



## **UNIVERSAL PERIODIC REVIEW – FOURTH CYCLE**

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### **IRELAND**

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. This report focuses on Ireland’s fulfillment of Article 3 of the Universal Declaration of Human Rights (UDHR) stating that every person has a right to “life, liberty and security of person,”<sup>1</sup> the preamble to the Convention on the Rights of the Child, which states that children need special safeguards, including appropriate legal protection, “before as well as after birth,”<sup>2</sup> and the outcome of the International Conference on Population and Development (ICPD), in which nations agreed 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.”<sup>3</sup>

## LEGAL STATUS OF ABORTION IN IRELAND

2. In 2018, following a national referendum, the Eighth Amendment of the Constitution Act 1983 was overturned, replaced by the Thirty-sixth Amendment, stating that “provision may be made by law for the regulation of termination of pregnancy.”<sup>4</sup> Prior to 2018, the Eighth Amendment recognized “the equal right to life of the pregnant woman and the unborn.”<sup>5</sup> Prior to the referendum, Ireland faced pressure to liberalize its abortion laws, both from activists within the country and from multilateral human rights institutions, including treaty bodies associated with treaties ratified by Ireland, including the Human Rights Committee (UNHRC), the Committee on the Elimination of Discrimination against Women (CEDAW), the Committee on the Rights of the Child (CRC), the Committee on Economic, Social and Cultural Rights (CESCR), and the Committee Against Torture (CAT). Unlike the texts of the treaties ratified by Ireland, which do not contain a right to abortion, the opinions of these expert bodies are not binding.
3. While activists both inside and outside Ireland drew on international sources to justify urging Ireland to amend its laws, the process that ultimately did so was entirely internal and did not justify itself by citing any treaty body or other international expert or group. The Health (Regulation of Termination of Pregnancy) Act 2018 contains no mention of international human rights standards and lends no support to the notion that abortion is an international human right.<sup>6</sup>

## PROTECTING MATERNAL HEALTH

4. 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.”<sup>7</sup> 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.<sup>8</sup> 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. While significant progress has been made around the world, critical gaps remain, especially in the poorest, most remote, and resource-deprived areas.
5. Well before the overturning of the Eighth Amendment, Ireland was well known for its excellent standards of maternal health, demonstrating that respecting the life of the unborn on an equal footing with the mother did not detract from the care received by the

mother, and that their wellbeing was not a zero-sum situation. While the tragic death of Savita Halappanavar was seen as a catalyst for public opposition to the Eighth Amendment in the referendum, investigations into the cause of her death found that medical mismanagement, not denial of abortion, was the main underlying issue.<sup>9</sup>

6. The maternal mortality ratio in Ireland has remained relatively stable over the last two decades, at around 4 deaths per 100,000 live births.<sup>10</sup> Ireland's exemplary maternal health record was achieved by the provision of high-quality care for mothers and children, alongside strong pro-life safeguards for the unborn.

## PROTECTING HUMAN LIFE

7. Ireland's previous legal protections for the unborn, alongside care and provision for mothers experiencing crisis pregnancies, was the subject of criticism and pressure by international bodies, but it was also consistent with international standards agreed by UN member nations, as well as the highest standards of scientific knowledge and medical expertise. The 2011 San José Articles, whose signatories include a member of the Irish Senate and a member of the Irish Human Rights Commission, ground the protection of life from conception in scientific principles and international legal standards, asserting that there is no international human right to abortion and that the unborn child is entitled to protection.<sup>11</sup> The 2012 Dublin Declaration on Maternal Healthcare demonstrates that the protection of the unborn does not come at the expense of the rights or health of the mother and affirms that "direct abortion – the purposeful destruction of the unborn child – is not medically necessary to save the life of a woman."<sup>12</sup>

## NATIONAL SOVEREIGNTY

8. Regarding 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, including treaty bodies. 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 concerning, for example, sexual orientation or gender identity, and to the extent that mandate-holders engage in such behavior, they do so *ultra vires*.
9. 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 non-binding opinions have been elevated in many parts of the UN, although they have never been accepted nor adopted by consensus in the General Assembly.
10. 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.

11. Before liberalizing its abortion laws, Ireland cited international human rights standards, including paragraph 8.25 of the ICPD, to assert that abortion is not an international human right, when faced with external pressure to change its laws. At the 5-year review of ICPD, conducted in 1999, Ireland's statement said that "the question of whether and in what circumstances the termination of pregnancy may be permitted is a matter for each country to determine for itself,"<sup>13</sup> echoing the ICPD consensus.
12. In the first three cycles of the UPR, Ireland received numerous recommendations to liberalize its abortion laws, most of which it marked as "noted" rather than "supported." Since the 2018 referendum and the overturning of the Eighth Amendment, Ireland has used the UPR to pressure other countries to liberalize their abortion laws, including recommending that Costa Rica decriminalize abortion in all cases and that El Salvador and Malta expand the criteria under which abortion is permitted.
13. For many years, Ireland resisted external pressure to change its laws, noting that there is no international human right to abortion and that it is a matter for individual countries to determine. When Ireland chose, in its national capacity, to change its laws, it did so without changing its position with regard to international standards. We therefore urge Ireland to extend to its fellow nations greater respect than it was shown in the past by respecting their sovereignty and the ICPD consensus and declining to use international human rights mechanisms to criticize their abortion laws.

## CONCLUDING RECOMMENDATIONS

14. Ireland should reinstate its legal protections for the unborn while continuing to uphold a high standard of health care for women, including maternal health.
15. Ireland should refrain from restricting the rights of health workers to act in accordance with their consciences with regard to the provision of abortion, and not limit the freedom of expression of those who object to abortion on religious or other grounds.
16. To the extent that Ireland changed its abortion laws in its capacity as a sovereign state in accordance with the outcome of a referendum of its citizens, it should not pressure other sovereign states to liberalize their abortion laws through international human rights mechanisms.

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<sup>1</sup> United Nations General Assembly. 1948. Universal Declaration of Human Rights. Paris.

<sup>2</sup> UN General Assembly, Convention on the Rights of the Child. 20 November 1989. United Nations, Treaty Series, vol. 1577, p. 3.

<sup>3</sup> United Nations. 1995. Report of the International Conference on Population and Development, Cairo, 5-13 September 1994. New York: United Nations.

<sup>4</sup> Irish Statute Book. Thirty-sixth Amendment of the Constitution Act 2018. Available at <https://www.irishstatutebook.ie/eli/2018/ca/36/enacted/en/html>.

<sup>5</sup> Irish Statute Book. Eighth Amendment of the Constitution Act. 1983. Available at <https://www.irishstatutebook.ie/eli/1983/ca/8/enacted/en/html>.

<sup>6</sup> Irish Statute Book. Health (Regulation of Termination of Pregnancy) Act 2018. Available at <https://www.irishstatutebook.ie/eli/2018/act/31/enacted/en/print>.

<sup>7</sup> United Nations International Conference on Population and Development. 1994. Programme of Action of the International Conference on Population and Development, Cairo.

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<sup>8</sup> United Nations Fourth World Conference on Women. 1995. Beijing Declaration and Platform for Action (Annex II, Paragraph 29). Beijing.

<sup>9</sup> The Life Institute. The Tragic Death of Savita: The facts about the tragic death of Savita Halappanavar. Available at <https://thelifeinstitute.net/info/the-tragic-death-of-savita>.

<sup>10</sup> World Bank Group, Gender Data Portal: Ireland. Source: WHO, UNICEF, UNFPA, World Bank Group, and UNDESA/Population Division. Trends in maternal mortality estimates 2000 to 2023. Geneva, World Health Organization, 2025. Available at <https://genderdata.worldbank.org/en/economies/ireland>.

<sup>11</sup> San José Articles. 2011. Available at <https://sanjosearticles.com/>.

<sup>12</sup> Dublin Declaration on Maternal Healthcare. September 8, 2012. Available at <https://www.dublindeclaration.com/>.

<sup>13</sup> Address of Ireland to the Special Session of the General Assembly for the Review and Appraisal of the Implementation of the Programme of Action of the International Conference on Population and Development, June 20, 1999. Available at <https://www.unfpa.org/sites/default/files/resource-pdf/ireland.pdf>.