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CAMEROON

The Center for Family and Human Rights (C-Fam) is a nongovernmental organization which was founded in 1997 and has held Special Consultative Status with the UN Economic and Social Council since 2014. We are headquartered in New York and Washington, D.C. and are a nonprofit, nonpartisan research and advocacy organization that is dedicated to reestablishing a proper understanding of international law, protecting national sovereignty and the dignity of the human person.

INTRODUCTION

1. In 2020, the ministers and high representatives of 34 countries met to launch the Geneva Consensus Declaration (GCD), in which they committed to promoting four objectives: improve women's health, protect human life, strengthen the family as the basic unit of society, and defend the sovereignty of nations with regard to their laws and policies to protect life.¹ Cameroon was one of the original signatories of the GCD. This report focuses on Cameroon's fulfillment of its commitments to human rights in the context of the four pillars of the GCD.

THE GENEVA CONSENSUS DECLARATION

2. The language of the GCD is drawn exclusively from documents agreed by consensus, including core UN human rights treaties, the founding documents of the UN such as the Universal Declaration of Human Rights (UDHR), and major meeting outcomes such as the Beijing Declaration and Platform for Action and the Programme of Action of the International Conference on Population Development.

PROTECTING WOMEN'S HEALTH

3. At the 1994 International Conference on Population and Development (ICPD), nations pledged "to enable women to go safely through pregnancy and childbirth and provide couples with the best chance of having a healthy infant."² This commitment is echoed in the GCD, alongside reaffirmations of the importance of women's equal rights and their contributions to society, both in terms of education, employment, and civic engagement and through the family. The unique and essential role of women as mothers was recognized in the Beijing Declaration and Platform for Action adopted at the 1995 UN Fourth World Conference on Women.³ Both of these landmark conferences, as well as the subsequent Millennium Development Goals and Sustainable Development Goals, include commitments to reduce maternal and child mortality, and while significant progress has been made around the world, critical gaps remain, especially for those in the poorest, most remote, and resource-deprived areas.
4. According to the Maternal Mortality Estimation Inter-Agency Group (MMEIG), Cameroon has seen a reduction in its maternal mortality ratio from 886 to 529 deaths per 100,000 live births between 2000 and 2017.⁴ This is similar to other countries in the same region of sub-Saharan Africa, and higher than the global average. Factors increasing maternal mortality risk include poverty, which is particularly concentrated in rural areas, malnutrition, HIV/AIDS, and ongoing conflict in the western part of Cameroon. There is a shortage of doctors, nurses, and midwives in Cameroon, which is exacerbated in conflict-affected regions.⁵ According to the World Bank, less than 36% of both girls and boys complete lower secondary education, which is lower than the regional levels in sub-Saharan Africa as well as lower-middle income countries more broadly.⁶ One important recent achievement is the decision by Cameroon's Minister of Secondary Education to allow pregnant students to continue school, both during their pregnancy and after receiving maternity leave, rather than being forced to drop out and end their education.⁷

5. Abortion is illegal in Cameroon except to save the life of the mother, if there is a grave risk to the mother's health, or in cases of rape, according to the 2016 Penal Code.⁸ While maternal mortality remains high in Cameroon, the reductions in the maternal mortality ratio observed since 2000 occurred without liberalization to the country's abortion law. A report commissioned by the International Federation of Gynaecology and Obstetrics (FIGO) on the prospects of abortion advocacy in Cameroon noted that "[a]dvocacy for safe abortion faces many challenges where traditional norms as well as entrenched religious beliefs do not support safe abortion," "abortion advocacy is still minimal," and that an attempt to liberalize the country's abortion laws would require "a shift in public opinion especially among political leaders and parliamentarians."⁹
6. In contrast, saving the lives of mothers and children through uncontroversial, reliable best practices is not politically controversial and would not offend the religious beliefs held by many Cameroonians, including Christians and Muslims who both oppose abortion on moral grounds. Ensuring a sufficient number of health care providers, adequate nutrition especially for pregnant mothers, and addressing the needs of women in rural and sparsely populated areas where poverty is greatest, requires both financial resources and political will, but would reduce maternal mortality and morbidity as well as improving the health and lives of all Cameroonians. Further maternal health gains would be achieved by ensuring that children—especially girls—have access to secure, quality education, including secondary education. Such a strategy would be in line with Cameroon's efforts to achieve its Sustainable Development Goals targets, in keeping with its human rights obligations, and consistent with its affirmation of the Geneva Consensus Declaration. All women, including mothers giving birth and those injured by abortion, will benefit from more robust healthcare systems with more providers and expanded services.

PROTECTING HUMAN LIFE

7. As mentioned previously, abortion remains highly controversial in Cameroon, and public opinion does not favor liberalizing the restrictions in the Penal Code with regard to abortion.
8. In its previous UPR sessions, Cameroon has received only one recommendation directly relating to abortion: in Cameroon's third UPR, it was recommended by Iceland: "Decriminalize abortion and repeal section 339 (2) of the amended Penal Code to remove the requirement of obtaining certification from a prosecutor before an abortion can be legally obtained." This recommendation was marked as "rejected" (noted) by Cameroon.
9. Cameroon's rejection of this recommendation is entirely consistent with its human rights obligations as set out in the binding human rights treaties ratified by Cameroon as well as other international agreements. The 1994 International Conference on Population and Development (ICPD), as quoted in the GCD, states that "any measures or changes related to abortion within the health system can only be determined at the national or local level according to the national legislative process." The standard set at the ICPD has been repeatedly reaffirmed by international consensus, including at the adoption of the Sustainable Development Goals. No global human rights treaty ratified by Cameroon asserts a human right to abortion, or could reasonably be interpreted as including such a right.

10. As a signatory to the Geneva Consensus Declaration, Cameroon has expressed its position that abortion is not an international human right. It is therefore consistent with this position that Cameroon and other members of the Geneva Consensus Declaration coalition reject any and all UPR recommendations to liberalize their abortion laws, as such recommendations are not only inconsistent with national laws and priorities, but also outside the scope of internationally agreed human rights standards and obligations.

SUPPORT FOR THE FAMILY

11. The GCD reaffirms the obligations of States in regard to the family enshrined in international law, including the definition of the family as “the natural and fundamental group unit of society” and recognition that it is “entitled to protection by society and the State.” Signatories to the GCD further committed to “support the role of the family as foundational to society and as a source of health, support, and care.”¹⁰ In its Constitution, Cameroon states that “the Nation shall protect and promote the family which is the natural foundation of human society.”¹¹
12. In Cameroonian law, there is no recognition of same-sex relationships, and homosexual behavior between both men and women is illegal. In Cameroon’s previous Universal Periodic Reviews, it has received numerous recommendations to repeal the laws criminalizing homosexual activity, and to explicitly eliminate discrimination on the grounds of sexual orientation and gender identity from several countries, and all of these have been marked as “noted” rather than “supported.” This consistent position of Cameroon reflects the fact that these issues are not subjects on which global consensus exists; nor are they included as rights in any binding international legal instrument to which Cameroon is a party. As summarized in the Family Articles, a project of the coalition Civil Society for the Family, the right to found a family is based on the union of a man and a woman, and “Relations between individuals of the same sex and other social and legal arrangements that are neither equivalent nor analogous to the family are not entitled to the protections singularly reserved for the family in international law and policy.”¹²

NATIONAL SOVEREIGNTY

13. As stated in the GCD, with regard to the legal status of abortion and the protection of the unborn, it is a matter of longstanding consensus that “each nation has the sovereign right to implement programs and activities consistent with their laws and policies.” However, opposition to this sovereign right of countries has become increasingly commonplace in those parts of the United Nations system governed more by expert opinion or bureaucratic oversight than by the standard of negotiated consensus. There is no global mandate to pressure countries to liberalize their abortion laws or expand the categories for non-discrimination as a matter of international human rights law with regard to, for example, sexual orientation or gender identity, and to the extent that mandate-holders engage in such behavior, they do so *ultra vires*.
14. Nevertheless, the frequency of such pressure has only increased toward countries whose laws restrict abortion in order to protect the unborn, or which maintain a traditional view of marriage and the family, in line with the human rights obligations expressed in the

binding treaties they have ratified. Such nonbinding opinions have been further elevated in many parts of the UN, although they have never been accepted nor adopted by consensus in the General Assembly.

15. The GCD, by anchoring its every assertion in a document adopted by consensus, reaffirms the centrality of the family, the rights of women and children and the fact that these rights are not upheld by abortion, and the importance of national sovereignty, especially in those places where global consensus does not exist.
16. Unlike other UN human rights mechanisms, the UPR provides a space for sovereign nations to speak to each other and provide encouragement to fulfill their human rights obligations. To the extent that this venue has been used to exert further pressure on countries to liberalize their abortion laws or redefine the family as a matter of national law and policy, it is important that global consensus on these matters be upheld and promoted in the UPR as well, particularly by those countries that have already taken a stand in this regard by signing the GCD.

CONCLUDING RECOMMENDATIONS

17. We encourage Cameroon to continue protecting the natural family and marriage, formed by a husband and a wife, as the natural and fundamental unit of society.
18. Cameroon should continue to improve maternal and child health outcomes, including by increased investment in the training and provision of medical professionals, with special attention to those in rural and remote areas and for those in low-resource settings. In accordance with Cameroon's commitments in the Geneva Consensus Declaration, this does not require the inclusion of abortion.
19. Cameroon should continue to assert the fact that abortion is not a human right in the context of multilateral negotiations, as well as in the Universal Periodic Review, in accordance with the Geneva Consensus Declaration, and call on its fellow signatories to do likewise.

¹ Geneva Consensus Declaration on Promoting Women's Health and Strengthening the Family, 2020. Available at <https://undocs.org/en/A/75/626>

² United Nations International Conference on Population and Development. (1994). "Programme of Action of the International Conference on Population Development," Cairo.

³ United Nations Fourth World Conference on Women. (1995). "Beijing Declaration and Platform for Action" (Annex II, Paragraph 29). Beijing.

⁴ World Health Organization, UNICEF, UNFPA, World Bank Group, and United Nations Population Division. Maternal mortality in 2000-2017: Cameroon. Available at https://cdn.who.int/media/docs/default-source/gho-documents/maternal-health-countries/maternal_health_cmr_en.pdf

⁵ World Health Organization Regional Office for Africa. The State of the Health Workforce in the WHO Africa Region. 2021. Available at <https://apps.who.int/iris/bitstream/handle/10665/348855/9789290234555-eng.pdf>

⁶ The World Bank, Gender Data Portal: Cameroon. Available at: <https://genderdata.worldbank.org/countries/cameroon/>

⁷ Sina, Kathy Neba. "Secondary Education: Pregnant students to be allowed in schools." May 10, 2022. CRTV. Available at: <https://www.crtv.cm/2022/05/secondary-education-pregnant-students-to-be-allowed-in-schools/>

⁸ Republique du Cameroun. Portant Code Penal. Available at: <https://abortion-policies.srhr.org/documents/countries/08-Cameroon-Penal-Code-2016.pdf>

⁹ Socpa, Antoine and de Koning, Korrie. Cameroon Country Report: Needs Assessment on Safe Abortion Advocacy. Conducted by KIT Royal Tropical Institute, commissioned by the International Federation of

Gynaecology and Obstetrics. May 2018. Available at <https://www.figo.org/sites/default/files/2020-03/Cameroon%20Country%20Report%20Final.pdf>

¹⁰ Geneva Consensus Declaration, *ibid*.

¹¹ Cameroon. Cameroon's Constitution of 1972 with Amendments through 2008. Available at https://www.constituteproject.org/constitution/Cameroon_2008.pdf

¹² Civil Society for the Family. The Family Articles. Available at <https://civilsocietyforthefamily.org/>