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HAITI

The Center for Family and Human Rights (C-Fam) is a nongovernmental organization that 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 concerning their laws and policies to protect life.¹ Haiti was one of the original signatories of the GCD. This report focuses on Haiti and its 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 and 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), Haiti has seen a slight reduction in its maternal mortality ratio from 400 to 350 deaths per 100,000 live births between 2000 and 2020.⁴ In 2023, according to the World Bank, the number has fallen to 328.⁵ As of 2023, Haiti had the highest maternal mortality rate in the Western Hemisphere, exacerbated by conflict, natural disasters, and poverty. Haiti's maternal mortality ratio has declined slightly in recent years due to gradual improvements in maternal health services rather than major reform. Gains are mainly linked to NGO- and donor-supported care, including better access to prenatal services, skilled birth attendance, emergency obstetric care, and limited family planning. However, progress remains fragile and heavily dependent on external aid, as the health system continues to face severe shortages, weak infrastructure, and political instability. According to the World Health Organization (WHO), Haiti has 2.92 medical doctors per 10,000 people.⁶ By comparison, the global average is 17 doctors per 10,000.

5. According to the World Bank, adult literacy among women is lower than that of men (63.9% and 72.9%, respectively).⁷ Literacy for both sexes in Haiti is lower than both the Latin American and Caribbean regional average and that of lower middle-income countries.
6. Haiti has expanded access to HIV prevention, testing, and treatment services in recent years, particularly through mobile clinics and community-based programs supported by UN agencies and NGOs. In 2022–2023, approximately 1,500 adolescents and young people accessed HIV and STI prevention services in the Great South and West regions, while around 600 young people were able to access antiretroviral treatment. Prevention of mother-to-child transmission services for HIV, syphilis, and hepatitis B have also been scaled up, with more than 1,400 pregnant and lactating mothers receiving integrated care and 310 women living with HIV receiving cervical cancer screening. However, HIV incidence remains a concern, particularly for those who continue to face stigma and structural barriers to care. Overall progress is being driven by strong international and community-based support, but outcomes remain constrained by poverty, infrastructure limitations, and weak health system capacity.⁸
7. Abortion is illegal in Haiti and is criminalized under the Penal Code,⁹ with very limited legal exceptions primarily intended to protect the life of the pregnant woman. There is no broad legal framework permitting abortion on grounds such as rape or incest, and in practice, access to safe abortion services is extremely restricted. A proposed 2020 update to the Penal Code would have permitted abortion up to 12 weeks in cases of rape, incest, or when the mother's physical or mental health was at risk. However, it has been delayed due to both political instability and opposition from proponents of traditional family values.¹⁰ Abortion in Haiti is heavily stigmatized on both cultural and religious grounds. A qualitative study conducted in southern Haiti reported that both women and healthcare workers described abortion as common but largely hidden, particularly among adolescents aged approximately 10–20 years, with decisions often driven by economic hardship.¹¹
8. Although Haiti has faced persistent political instability and repeated natural disasters, including Hurricane Matthew, the country has made progress in strengthening key public health systems and advancing core health indicators over the past decade. However, despite improvements in surveillance, immunization, HIV and TB services, and laboratory capacity, the health system remains fragile and heavily dependent on external support. Limited financing, weak infrastructure, and workforce shortages continue to constrain access to essential services and the sustainability of gains. Governance and financing challenges remain central, with reduced domestic health investment increasing reliance on international partners. The WHO 2026–2028 Country Cooperation Strategy prioritizes strengthening resilient health systems, with key goals including expanding primary healthcare, boosting vaccine coverage, decentralizing disease surveillance and tracking, and improving access to safe water to prevent waterborne disease outbreaks.¹²

PROTECTING HUMAN LIFE

9. As mentioned previously, abortion is considered taboo in Haiti and public opinion generally does not favor liberalizing the restrictions in the Penal Code concerning abortion.

10. In the previous Universal Periodic Review cycles, no state has explicitly mentioned abortion in its recommendations to Haiti. Haiti has accepted recommendations about expanding access to sexual and reproductive health services, defined as including family planning and reproductive health education, but these terms are not defined as including a right to abortion, as specified at the ICPD.¹³
11. Haiti's policy responses are consistent with its human rights obligations as set out in the binding human rights treaties ratified by Haiti as well as other international agreements. The 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 Haiti asserts a human right to abortion, or could reasonably be interpreted as including such a right.
12. As a signatory to the Geneva Consensus Declaration, Haiti has expressed its position that abortion is not an international human right. It is therefore consistent with this position that Haiti and other members of the GCD 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

13. The GCD reaffirms the obligations of States regarding the family enshrined in international law, including the definition of the family as "the natural and fundamental group unit of society" and the 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."¹⁴
14. Article 259 of the Constitution of Haiti states that the "State protects the family, which is the foundation of society." In Article 260, it continues that "[i]t must also protect all families regardless of whether they are constituted within the bonds of marriage. It must endeavor to aid and assist mothers, children and the aged." Article 261 further expands on its understanding of the family by asserting that children are entitled to the care of their mother and father.¹⁵
15. The Constitution of Haiti does not explicitly address or provide specific protections for persons on the basis of sexual orientation or gender identity. The Constitution emphasizes the establishment of a governmental system based on fundamental freedoms, respect for human rights, social peace, economic equity, and gender equality. It also guarantees equal working conditions and wages regardless of sex, beliefs, opinions, or marital status.¹⁶ 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."¹⁷
16. In its previous UPR sessions, Haiti has supported two recommendations to address violence committed against people on the basis of their sexual orientation or gender identity, and to ensure access to justice for victims. However, recommendations to

establish explicit protections on the basis of these categories or decriminalize same-sex relationships were noted by Haiti.^{18,19} (Same-sex relationships are not illegal in Haiti, although bills have been proposed that would criminalize them.)

17. All human beings possess the same fundamental human rights by their inherent dignity and worth, including the right to equal protection of the law without any discrimination.²⁰ Individuals who identify as lesbian, gay, bisexual, transgender, queer, etc., are protected from violence and discrimination to the same extent as any individual under the equal protection principle in human rights law. However, they are not entitled to special protections based on their sexual preferences and subjective gender identity as such.

NATIONAL SOVEREIGNTY

18. As stated in the GCD, about 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 about, for example, sexual orientation or gender identity, and to the extent that mandate-holders engage in such behavior, they do so *ultra vires*.
19. Nevertheless, the frequency of such pressure has only increased toward countries whose laws restrict abortion 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 elevated in many parts of the UN, although they have never been accepted nor adopted by consensus in the General Assembly.
20. 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.
21. 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, global consensus on these matters must 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

22. We encourage Haiti to continue protecting the natural family and marriage, formed by a husband and a wife, as the natural and fundamental unit of society, and to continue to uphold the right of a child to care from his or her mother and father.

23. Haiti should continue to improve maternal and child health outcomes, including by increased investment in the training and provision of medical professionals and expanding access to skilled birth attendants, nutrition, and accessible services for those in rural and remote areas. It should also focus on building sufficient infrastructure. Following Haiti's commitments in the Geneva Consensus Declaration, this does not require the inclusion of abortion.
24. Haiti 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, following the Geneva Consensus Declaration, and continue to call on its fellow signatories to do likewise. Likewise, Haiti should continue to advocate for the protection and respect for all human life, from conception to natural death.

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 and 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 UNDESA/Population Division. Trends in maternal mortality 2000 to 2020. Available at <https://www.who.int/publications/i/item/9789240068759>

⁵ <https://genderdata.worldbank.org/en/economies/haiti>

⁶ World Health Organization, The Global Health Observatory. Indicator: Medical Doctors (per 10,000 population). Accessed May 2026, Haiti. Available at [https://www.who.int/data/gho/data/indicators/indicator-details/GHO/medical-doctors-\(per-10-000-population\)](https://www.who.int/data/gho/data/indicators/indicator-details/GHO/medical-doctors-(per-10-000-population))

⁷ The World Bank, Gender Data Portal: Haiti. Available at <https://genderdata.worldbank.org/en/economies/haiti>

⁸ UNAIDS. Haiti 2022-2023: Summary of the Joint Programme's support to the national HIV response in 2022-2023. Available at https://open.unaids.org/sites/default/files/2025/Haiti-country-report_2022-2023.pdf

⁹ World Intellectual Property Organization. Penal Code of Haiti. Available at <https://www.wipo.int/wipolex/en/legislation/details/7928>

¹⁰ Lemaire, Sandra and Toussaint, Renan. "Haiti's New Penal Code Under Fire." *Voice Of America*. July 3, 2020 Available at https://www.voanews.com/a/americas_haitis-new-penal-code-under-fire/6192165.html

¹¹ Albuja LD, Cianelli R, Anglade D, Owusu B, Joseph L, Sailsman S, Ferrer L. Women's and Healthcare Workers' Beliefs and Experiences Surrounding Abortion: The Case of Haiti. *J Nurs Scholarsh*. 2017 Mar;49(2):170-176. doi: 10.1111/jnu.12278. Epub 2017 Feb 1. PMID: 28146335; PMCID: PMC5621786. Available at <https://pmc.ncbi.nlm.nih.gov/articles/PMC5621786/>

¹² Lowrance DW, Tappero JW, Poncelet JL, Etienne C, Frieden TR, Delsoins D. Public Health Progress in Haiti. *Am J Trop Med Hyg*. 2017 Oct;97(4_Suppl):1-3. doi: 10.4269/ajtmh.17-0347. PMID: 29064358; PMCID: PMC5676629. Available at <https://pmc.ncbi.nlm.nih.gov/articles/PMC5676629/>

¹³ United Nations International Conference on Population and Development, *ibid*.

¹⁴ Geneva Consensus Declaration, *ibid*.

¹⁵ Government of Haiti. Constitution of Haiti 1987 (rev. 2012) Available at https://www.constituteproject.org/constitution/Haiti_2012

¹⁶ *Ibid*.

¹⁷ Civil Society for the Family. The Family Articles. Available at <https://civilsocietyforthefamily.org/>

¹⁸ United Nations Human Rights Council. Report of the Working Group on the Universal Periodic Review: Haiti. December 20, 2016. Available at <https://undocs.org/A/HRC/34/14>

¹⁹ United Nations Human Rights Council. Report of the Working Group on the Universal Periodic Review: Haiti. March 30, 2022. Available at <https://undocs.org/A/HRC/50/15>

²⁰ United Nations. Universal Declaration of Human Rights. 1948. Available at <https://www.un.org/en/about-us/universal-declaration-of-human-rights>