University reports, one in three Saudis are obese - a truly staggering statistic. The university also reports that: "...based on the National Nutrition Survey of 2007, the prevalence of obesity in the kingdom was 23.6% in women and 14% in men." The same study

reported that 28.4% of women in KSA are overweight. Similarly, the Coronary Artery Disease in Saudis Study (CADISS) of 2005 estimated the overall obesity prevalence in the Kingdom is 35.5%. In other words, one in every three people in the country is obese"¹.

The studies cited above were conducted nine years ago, making the recent state of the country difficult to know. The Saudi government, however, refuses to allow the UN or World Health Organization to research and investigate women's health vis-a-vis their treatment in society. Statistics on women health in Saudi Arabia are extremely limited and inaccurate. The King Saud University report blames the increased intake of Western foods and lifestyle for the bulging population and attributes the obesity in women to lower muscle mass and inability to burn as many calories as men while at rest. The report, however, does not explain that bans on exercise in public or private facilities and non-existent physical education classes contribute heavily to obesity in women and girls.

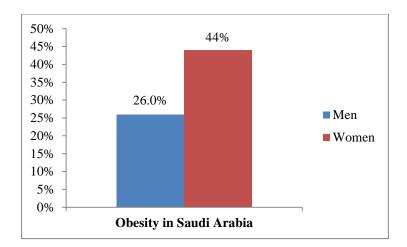
In the meantime, a study conducted by the Eastern Mediterranean Health Journal found further proof of the health risks and dangers imposed on Saudi women. The Journal compares equivalent studies conducted in Sweden, drawing a comparison of the severity of health conditions in Saudi Arabia to a European state like Sweden²:

"There is no sports education in girls' school and it is prohibited by social norms for females to practice physical activities in public. Lack of exercise is a known cause of obesity. It is not surprising, therefore, that the prevalence of obesity (body mass index > 30 kg/m2) for 30–70-year-old Saudi females was 44.0% compared with only 26.4% in males [18]. In comparison the prevalence of obesity for 25–64-year-old Swedes was 11.0% for females and 14.8% for males.³

¹ Al-Othaimeen, Al, M. Al Nozha, and AK Osman. "Result Filters." *National Center for Biotechnology Information*. U.S. National Library of Medicine, Mar.-Apr. 2007. Web. 26 Aug. 2014.

² Mobaraki, A.E.H, and B. Söderfeldt. "Gender Inequity in Saudi Arabia and Its Role in Public Health." *Eastern Mediterranean Health Journal* 16.1 (2010): 113-17. Eastern Mediterranean Health Journal, 2010. Web. 26 Aug. 2014.

³ Mobaraki, A.E.H, and B. Söderfeldt. "Gender Inequity in Saudi Arabia and Its Role in Public Health." *Eastern Mediterranean Health Journal* 16.1 (2010): 113-17. Eastern Mediterranean Health Journal, 2010. Web. 26 Aug. 2014.



This study, along with numerous others, has shown that women in KSA have higher rates of obesity, diabetes and other chronic diseases than men. The Ministry of Health's website as well as the King Saud University reports, though, lack transparency when it comes to providing statistics on women's health as well as coming up with an honest explanation for this phenomenon⁴.

A study conducted by International Journal of Health Sciences with Qassim University reported that 83% of physicians in Saudi Arabia viewed obesity as a negative concept, and were willing to teach their patients about the disease and give appropriate medical advice and recommendations⁵. In the study, a specific number of physicians were given a questionnaire to assess their knowledge of the disease and of those questioned only 35.4% were native Saudis that may or may not have Wahhabi or Salafi beliefs⁶. Such beliefs would possibly influence whether or not they recognize that forced sedentary lifestyle contributes to the illness.

A more recent study was conducted by the Ministry of Health in conjunction with the Institute for Health Metrics and Evaluation (IHME) at the University of Washington State. The study - which included a representative sample of the thirteen Saudi regions - provides both clarity and insight on the growth of non-communicable diseases in the country. The study shows that health risks and complications are on the increase in both male and female populations. Both groups do not maintain a healthy lifestyle, which affects women to a greater extent due to their status in society. The study finds that "nearly half of Saudi women do not engage in any physical

⁴ Habibzadeh, Farrokh. "Diabetes in the Middle East." *Editor's Page Diabetes in the Middle East* 380 (2012): 1. *Diabetes in the Middle East*. The Lancet Middle East Edition, NIOC Medical Education and Research Center, Aug. 2012. Web. 01 Sept. 2014.

⁵ Alshammari, Yousef Fadhel F. "International Journal of Health Sciences." *Attitudes and Practices of Primary Care Physicians in the Management of Overweight and Obesity in Eastern Saudi Arabia*. International Journal of Health Sciences, Apr. 2014. Web. 03 Sept. 2014.

⁶ Al Sibai, Amal. "Vitamin D Deficiency in Women Rise at Alarming Rate." *Saudi Gazette*. Saudi Gazette, 27 Oct. 2013. Web. 01 Sept. 2014.

activity at all, while 29% of them engage in light physical activity". In this case, "light physical activity" likely means some walking for the purpose of movement rather than physical fitness. Measurements of the body mass index show that the prevalence of obesity is higher among women than men, with 33.5% and 24.1% for males.⁸

Obesity also leads to decreased self-confidence, lowered likelihood of marriage, reduced fertility, higher rates of divorce, and marital infidelity. Women in Saudi Arabia are prepped for wifehood, and much of the society places their worth on being a wife and mother. Women are chastised for their size, but discouraged from engaging in physical activities to maintain any semblance of physical health. Obese women can also have difficult pregnancies. Such women are at risk for gestational diabetes, preeclampsia, infection, overdue pregnancy, labor problems and increased likelihood of a C-section⁹.

Vitamin D Deficiency

Among the illnesses made worse by Saudi ban and restrictions on women is Vitamin D deficiency, which is connected to the lack of sun exposure. Vitamin D deficiency is an indicator for an unhealthy lifestyle due to lack or limited sun exposure. The lack of sun exposure also affects bone density ¹⁰ - an endemic issue affecting women to a much greater extent than men.

Although Saudi Arabia is a sun-baked country, the Saudi Gazette reported that 80% of Saudi women are vitamin D deficient¹¹. The chart below, based on a study conducted by the Saudi Medicine Journal, shows a specific Saudi population of both males and females that were given the 25- hydroxy vitamin D test to determine deficiency or different levels of the vitamin. The findings show that females suffer greater deficiency and have lower rates of normal results.

Vitamin D deficiency is also connected to the rise of multiple sclerosis (MS) in Saudi Arabia due to the lack of exposure to the sun. According to the Saudi Multiple Sclerosis

⁷ Mokdad, Ali. "Saudi Health Interview Survey Finds High Rates of Chronic Diseases in the Kingdom of Saudi Arabia." Institute for Health Metrics and Evaluation. Institute for Health Metrics and Evaluation, n.d. Web. 28 Sept. 2014.

⁸ Mokdad, Ali. "Saudi Health Interview Survey Finds High Rates of Chronic Diseases in the Kingdom of Saudi Arabia." Institute for Health Metrics and Evaluation, n.d. Web. 28 Sept. 2014.

⁹ Mayo Clinc Staff. "Pregnancy and Obesity: Know the Risks." Pregnancy Week by Week. Mayo Clinic, n.d. Web. 29 Sept. 2014. http://www.mayoclinic.org/healthy-living/pregnancy-week-by-week/in-depth/pregnancy-and-obesity/art-20044409.

¹⁰ Al Sibai, Amal. "Vitamin D Deficiency in Women Rise at Alarming Rate." *Saudi Gazette*. Saudi Gazette, 27 Oct. 2013. Web. 01 Sept. 2014.

¹¹ Al Sibai, Amal. "Vitamin D Deficiency in Women Rise at Alarming Rate." *Saudi Gazette*. Saudi Gazette, 27 Oct. 2013. Web. 01 Sept. 2014.

Advisory Group and Dr Abdulrahman AlTahhan, the head of Neurology Department at King Khalid University Hospital, there has been a 10% increase in the rate of MS in the past five years. The current rate is 30 per 100,000¹², in comparison to 20 per 100,000 in 2009. There are no available statistics on MS rates among women, but MS is generally more prevalent among them.

Vitamin D state	Total n (%)	Male (n=245) % (CI)	Female (n=243) % (CI)	P – Value
Deficiency	145 (29.7)	18.4 (±4.9)	41.2 (±6.2)	0.0002
Relative Insufficiency	111 (22.7)	20.8 (±5.1)	24.7 (±5.4)	
Normal	232 (47.5)	60.8 (±6.1)	34.1 (±5.9)	

Table 1: Proportions of subjects in different 25-Hydroxy vitamin D sub-groups stratified by gender 14

Osteoporosis

Osteoporosis is another illness on the rise in mostly female populations. Physical education and exercise in youth can lower its occurrence. Saudi women find it difficult to have outside mobility without their male guardians. A sedentary lifestyle can cause osteoporosis or, in its beginning stages, osteopenia. Osteoporosis is caused by low bone mass usually unattained during one's youth. Bones in the early stages of development regenerate quickly, but as age becomes a factor, bone mass is lost faster than it is created ¹⁵. Lack of physical education in the younger years will affect bone mass, and thus becomes a problem for Saudi girls and women for many decades to come.

Students spend most of their day and week in the school environment and require, to some degree, exercise of some kind. Forced inactivity of girls and women contributes to osteoporosis or postmenopausal osteoporosis in women. The Ministry of Health attempts to address the issue, and their website lists preventative measures for osteoporosis. However, in no place does the ministry acknowledge how bans on physical activity and education can either directly or indirectly affect women's health.

6

¹² Saudi Multiple Sclerosis Advisory Group http://www.saudims.sa/Research-Studies/local-researchs

¹³ AlRiyadh newspaper 20 August 2009 http://www.alriyadh.com/453608

¹⁴ Alsuwaida, Abdulkareem O., Youssef M. Farag, and Abdulla A. Al Sayyari. "Prevalence of Vitamin D Deficiency in Saudi Adults." National Center for Biotechnology Information. U.S. National Library of Medicine, 17 Apr. 2011. Web. 29 Aug. 2014.

¹⁵ "Protect Yourself from Osteoporosis." Women's Health. Ministry of Health, 26 Dec. 2011. Web. 27 Aug. 2014.

Diabetes

Type 2 diabetes mellitus is a chronic disease common in the Gulf Region due to lifestyle and genetics. The illness is on the rise, and mortality rates of this often-ignored medical problem are a cause for concern. In the same IHME study on obesity, diabetes was also a major issue in the topic of health analysis in the region.

The study of female and male sample populations in all thirteen regions of the country shows that: "The total prevalence of diabetes was 14.8% for males and 11.7% for females in 2013. It increased with age and ranged from 7.8% among those aged 25 to 34 to 50.4% among those aged 65 and older. Borderline diabetes was present in 17% (1.17 million) of men and 15.5% (0.95 million) of women. Among 1 million Saudi diabetic men, 583,000 are on medication for diabetes, and 230,000 have uncontrolled diabetes. For women, 720,000 are diabetic, and 367,000 are on medication, while 167,000 have uncontrolled diabetes." ¹⁶

The International Diabetes Federation reported that Saudi Arabia diagnosed 3.6 million new cases in 2013¹⁷. The Lancet essay on diabetes in the Middle East shows that 46% of risk reduction of the disease is attributed to increased exercise¹⁸. The graph in Table 3 shows the prevalence of diabetes in adults by age comparing the world, MENA region and Saudi Arabia. The numbers in Saudi Arabia are very high and will likely continue to rise in the future with the current policies.

The chart in Table 2 also shows the prevalence of the disease in specific age groups as well as mortality rates, health expenditures and the number of undiagnosed cases in adults".

Total adult population (1000s) (20-79 years)		Number of deaths in adults due to diabetes	22,113
	18,056.84		
Prevalence of diabetes in adults (20-79 years) (%)	20.22	Mean healthcare expenditures due to diabetes per person with diabetes (USD)	\$943
Total cases of adult (20-79 years) with diabetes (1000s)	3,650.89	Number of cases of diabetes in adults that are undiagnosed (1000s)	1,485.91

Table 2: Diabetes in Saudi Arabia – 2013 19

¹⁶ Mokdad, Ali. "Saudi Health Interview Survey Finds High Rates of Chronic Diseases in the Kingdom of Saudi Arabia." Institute for Health Metrics and Evaluation. Institute for Health Metrics and Evaluation, n.d. Web. 28 Sept. 2014.

^{17 &}quot;Saudi Arabia: Diabetes." *International Diabetes Federation*. International Diabetes Federation, 2013. Web. 01 Sept. 2014.

¹⁸ Habibzadeh, Farrokh. "Diabetes in the Middle East." *Editor's Page Diabetes in the Middle East* 380 (2012): 1. *Diabetes in the Middle East*. The Lancet Middle East Edition, NIOC Medical Education and Research Center, Aug. 2012. Web. 01 Sept. 2014.

¹⁹ "Saudi Arabia: Diabetes." *International Diabetes Federation*. International Diabetes Federation, 2013. Web. 01 Sept. 2014.

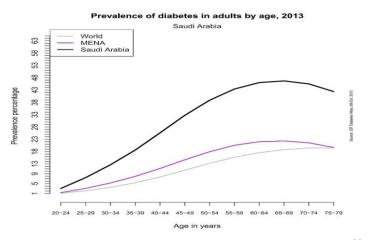


Table 3: Saudi Arabia vs world prevalence of diabetes 2013 20

Hypertension

Hypertension is a rising illness in the Kingdom, with rates soaring in male and female populations, and specifically the elderly. Hypertension can be caused by the limitations on the Saudi female population and attendant health issues discussed in this report. They are obesity, diabetes, a sedentary lifestyle, high level of salt intake, vitamin D deficiency and stress.²¹

These result directly from bans on physical activity resulting in virtual immobility for women on a day-to-day basis. The IHME study also found that the prevalence of hypertension is 12.5% for women, and another 34.3% (2.18 million) manifesting borderline hypertension rates. ²² The study also reports that 335,000 women with diagnosed hypertension are on medication, while 170,000 women have uncontrolled blood pressure. ²³ 20-60 minutes of aerobic exercise 3-5 times a week can control and lower blood pressure, but this basic remedy remains off-limits to the Saudi women. ²⁴

²⁰ "Saudi Arabia: Diabetes." *International Diabetes Federation*. International Diabetes Federation, 2013. Web. 01 Sept. 2014.

²¹ Knowledge Center. "What Is Hypertension? What Causes Hypertension?" Medical News Today. MediLexicon International, 26 Sept. 2014. Web. 30 Sept. 2014. http://www.medicalnewstoday.com/articles/150109.php.

²² Mokdad, Ali. "Saudi Health Interview Survey Finds High Rates of Chronic Diseases in the Kingdom of Saudi Arabia." Institute for Health Metrics and Evaluation. Institute for Health Metrics and Evaluation, n.d. Web. 28 Sept. 2014.

²³ Mokdad, Ali. "Saudi Health Interview Survey Finds High Rates of Chronic Diseases in the Kingdom of Saudi Arabia." Institute for Health Metrics and Evaluation. Institute for Health Metrics and Evaluation, n.d. Web. 28 Sept. 2014.

²⁴ Hillman, Gavin C., and Len Kravitz. "Hypertension and Exercise." The University of Mexico, n.d. Web. 25 Sept. 2014.

Conclusion

Saudi government policies, backed by societal norms and conservative beliefs paraded as strict adherence to the religious rules, have been the Saudi ruling monarchy's mainstay tools used to dominate their population.

Official limitations and restrictions on Saudi women have numerous health, societal and economic consequences. In essence, the bans on female mobility are a direct attack on their health and wellbeing, as well as on their basic freedoms and rights as human beings. Statistically, the Saudi Arabian society is already at risk for health issues due to improper eating habits as well as low physical activity rates; and cannot afford to continue to oppress women in such a fashion. The nation is and will be paying additional billions of dollars in healthcare costs for a less healthy female population stemming from the ban on sport.

The Saudi government ban on women physical education and sports is causing a plethora of problems for women, including increased health issues such as heart disease, osteoporosis, obesity, hypertension, hypotension, strokes, high cholesterol, vitamin D deficiency, multiple sclerosis, increased mischarges and C-section, depression, bulimia, and eating disorders.

The ban on women's participation in physical education and sports also leads to other social problems, including higher rates of divorce, infertility, marital infidelity, domestic violence and lower ability for education and employment opportunities.

The silent war on women in Saudi Arabia has been going on for decades, and continues to hold the entire nation back. It must be understood that restrictions on women sports and physical activity have nothing to do with culture or religion, but rather, are fueled by the ruling elite as a means to control the population. As long as the Saudi government continues to claim that such bans are a result of cultural and personal practices, women will continue to suffer a decline in physical and mental health, as well as their social, economic and political status.

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