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The Guinean nurse who stopped performing genital mutilation on girls: 'In an environment where everyone does one thing, it is very difficult not to do the same'

Djénabou Bélla Diallo, whose clitoris was cut as a child, is now a midwife and renounces the practice. But the custom is still very common in Guinea-Conakry, which has the world's second highest population of mutilated females



Guinean nurse Djénabou Bélla Diallo, in the backyard of her house, in Labé, in August 2023.

SARA AMINIYAN LLOPIS | ANNA ENRECH CALBET

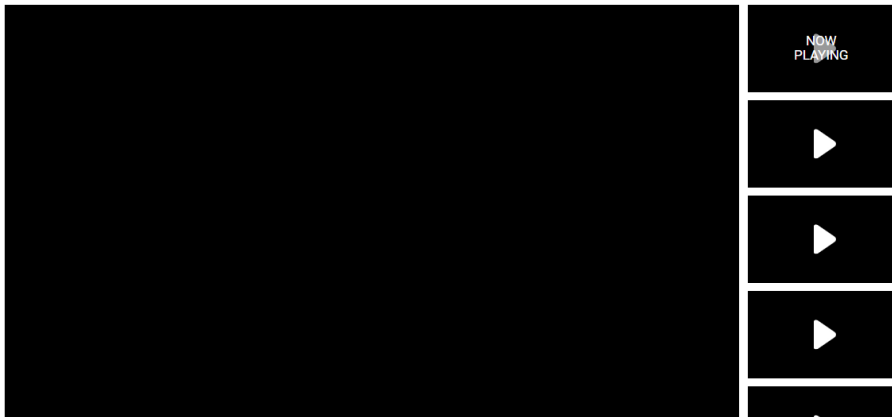
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Djénabou Bélla Diallo learned to mutilate girls' genitals during her university nursing internship at a private clinic in the town of Labé, in west-central Guinea-Conakry. "There is a lot of social pressure. All past generations did it, absolutely all women were mutilated. In an environment where everyone does one thing, it's very difficult not to do the same thing," she explains.

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Cut as a child herself, Diallo, 35, talks about her work [practicing female genital mutilation](#) (FGM) in a rather introverted manner, although she answers all questions. "At the clinic, we stopped mutilating little girls when we understood the physical and psychological damage it causes, and we began to provide training to stop this gender-based violence," she recalls. Two years ago, she stopped cutting to work as a midwife in a public health center in the district of Pelel, near Labé, the commercial epicenter and capital of one of the eight regions into which Guinea is divided. Since 2021, a military junta has governed this country of 14 million inhabitants; according to the United Nations Population Fund, over 41% of the population is under 14 years of age.

Female genital mutilation or the cutting of a girl's clitoris is [practiced mostly in countries in Africa and the Middle East](#), despite being prohibited in many of these places. According to UNICEF data, today [at least 200 million girls and women](#) in 31 countries have been subjected to genital mutilation. UNICEF says that in general the practice has been declining over the past three decades. But that is not the case in Guinea-Conakry, which has the world's second-largest population of girls and women who've suffered this form of gender violence, after only Somalia. According to the feminist organization Equality Now, 95% of females undergo genital mutilation in Guinea-Conakry.

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“In our case [at the clinic], we only cut a piece of the clitoris,” Diallo recalls. “But there are other types of FGM. The most widespread type in Guinea, especially in rural areas, is type three, in which the clitoris, the greater nerves and the upper labia are cut. In private clinics, the procedure is performed with sanitary instruments. In other cases, it is done with scissors, cutters or knives; that is very common in rural areas.” Aissatou Diallo, a Guinean feminist activist based in Barcelona, Spain, adds that this practice is not directly related to religion. “Muslim, Catholic and animist girls are mutilated,” she says.

Each month, Nurse Diallo mutilated two girls between the ages of five and six for approximately 50,000 Guinean francs (about \$6.00). In Guinea, the percentage of families who mutilate their daughters at private clinics is very low, as not everyone can afford it, she notes. “There are what are called community mutilators, who go to rural villages, and in exchange for very little money, they offer to perform FGM. In these cases, they don’t mutilate the girls indoors, but take them and mutilate them in the middle of the forest, for example.”

FGM has many different consequences: psychological trauma, serious complications in childbirth and deprivation of sexual pleasure. “It is a macho practice, used to make women more vulnerable from an early age. It is a tool of domination, to weaken us,” emphasizes Aissatou Diallo, nurse Djénabou Diallo’s sister-in-law and the president of [AHCAMA](#), an association working to combat gender-based violence.

Djénabou Diallo says that increasingly more women, especially those of her generation, are refusing to perform FGM on their daughters. She acknowledges that a popular strategy is pretending and claiming that the girls have complied with the rite when it’s not true. “Even [the girls] think they are [mutilated], and when they grow up they find out they are not,” Diallo notes. Asked about her own daughter, Diallo is quick to respond, “We’re not going to mutilate her.”

The practice of FGM is not the only problem Guinean women face. According to World Bank data, barely 31% of the country’s women were literate in 2021. Access to healthcare and basic resources like drinking water is very scarce or non-existent, says Boubacar Sylla, of the Guinean NGO [Club des Amis du Monde](#) (CAM). The situation is particularly harsh in rural areas, where approximately [62% of the Guinean population](#) currently lives.

In addition to FGM, there are other problems, such as the forced and early marriage of girls. According to a study by the Autonomous University of Barcelona’s Wassu-UAB Foundation, in 2021, 47% of women in Guinea were married before the age of 18. The same report concluded that a community that legitimizes FGM is more likely to lead its sons and daughters into forced marriages. The study also pointed out that in societies where

marriages. The study also pointed out that in societies where gender inequalities limit women's access to economic opportunities, forced marriage is often seen as a good survival strategy to attain some financial security.

Sara Aminiyan Llopis and Anna Enrech Calbet are founders of [Yemayá magazine](#).

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