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Introduction

1. Alliance Defending Freedom (ADF) International is a faith-based legal advocacy organisation that protects fundamental freedoms and promotes the inherent dignity of all people.
2. In light of recent proposals that seek to liberalise Zimbabwe's abortion laws, this submission argues such liberalisation is not required by international law and is, moreover, incompatible with the country's human rights obligations to protect the right to life, among other rights.

1. Right to Life

1.1 BACKGROUND

3. The country was recently gripped by debate and international pressure regarding proposed abortion legislation (Medical Services Amendment Bill) that would 'significantly expand access to abortion in Zimbabwe' by amending the currently operative 1977 Termination of Pregnancy Act, which prohibits abortion except in narrow circumstances.¹

1.2 LEGAL FRAMEWORK

4. Among other fundamental rights and freedoms, Section 48(1) of Zimbabwe's Constitution declares that 'every person has the right to life.'² Moreover, Section 48(3) requires that an 'Act of Parliament must protect the lives of unborn children, and that Act must provide that pregnancy may be terminated only in accordance with that law.'³
5. Under Section 86(3), certain fundamental rights and freedoms, such as the right to life, may not be limited, and no person may violate them.⁴ The limited exception for the right to life is to the extent specified in Section 48 (e.g., a law permitting the death penalty may be imposed on a person convicted of murder committed in 'aggravating circumstances' under Section 48(2) or pregnancy termination 'only in accordance with the law' under Section 48(3)).⁵ In other words, even where abortion is permitted, it is treated as a strict exception to the general inviolability of the right to life under domestic law—not as a right.

¹ Claudi Flores (Chair-Rapporteur of the Working Group on discrimination against women and girls), Letter Ref: OL ZWE (January 2026) (citing Medical Services Amendment Bill, 2024 (H.B. 6, 2024)) <<https://spcommreports.ohchr.org/TMResultsBase/DownloadPublicCommunicationFile?gld=30731>> accessed 24 June 2026.

² Constitution of Zimbabwe (as amended up to 20 June 2023) sec. 48(1) <https://www.veritaszim.net/sites/veritas_d/files/Constitution%20Consolidated%20%282023%29.pdf> accessed 12 May 2026.

³ Ibid sec. 48(3).

⁴ Ibid sec. 86(3).

⁵ Ibid sec. 86(3)(a).

6. Related to the right to life in the context of abortion are the freedoms of conscience and parental rights. Section 60 guarantees every person's right to freedom of conscience, including certain conscientious protections to 'practise and propagate and give expression to their thought, opinion, religion, or belief, whether in public or in private', ⁶ as well as the right of parents to determine, 'in accordance with their beliefs, the moral and religious upbringing of their children.'⁷
7. Abortion is regulated in Zimbabwe under the 1977 Termination of Pregnancy Act (hereinafter, the 'Act').⁸ Under the Act, 'termination of pregnancy' is defined as the 'termination of a pregnancy otherwise than with the intention of delivering a live child.'⁹ Termination of pregnancy is prohibited other than in accordance with the Act, with penalties for violation to include a fine or imprisonment for up to five years or both.¹⁰
8. Among other provisions, the Act allows abortion only in three specific circumstances, namely: to save the life of the mother or if continuation of the pregnancy constitutes a 'serious threat' of 'permanent impairment' of her physical health; where there is a 'serious risk' that the child that will be born will suffer from a 'physical or mental defect' of such nature that he will 'permanent be seriously handicapped'; or where there is a 'reasonable' possibility that the foetus is conceived as a result of 'unlawful intercourse.'¹¹
9. Except in emergency circumstances,¹² the Act also requires permission from the superintendent that certain conditions have been met and to certify that the grounds above asserted exist in order to carry out an abortion.¹³ The Act also requires certain information to be forwarded to the Secretary, such as 'any information in regard to that termination of pregnancy which he may specify, whether or not this Act has been complied with.'¹⁴ In cases where the Secretary is of the opinion that an offence has been committed, the Act requires the Secretary to submit a report to the Attorney General or, in the case of violations by any medical practitioner or any other person, a report to the registrar of the Medical and Dental Practitioners Council.¹⁵
10. Finally, the Act has conscientious objection protections. Specifically, it states that 'No person [is] to be required to participate or assist in termination of pregnancy. Notwithstanding any law or agreement to the contrary, no medical practitioner or

⁶ Ibid sec. 60(1)(b).

⁷ Ibid sec. 60(3).

⁸ Zimbabwe: Termination of Pregnancy Act of 1977 (Acts 29/1977, 6/2000, 8/2001, 22/2001) Title 15, Chapter 15:10 <<https://www.refworld.org/legal/legislation/natlegbod/1977/73139>> accessed 12 May 2026.

⁹ Ibid sec. 2(2).

¹⁰ Ibid secs. 3(1)–(2).

¹¹ Ibid sec. 4.

¹² Ibid sec. 7.

¹³ Ibid secs. 5(1)–(6).

¹⁴ Ibid sec. 8.

¹⁵ Ibid sec. 9(b).

nurse or person employed in any other capacity at a designated institution shall be obligated to participate or assist in the termination of pregnancy.’¹⁶

1.3 RECENT DEVELOPMENTS

11. In 2024, the Zimbabwe Ministry of Health and Childcare released new comprehensive abortion guidelines that adopted WHO abortion protocols and allowed nurses and midwives to perform first-trimester abortions.¹⁷
12. In November of that same year, Zimbabwe’s High Court also declared parts of the Termination of Pregnancy Act unconstitutional and ruled that provisions of the Termination of Pregnancy Act violated fundamental rights, particularly the rights of mentally ill women and victims of sexual abuse in mental health institutions.¹⁸
13. Subsequently, on 23 October 2025, the National Assembly of Zimbabwe approved amendments to the Termination of Pregnancy Act of 1977. Proponents lauded the amendments as ‘aligning outdated legislation with the Constitution of Zimbabwe and contemporary public health needs’ in order to promote ‘safe, accessible, and rights-based reproductive health services, particularly for women and girls.’¹⁹
14. Key features of the proposed amendments included allowing abortion on demand for minor girls within the first 12 weeks of pregnancy; expanding terminations up to 20 weeks for adult women under certain conditions, including threats to health or cases of severe foetal abnormalities; eliminating the need for parental or guardian approval for minors.²⁰
15. Proponents initially anticipated that the amendments would progress through the Senate and receive Presidential assent.²¹
16. In response, certain civil society organisations issued a call to action, urging all citizens to actively campaign against the Medical Services Amendment bill, including faith-

¹⁶ Ibid sec. 10.

¹⁷ Emmanuel Nwachukwu, ‘Zimbabwe Christians Push Back Against Proposed Abortion Legalization’ *Christianity Today* (27 January 2026) <<https://www.christianitytoday.com/2026/01/zimbabwe-churches-oppose-abortion-bill/>> (citing MSI United States ‘Zimbabwe Passes Revised Comprehensive Abortion Care Guidelines’ MSI (2024) <<https://www.msiunitedstates.org/zimbabwe-passes-revised-comprehensive-abortion-care-guidelines/>>) accessed 14 May 2026.

¹⁸ Cephas Chimhete, ‘High Court strikes down key parts of Zimbabwe’s abortion law’ *Community Working Group on Health* (17 November 2025) <<https://www.cwgh.co.zw/high-court-strikes-down-key-parts-of-zimbabwes-abortion-law/>> accessed 14 May 2026.

¹⁹ WLSA Communications Team ‘WLSA Celebrates Major Progress in Zimbabwe’s Reproductive Health Laws’ *Women and Law in Southern Africa Zimbabwe* (5 November 2025) <<https://wlsazim.co.zw/2025/11/05/termination-of-pregnancy-act-amendments-2025/>> accessed 14 May 2026.

²⁰ Ibid.

²¹ Ibid.

based actors such as the Catholic Bishops' Conference of Zimbabwe (ZCBC)²² and the Zimbabwe Heads of Christian Denominations (ZHODC).²³

17. Among other concerns, the ZCBC argued that the legislation threatened the sanctity of human life, undermined fundamental values, and argued that the proposals violated a national consensus to protect unborn life established during the nation's constitutional consultation.²⁴
18. In addition to expressing similar concerns, the ZHODC also alleged that the bill would violate parental rights insofar as Section 8D of the bill states that any parent or guardian who prevents a child from receiving health services or withholds consent for such services will contravene the law.²⁵ The denominations further warned that the bill's broad interpretation of 'mental health' could enable late-term and even sex-selective abortions.²⁶
19. Beyond the moral and ethical issues, the ZHODC argued that weakened reporting requirements could increase the risk of abuse, create loopholes for non-compliance, and concealment of illicit activity, and that reduced parental and law enforcement involvement could 'expose women and girls, especially minors, to exploitation by abusers and traffickers who could use abortion services to hide sexual offences.'²⁷
20. On 11 February 2026, the Senate deferred its debate on the bill.²⁸ Under parliamentary procedure, the responsible minister must outline the purpose of the Bill during the Second Reading stage, after which Senators debate its general principles and merits before taking a vote. With the Minister of Health and Child Care, Dr. Douglas Mombeshora, absent, the debate could not proceed.²⁹
21. In addition, during that second reading, the Deputy Minister of Health omitted Clause 11 from the presentation, as most senators indicated they were not prepared to support the provision, which proposed allowing abortions on request up to 20 weeks for adults

²² Ngala Killian Chimtom, 'Zimbabwe bishops oppose changes to abortion law' *Crux* (21 January 2026) <<https://cruxnow.com/church-in-africa/2026/01/zimbabwe-bishops-oppose-changes-to-abortion-law>> accessed 14 May 2026.

²³ Vincent Matinde, 'Zimbabwe Christian leaders voice concern over law that "widens access to abortion"' *Christian Daily International* (8 December 2025) <<https://www.christiandaily.com/news/zimbabwe-christian-leaders-voice-concern-over-law-that-widens-access-to-abortion>> accessed 14 May 2026.

²⁴ Ngala Killian Chimtom (n 25).

²⁵ Vincent Matinde (n 26).

²⁶ Ibid.

²⁷ Ibid.

²⁸ Jude Atemanke, 'Senators in Zimbabwe Postpone Debate on Abortion Bill amid Bishops' Appeal to "protect right to life of unborn children"' *ACI Africa* (11 February 2026) <<https://www.aciafrica.org/news/20135/senators-in-zimbabwe-postpone-debate-on-abortion-bill-amid-bishops-appeal-to-protect-right-to-life-of-unborn-children>> accessed 14 May 2026.

²⁹ Ibid.

and minors without parental consent, removing spousal notification requirements, and permitting a single medical practitioner to authorise the procedure.³⁰

22. The Bill was sent back to the National Assembly, with Speaker of Parliament Jacob Mudenda notifying the House of its return.³¹
23. Finally, on 19 March 2026, certain MPs who backed the abortion bill blamed 'misinformation' and the 'highly polarised' public debate for the removal of Clause 11 from the Medical Services Bill Amendment.³²

1.4 INCOMPATIBILITY WITH INTERNATIONAL HUMAN RIGHTS LAW

24. Zimbabwe must resist efforts to weaken domestic protections for the right to life and other rights affected by the liberalisation of abortion.
25. Zimbabwe is a party to various treaties that enshrine the right to life and related rights, including for the mother, the child, and persons with disabilities.
26. The International Covenant on Civil and Political Rights (ICCPR) Article 6 recognises that every human being has the 'inherent right to life' that must be 'protected by law.'³³ Further, Article 18 protects freedom of thought, conscience, and religion, which would protect medical professionals from being coerced into participating in an abortion.³⁴ The right to life is a non-derogable rights under the Covenant.³⁵
27. Likewise, the International Covenant on Economic, Social and Cultural Rights (ICESCR) Article 10(1) provides that States should accord 'the widest possible protection and assistance' to the family, including for the care and education of dependent children.³⁶ Article 10(2) requires that special protection should be accorded to mothers during a reasonable period 'before and after childbirth.'³⁷

³⁰ Miriam Mangwaya, 'Senate rejects 'smuggled' abortion clause' *NewsDay* (Zimbabwe) (19 February 2026) <<https://www.newsday.co.zw/local-news/article/200051767/senate-rejects-smuggled-abortion-clause>> accessed 7 July 2026.

³¹ Pindula News, 'Abortion Clause Deleted from Medical Services Amendment Bill' *The Zimbabwean* (17 March 2026) <<https://www.thezimbabwean.co/2026/03/abortion-clause-deleted-from-medical-services-amendment-bill/>> accessed 14 May 2026.

³² Lovemore Muzira, 'CCC MP Blames Misinformation For Deletion Of "Abortion Clause" From Medical Services Amendment Bill' *Pindula* (19 March 2026) <<https://news.pindula.co.zw/2026/03/19/ccc-mp-blames-misinformation-for-deletion-of-abortion-clause-from-medical-services-amendment-bill/>> accessed 14 May 2026.

³³ International Convention on Civil and Political Rights (ICCPR) (adopted 16 December 1966, entered into force 23 March 1976) 999 UNTS 171 art 6 <<https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-civil-and-political-rights>>.

³⁴ *Ibid* arts. 23 and 18.

³⁵ *Ibid* art. 4.2.

³⁶ International Convention on Economic, Social and Cultural Rights (ICESCR) (adopted 16 December 1966 by General Assembly resolution 2200A (XXI), entered into force 3 January 1976) 993 UNTS 3 art 10.1 <<https://www.ohchr.org/en/instruments-mechanisms/instruments/international-covenant-economic-social-and-cultural-rights>>.

³⁷ *Ibid* art. 10(2).

Additionally, States are required to provide ‘special measures of protection and assistance’ to children under Article 10(3).³⁸

28. Furthermore, under the Convention on the Rights of the Child (CRC), ‘the child, by reason of his physical and mental immaturity, needs special safeguards and care, including appropriate legal protection, before as well as after birth.’³⁹ The CRC defines a child as a child to mean ‘every human being below the age of eighteen’ unless majority age is attained later under the applicable law.⁴⁰ In other words, it sets a ceiling but not a floor for child protection. States Parties are obligated to ensure ‘to the maximum extent possible the survival and development of the child.’⁴¹
29. In addition, the Convention on the Rights of Persons with Disabilities (CRPD) recognises persons with disabilities’ rights to equality and non-discrimination under Article 5, to life under Article 10, and to the enjoyment of the highest attainable standard of health under Article 25.⁴²
30. Under an ordinary and reasonable reading of those treaties, international law does not recognise a so-called ‘right to abortion’ but rather recognises every human being’s inherent right to life, requires the legal protection of that right, and calls upon States to ensure that no one is ‘arbitrarily’ deprived of his or her life.
31. In addition to refraining from taking prejudicial actions, States also are mandated to take positive steps to promote the life and health of mothers and children. Under the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) Article 4.2, States are permitted to adopt ‘special measures’ aimed at protecting maternity and such measures ‘shall not be considered discriminatory.’⁴³ Relatedly, Article 5(b) requires States to ensure a proper understanding of ‘maternity’ as a ‘social function and the recognition of the ‘common responsibility’ of men and women in the upbringing and development of their children.’⁴⁴ Article 11(2) requires States to prevent discrimination against women on grounds of

³⁸ Ibid art. 10(3).

³⁹ Convention on the Rights of the Child (CRC) (adopted 20 November 1989 by General Assembly resolution 44/25) Preamble <<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-child>>.

⁴⁰ Ibid art. 1.

⁴¹ Ibid art. 6(2).

⁴² Convention on the Rights of Persons with Disabilities (CRPD) (adopted 12 December 2006 by General Assembly resolution 61/106) arts 10, 25, 5, Preamble (x) <<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-rights-persons-disabilities>>.

⁴³ Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) (adopted 18 December 1979 by General Assembly resolution 34/180, entered into force 3 September 1981) 1249 UNTS 13 art 4(2) <<https://www.ohchr.org/en/instruments-mechanisms/instruments/convention-elimination-all-forms-discrimination-against-women>>.

⁴⁴ Ibid art 5(b).

maternity and to introduce 'maternity leave or pay or with comparable social benefits.'⁴⁵

32. Finally, proposals to criminalise parental objection to abortion access for their children derogate from Zimbabwe's obligation to respect the rights of parents as enshrined in numerous international human rights treaties, including but not limited to the ICCPR, the ICESCR, and the CRC. Notably, legally preventing parents from exercising such duties with respect to their children, as the proposed legislation would have done, on such grave matters as access to abortion would violate such rights.

2. Recommendations

33. In light of the aforementioned, ADF International suggests the following recommendations be made to Zimbabwe:

- a. Resist calls to liberalise abortion, and instead implement laws and policies aimed at safely getting mothers and children through pregnancy and childbirth;
- b. Take all necessary measures to reduce recourse to abortion, with a view to eliminating the need for abortion, in accordance with its commitments under the Programme of Action of the International Conference on Population and Development and the Beijing Declaration and Platform for Action;
- c. Guarantee the rights of all children, including those with disabilities, including by ensuring them special safeguards and care, including appropriate legal protection, before as well as after birth, in accordance with its obligations under the Convention on the Rights of the Child and the Convention on the Rights of Persons with Disabilities;
- d. Respect and protect the right of parents and legal guardians to provide appropriate direction and guidance to their children;
- e. Respect and protect the right to conscientious objection of medical professionals; and
- f. Improve health care infrastructure, access to emergency obstetric care, midwife training, and resources devoted to maternal and child health.

⁴⁵ Ibid art 11.2.

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