**ANNOTATED INDEX OF RELEVANT COUNTRY CONDITIONS IN GUINEA REGARDING GENDER BASED VIOLENCE AND LGBTQ+ ISSUES**

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# U.S. GOVERNMENT REPORTS

## U.S. Department of State, Country Reports on Human Rights Practices for 2022: Guinea (2022), <https://www.state.gov/reports/2022-country-reports-on-human-rights-practices/guinea/>.

* + **Rape and Domestic Violence:** “The law does not address spousal rape or the gender of survivors. Rape is punishable by five to 20 years in prison. Survivors often declined to report crimes to police due to custom, fear of stigmatization, reprisal, and a lack of cooperation from investigating police or gendarmes. Studies indicated citizens also were reluctant to report crimes because they feared police would ask the survivor to pay for the investigation.” P. 21.
  + **Domestic Violence:** “Assault constitutes grounds for divorce under civil law, but police rarely intervened in domestic disputes, and courts rarely punished perpetrators.” P. 21.
  + **Female Genital Mutilation/Cutting (FGM/C):** “Prior to September 2021, the constitution and laws prohibited FGM/C. The country had an extremely high FGM/C prevalence rate. According to a 2018 UNICEF survey, 94.5 percent of women and girls ages 15 to 49 had undergone the procedure, which was practiced throughout the country and among all religious and ethnic groups.” P. 10 – 11.
  + **Abuse of Detained Women:** “Abuse of inmates in government detention centers continued. Security officials designated as “judicial police officers” abused detainees to coerce confessions. Human rights activists noted the most egregious abuses occurred during arrests or at detention centers. Human rights associations stated that complainants often presented evidence of abuse and wardens did not investigate these complaints. These nongovernmental organizations (NGOs) also alleged that guards abused detainees, including children, and coerced some women into exchanging sex for better treatment.” P. 4.
  + **Lack of Political Participation of Women and Members of Minority Groups**: “No laws limit participation of women or members of minority groups in the political process, and they did participate. Observers noted, however, there were cultural constraints on women’s political participation, evidenced by the low rate of women occupying influential political or government positions. The October 2020 presidential elections saw two female candidates run for office. Political participation by openly identified LGBTQI+ persons was nonexistent due to cultural stigma and taboos that caused LGBTQI+ persons to hide their status.” P. 19.
  + **Acts of Violence and discrimination against Sexual Orientation and Gender Identity:** “Civil society activists reported acts of violence against LGBTQI+ persons. Although violence against LGBTQI+ persons was neither reported to be widespread nor publicly supported by the government or society, at least one LGBTQI+ individual alleged that police did not assist him after he reported being beaten. No antidiscrimination laws apply specifically to LGBTQI+ persons, but the government officially opposed discrimination against LGBTQI+ persons. While most LGBTQI+ persons did not face legal barriers to accessing housing, health care, education, and employment, LGBTQI+ activists reported LGBTQI+ identity was seen in the culturally conservative eastern regions of the country as socially unacceptable and could result in denial of employment or housing by private individuals.” P. 14.
  + **Criminalization of LGBTQ+ Persons:** “The law criminalizes consensual same-sex sexual conduct between adults, which is punishable by three years in prison. Although there were no known prosecutions under the law during the year, LGBTQI+ individuals reported harassment and persecution by law enforcement and often paid bribes in order to avoid arrest.” P. 26.
  + **Violence against LGBTQ+ Persons:** “LGBTQI+ persons faced arbitrary arrest, violence, and harassment by security forces who accused them of disrupting the social order. LGBTQI+ persons reported being stigmatized by their families. They were also subject to sexual assault based on their sexual orientation. LGBTQI+ persons indicated some degree of internal displacement to avoid regions where cultural and religious norms put their lives and livelihoods in particular danger.” The Transition Charter describes marriage and the traditional family unit (which excludes LGBTQI+ families) as the foundation of the country’s society. LGBTQI+ persons were subject to employment and housing discrimination. There were no official or formal NGO reports of discrimination based on sexual orientation or gender identity, although societal stigma likely prevented survivors from reporting abuse or harassment. LGBTQI+ community members advised that those who are unable to conceal their identity, particularly transgender persons and sexual minorities with nonnormative gender presentation, were subject to bullying by peers and teachers, and often were unable to complete their studies. LGBTQI+ persons reported fear of discrimination when seeking health and medical care, leading many not to seek out treatment. A diplomatic mission in Conakry requested in December 2021 information regarding the celebration of same-sex marriage by foreign consuls in the country. The Ministry of Justice through the Ministry of Foreign Affairs replied in March that according to the law, such a marriage is not recognized in the country.” P. 26.
  + **Discrimination against LGBTQ+ Persons:** “Deep religious and cultural taboos existed against consensual same-sex sexual conduct. Antidiscrimination laws do not apply to LGBTQI+ persons. The Transition Charter and existing laws do not protect the rights of LGBTQI+ persons.” P. 26 – 27.
  + **Lack of Legal Recognition for LGBTQ+ Persons:** “Groups explicitly representing the rights and well-being of the LGBTQI+ community reported that they were unable to obtain legal recognition, even though there is no explicit law preventing their recognition.” P. 15.

# INTERNATIONAL AND NGO REPORTS

## Human Rights Watch, Rape Survivor Testifies Publicly in Guinea Massacre Trial (March 2023), <https://www.hrw.org/news/2023/03/31/rape-survivor-testifies-publicly-guinea-massacre-trial>

* + **Government unable/unwilling to help:** “With those words, rejecting the option of a closed session, Fatoumata Barry took the stand this March in Guinea and shared with the world the horrors that she – and hundreds of others – experienced on September 28, 2009. On that day, thousands of Guineans had gathered for a pro-democracy rally against the ruling military junta in a stadium in Conakry, the capital, when security forces opened fire. They killed more than 150 people and committed brutal sexual violence against more than 100 women in and around the stadium. Survivors and civil society groups have long campaigned for justice for the massacre, sexual violence, and other abuses committed at the stadium. Though 13 years have passed, Barry said the day still haunts her . . . .”

## BTI Transformation Index, Guinea Country Reports 2022 (2022), <https://bti-project.org/en/reports/country-report/GIN>

* + **Lack of Government Intervention:** “Opposition groups had assembled at a peaceful protest gathering in the national stadium on September 28, 2009 and were assaulted by an army squad composed of close confidantes of Camara. In the process, 158 civilians were killed, more than 100 women raped and well above 1,000 injured. Until today, the victims and their families are waiting for a trial that would investigate the massacre and hold the responsible persons accountable.”
  + **FGM:** “Customary law discriminates against women and sometimes takes precedence over statutory law, particularly in rural areas. The law prohibits clitoridectomy, but it was nevertheless performed on about 97% of women in 2012.”
  + **Women’s Rights and Stereotypes:** “Officially, equal rights for men and women are guaranteed, however women continue to suffer from various disadvantages, due to traditional or religious attitudes within the population. During their childhood and youth, girls must obey their fathers; once married, women come under the authority of their husbands. Nevertheless, female agency is manifold, even though this is often difficult to recognize for outsiders.”

## Amnesty International, Human Rights in Guinea 2022 (2022), <https://www.amnesty.org/en/location/africa/west-and-central-africa/guinea/report-guinea>

* + **Violence against women and girls.** “Victims of rape continued to experience lack of protection, access to and availability of medical care, sexual and reproductive health services, psychological support and legal and social support. Despite frequent awareness-raising campaigns, the government failed to prevent the crime, while “socio-cultural pressures” continued to weigh heavily on victims and their families, who were often forced into silence, extrajudicial settlements in cases of rape or stigmatization.”

## Amnesty International, Shame Must Change Sides: Ensuring Rights and Justice for Victims of Sexual Violence (September 2022), <https://www.amnesty.org/en/documents/afr29/5410/2022/en/?utm_source=annual_report&utm_medium=epub&utm_campaign=2021>

* + **Prevalence of Sexual Violence.** “Sexual violence is a significant issue in Guinea. It is known for being the country with the second highest level of female genital mutilation in Africa. Forced marriage is also very common. Rape has long remained a taboo topic and little documented; in recent years, however, the silence has been broken thanks to women and civil society organizations.” P. 7.
  + **Sexual Violence Statistics:** “In the meantime, cases of rape recorded by specialized units within the police and gendarmerie increased, although the lack of data and its inconsistency makes it impossible to draw definitive conclusions as to the extent of the crimes. The National Observatory to Combat Gender-Based Violence, a structure supposed to centralize data on gender-based violence (GBV), is just being set up 10 years after its official creation by decree. The main statistics available are those of the two units in charge of working to combat GBV within the police and the gendarmerie, those of forensic medicine and those collected during national surveys. The number of rape cases handled by the Office for the Protection of Gender, Child and Vice Protection (Oprogem, police) increased from 125 in 2018 to 398 in 2019, and the cumulative number of rapes handled by Oprogem and the Special Brigade for the Protection of Vulnerable Persons (BSPPV, gendarmerie) reached over 400 in 2021. During the first three months of 2022, Oprogem recorded 117 cases of rape. According to available data, victims are most often minor girls under the age of 18.5 In 2020, more than 75% of the complaints of rape registered by Oprogem concerned minors under 18 and nearly 70% of the perpetrators were adults. BSPPV data shows that 33% of the rapes and sexual assaults recorded in 2021 involved victims under the age of 13.” P. 7 – 8.
  + **Sexual Violence Statistics (cont’d):** “The data available to the Office of Gender, Child and Vice Protection and the Special Brigade for the Protection of Vulnerable Persons relates to complaints received. They show a clear increase in reported rapes to these two units. For the three cumulative years 2013, 2014 and 2015, 281 rapes were recorded by Oprogem. For the two cumulative years 2016 and 2017, 355 rapes were recorded. Then 116 cases were recorded in 2018, 393 in 2019, 374 in 2020 and 199 between 1 January and 30 September 2021. Created in 2020 (see 8.2.2), the BSPPV handled 204 complaints for “rape and sexual assault” cases in 2021.” P. 20.
  + **Sexual Violence Statistics (cont’d):** “During 2021, the forensic medicine department at Ignace Deen University Hospital in Conakry recorded a total of 638 “sexual assault cases”, of which 490 involved minors aged 15 years or younger, 148 were aged between 16 and 30, and two were between 31 and 45 years. In other words, more than 76% of victims were under 15 years of age.” P. 21.
  + **Sexual Violence Statistics (cont’d):** “Data provided to Amnesty International by Oprogem on the age and sex of victims and perpetrators on the basis of complaints is only available for the most recent years. Nonetheless, this clearly shows a high prevalence of rape among girls under 18 years of age by adult men. In 2020, more than 75% of the victims were minors and nearly 70% of the perpetrators were adults; in 2019, 75% of the victims were minors and nearly 65% of the perpetrators were adult men. BSPPV data for 2021 shows that 33% of rapes and sexual assaults recorded that year involved victims under the age of 13.” P. 20.
  + **Sexual Violence Statistics (cont’d):** “During the criminal session in Siguiri (Kankan region) in May 2022, 41 out of 90 cases involved rape or attempted rape (45%).77 In Yomou (Nzérékoré region) in May 2022, seven out of nine cases involved rape of minors (77%).78 In Labé in October 2021, five out of 16 cases involved rape (31.25%).” P. 21.
  + **Sexual Violence Within the Family Unit/Neighborhood:** “Young girls employed as domestic servants in families are particularly vulnerable to rape. Asmaou Bah Doukouré, General Secretary of the National Union of Domestic Workers of Guinea (SYNEM), explains that there is no data on the subject. However, she says, "there is physical, emotional or sexual violence in almost every household where there are domestic workers.” P. 22.
  + **Access to Justice for Rape Victims.** “Access to justice for victims of rape is often also strewn with insurmountable obstacles. Customary authorities sometimes push for out-of-court settlements, which is against the law. Certain victims who do file complaints may find themselves the target of threats and pressure, including from within their own families. The physical conditions in which they are received when filing a complaint and the lack of training among police officers and gendarmes can prevent victims from making a statement in complete confidence and privacy. The existence of a forensic certificate is often required for a complaint to be referred to the justice system, thus invalidating any sexual violence report that comes in much later than when the assault occurred. Further, victims have difficulty accessing forensic medicine because of a lack of specialist doctors, most of whom are concentrated in the capital, Conakry. This is in addition to the cost of the examination to certify a rape. Moreover, court and legal fees may prevent victims from filing complaints if they are not supported by NGOs, given the absence of an effective legal aid system. Finally, at the end of legal proceedings, which can be lengthy due to court bottlenecks, the sentences handed down sometimes do not seem sufficiently commensurate to the severity of the crimes committed.” P. 9.
  + **FGM:** “According to UNICEF statistics, despite existing legislation and awareness-raising efforts, the Republic of Guinea ranks second in the world after Somalia in the prevalence of FGM/C practices, with 97% of girls and women cut.” P. 14.

## Human Dignity Trust, Guinea (2020), <https://www.humandignitytrust.org/country-profile/guinea/>

* + **Criminalization of LGBT+ Persons:** “Same-sex sexual activity is prohibited under the Penal Code 2016, which criminalises ‘indecent acts or acts against nature.’ This provision carries a maximum penalty of three years’ imprisonment and a fine. Both men and women are criminalised under this law. Guinea has criminalised same-sex sexual activity since at least its 1998 Penal Code. In 2016 a new Penal Code was adopted, in which the criminalising provision was maintained and substantively unchanged. There is limited evidence of the law being enforced in recent years, with LGBT people being occasionally subject to arrest. Reports of discrimination and violence being committed against LGBT people in recent years are rare due to widespread social stigma which prevents them from reporting incidents.”

# NEWSPAPER ARTICLES

## Plan International, Combatting Female Genital Mutiliaion (FGM) in Guinea (May 2022), <https://www.plan.org.au/news/child-protection/combatting-female-genital-mutilation-fgm-in-guinea/>

* + **FGM:** “FGM is often seen as a gateway to marriage and a way of preserving a girl’s purity, and it continues in Guinea due to extreme social pressure and parents fears of being excluded from the community or worried that their daughters will never be married if they haven’t undergone the procedure.”
  + **FGM (cont’d):** “But because of FGM, girls can face short-term complications, such as severe pain, excessive bleeding, infections, and difficulty in urinating, as well as longer-term consequences for their sexual and reproductive health and mental health.”

# SCHOLARLY ARTICLES

## Perception of Women on Gender-Based Violence in Guinea: A Qualitative Study (2022), <https://clinmedjournals.org/articles/ijwhw/international-journal-of-womens-health-and-wellness-ijwhw-8-136.pdf>

* + **Sexual and Physical Violence/Government Unwilling to Help:** “Another national survey conducted in 2016 on GBV reported that 55.7% of women reported to be victims of physical violence and 29.3% of sexual violence [5]. Guinean legislation stipulates laws against all forms of gender-based violence, but due to the ignorance of these laws, the economic vulnerability including sociocultural factors (religion, customs), victims’ recourse is restricted. A training program for providers on the management of GBV has been developed, but it has not been widely distributed.” P. 2.
  + **FGM:** “[I]t was noted that female genital mutilation (FGM), another form of GBV . . . is deeply rooted in Guinea (95% of women aged 15-49 have undergone FGM/Cutting) . . . .” P. 7.
  + **Attitudes Towards Gender-Based Violence:** “As for the attitude of women and their families towards GBV, the first one is silence, followed by the care and the steps to take after the violence. Because of the fear of parents’ reactions or stigmatization in the community, girls who have been raped are sometimes forced to remain silent, as these urban adolescents explain: “The problem is that some girls, when they are raped, do not dare to talk to their family members or friends because they are ashamed or they fear discrimination. The pregnancy is discovered when they start to get sick and the family sends them to the hospital.”

## Involving the health sector in the prevention and care of female genital mutilation: results from formative research in Guinea (July 2022), <https://reproductive-health-journal.biomedcentral.com/articles/10.1186/s12978-022-01428-4>

* + **FGM Statistics:** “Guinea, located on the West African coast, has one of the highest FGM prevalence rates in the world with 95% of Guinean women aged 15–49 years reported to have undergone FGM.”
  + **Prevalence of Motives to Conduct FGM:** “A multi-country literature review on what motivates health care providers to conduct FGM found that strong community demand, the influence of cultural norms and personal experiences within their communities of origin, perceived harm reduction when health care providers perform the practice themselves and personal financial incentives, were key drivers of FGM medicalization.”
  + **Social Pressures and FGM:** “The practice of FGM was considered a cultural imperative. Not only did community members feel social pressure from elders and other family members and fear repercussions if their daughter failed to follow the family tradition prior to getting married, health care providers also felt pressure to maintain the tradition.”
  + **Stigmatization and FGM:** “Respondents reported that FGM was “a way to protect the honor of women and girls” and that a girl or woman who had not undergone the practice will not be respected by her peers. As one patient explained during an exit interview: “As far as the importance of excision is concerned, everyone says it is for respectability. If the person (concerned) is not excised, it means that she is not respectable. That's how I understand the importance of excision. That's what I know.” Another young woman in a rural FGD, also stated: “we say here that if you are not excised it is a disgrace and a shame. If you see that she is not married, it means that men are afraid of her, all this brings shame.” Community members request that it be performed by health professionals to avoid complications.”
  + **Stigmatization and FGM:** “We found that girls who had not undergone the practice of FGM and their respective families were stigmatized by the community for non-conformity to this social norm.”

## 28toomany, FGM In Guinea: A Short Report (September 2021), <https://www.28toomany.org/media/uploads/Country%20Research%20and%20Resources/Guinea/guinea_short_report_v1_(september_2021).pdf>

* + **Attitudes towards FGM:** “65.4% of women and 59.6% of men, aged 15–49, who have heard of FGM believe that the practice should be continued.”
  + **Medicalized FGM:** 72% of women are cut by traditional practitioners, but medicalised FGM is rising rapidly. Medical professionals, mainly nurses and midwives, cut about 17% of women aged 15–49, but almost 35% of girls aged 0–14. The percentage of women and girls cut by a health professional increased from 9% in 1999 to 15% in 2012 and then to 17% in 2018. Among girls aged 0-14, this percentage rose from 31% in 2012 to 35% in 2018.”