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UGANDA

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 Uganda was one of the original co-sponsors and signatories of the GCD. This report focuses on Uganda'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 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 World Health Organization (WHO), Uganda has seen a 49% reduction in its maternal mortality ratio in the last decade, which stands at 189 deaths per 100,000 births as of 2025.⁴ Among sub-Saharan African countries, which as a region have the highest global maternal deaths, Uganda performs significantly better than many of its neighbors, although its maternal mortality ratio is still well above the global average. Uganda has a high percentage of births that take place in institutional facilities, although the quality of care varies between institutions.⁵ One persistent challenge that Uganda faces is a shortage of healthcare professionals, with densities of doctors and nurses that are far below the standards set by the WHO.⁶
5. Key to Uganda's improvements in maternal health is its management of the HIV/AIDS epidemic, which greatly exacerbates maternal mortality and can threaten child health through maternal transmission without intervention. By prioritizing antiretroviral treatment for pregnant and breastfeeding women living with HIV, and by integrating these services with maternal health services, Uganda has ensured access to critical care,

and as of 2022, Uganda reduced vertical transmission of HIV to infants by 77%.⁷ Prior to Uganda's current maternal health approach, the overall prevalence of HIV in the country was greatly reduced by the "ABC" campaign that prioritized abstinence, fidelity, and condom use as a backstop, as a way to stop viral transmission.⁸ The result of this was a more manageable environment for the targeted interventions yielding positive results today.

6. Uganda is operationalizing the Geneva Consensus Declaration by officially taking up the Protego Women's Optimal Health Framework (WOHF) in partnership with the Institute for Women's Health, led by First Lady Janet Museveni. This framework seeks to prioritize maternal, newborn, child, and adolescent health without promoting abortion, and doing these things with Ugandan funding, reducing dependency on outside donors.
7. Abortion is illegal in Uganda except when performed by a doctor to save the life or health of the mother. The Ugandan Constitution states: "No person has the right to terminate the life of an unborn child except as may be authorised by law." (Article 22, item 2).⁹ The exceptions for life and health are based in court interpretations of common law and English case law precedent. Public opinion in Uganda remains strongly against abortion. They are divided on abortions on the grounds of a threat to life or health (the current standard) but largely oppose abortion for other reasons, while supporting allowing pregnant girls to remain in school and for women to be free to choose marriage and reproduction for themselves.¹⁰
8. Providing reliable and high-quality health care to all Ugandans, including mothers and children, in a manner consistent with the Geneva Consensus Declaration and the Protego framework, would not offend the moral values and religious beliefs held by many Ugandans. Ensuring a sufficient number of health care providers and improving maternal and child health care, including emergency obstetric and neonatal care, requires both financial resources and political will, but would reduce maternal mortality and morbidity as well as improve the health and lives of all Ugandans. Further maternal health gains would be achieved by ensuring adequate nutrition for expectant mothers and improving access to health care in remote and rural settings, including by improving roads. Such a strategy would be in line with Uganda's efforts to achieve its Sustainable Development Goals targets, in keeping with its human rights obligations, and consistent with its affirmation of the GCD 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

9. As mentioned previously, abortion remains highly controversial in Uganda, and public opinion does not favor liberalizing the narrow legal exceptions that allow for abortion.
10. In its previous UPR sessions, Uganda received several recommendations directly relating to abortion: in the second UPR cycle Congo recommended that Uganda revise its legislation to ensure access to abortion for all women, and Norway urged Uganda to increase health providers' ability to offer abortions.¹¹ In the third cycle, Iceland recommended that Uganda "Provide safe abortion services for women and girls."¹² All of these recommendations were marked as "noted" by Uganda.

11. Uganda's rejection of the recommendations from Congo, Norway and Iceland is entirely consistent with its human rights obligations as set out in the binding human rights treaties ratified by Uganda 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 Uganda 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, Uganda has expressed its position that abortion is not an international human right. It is therefore consistent with this position that Uganda 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."¹³
14. Article XIX of the National Objectives and Directive Principles of State Policy of Uganda states that "The family is the natural and basic unit of society and is entitled to protection by society and the State." Article 31 of the Ugandan Constitution further clarifies what is meant by the family: "A man and a woman are entitled to marry only if they are each of the age of eighteen years and above and are entitled at that age a) to found a family; and b) to equal rights at and in marriage, during marriage, and at its dissolution."¹⁴
15. In Ugandan law, there is no recognition of same-sex relationships, and homosexual behavior is illegal. In Uganda'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." With the exception of three recommendations in the first UPR cycle to investigate and prosecute attacks against individuals who identify as LGBT,¹⁵ Uganda has "noted" every recommendation that explicitly mentions homosexuality or gender identity. This consistent position of Uganda 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 Uganda 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.”¹⁶

16. 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.¹⁷ 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

17. 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*.
18. 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.
19. 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.
20. 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

21. We encourage Uganda to continue protecting the natural family and marriage, formed by a husband and a wife, as the natural and fundamental unit of society.
22. Uganda should continue to improve maternal and child health outcomes, including by increased investment in the training and provision of medical professionals and continuing its work to provide antiretroviral treatments to mothers with HIV and

preventing vertical transmission of the virus to their children. Following Uganda's commitments in the Geneva Consensus Declaration and the Protego framework, this does not require the inclusion of abortion.

23. Uganda 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.

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 (WHO), Africa region. "The health of mothers and babies is the foundation of healthy families and communities." April 7, 2025. Available at <https://www.afro.who.int/countries/uganda/news/health-mothers-and-babies-foundation-healthy-families-and-communities>

⁵ Turigye B, Mulogo EM, Ngonzi J, Macharia PM, Acheng M, Christou A, Beňová L. Beyond facility-based births: Is Uganda delivering effective maternal and newborn care? An analysis of the 2022 demographic health survey and 2023 harmonized health facility assessment survey. PLOS Glob Public Health. 2025 Oct 30;5(10):e0004949. doi: 10.1371/journal.pgph.0004949. PMID: 41166336; PMCID: PMC12574829.

⁶ Ahmat A, Okoroafor SC, Kazanga I, Asamani JA, Millogo JJS, Illou MMA, Mwinga K, Nyoni J. The health workforce status in the WHO African Region: findings of a cross-sectional study. BMJ Glob Health. 2022 May;7(Suppl 1):e008317. doi: 10.1136/bmjgh-2021-008317. PMID: 35675966; PMCID: PMC9109011.

⁷ World Health Organization (WHO), Africa region. "Uganda records significant reduction in new HIV infections among newborns." November 30, 2023. Available at <https://www.afro.who.int/photo-story/uganda-records-significant-reduction-new-hiv-infections-among-newborns>

⁸ Okware S, Kinsman J, Onyango S, Opio A, Kaggwa P. Revisiting the ABC strategy: HIV prevention in Uganda in the era of antiretroviral therapy. Postgrad Med J. 2005 Oct;81(960):625-8. doi: 10.1136/pgmj.2005.032425. PMID: 16210457; PMCID: PMC1743366.

⁹ Government of Uganda. Constitution of Uganda, 1995 (rev. 2017.) Available at https://www.constituteproject.org/constitution/Uganda_2017

¹⁰ Sunderland, Sophie and Torsu, Alfred Kwadzo. "AD839: Ugandans support women's autonomy in marriage and reproduction decisions, but strongly oppose abortion." AfroBarometer, August 26, 2024. Available at <https://www.afrobarometer.org/publication/ad839-ugandans-support-womens-autonomy-in-marriage-and-reproduction-decisions-but-strongly-oppose-abortion/>

¹¹ Report of the Working Group on the Universal Periodic Review: Uganda. December 27, 2016. Available at <https://undocs.org/A/HRC/34/10>

¹² Report of the Working Group on the Universal Periodic Review: Uganda. April 4, 2022. Available at <https://undocs.org/A/HRC/50/11>

¹³ Geneva Consensus Declaration, *ibid*.

¹⁴ Government of Uganda. Constitution of Uganda, *ibid*.

¹⁵ <https://undocs.org/A/HRC/19/16>

¹⁶ Civil Society for the Family. The Family Articles. Available at <https://civilsocietyforthefamily.org/>

¹⁷ United Nations. Universal Declaration of Human Rights. 1948. Available at <https://www.un.org/en/about-us/universal-declaration-of-human-rights>