

DISCRIMINATION AGAINST LGBTI PERSONS IN ZIMBABWE

Zimbabwe's 3rd Universal Periodic Review

January 2022

Progress since the UPR 2nd Cycle

During Zimbabwe's second UPR cycle in 2016, several stakeholder reports noted that LGBTI+ persons still faced stigma and discrimination and violation of their human rights. The state received 11 recommendations related to sexual orientation and gender identity from various states, but all were noted by the government.



Issue at stake:

LGBTI+ persons living in Zimbabwe still face discrimination, rejection, stigma, and violence based on their sexual orientation, gender identity and expression and sex characteristics (SOGIESC). The constitution of Zimbabwe does not include SOGIESC among the prohibited grounds for discrimination. There are no oversight mechanisms to protect LGBTI+ persons who face discrimination. According to a 2018 survey conducted by GALZ, an association of LGBTI+ persons in Zimbabwe, 50% of gay men in Zimbabwe have suffered physical violence and 64% of gay men and 27% of lesbian women have been disowned by their families.

Due to the lack of identity documentation with gender markers that reflect their physical appearance, trans and intersex persons face barriers in accessing banking services, healthcare, covid-19 vaccines, and registering for elections. The lack of access to gender-affirming hormonal replacement therapy and surgeries through public medical facilities has resulted in desperate transgender persons self-medicating through the street market, leaving them at high risk of life-threatening complications such as blood clots, strokes, and pulmonary embolism. Medically unnecessary genital mutilation surgeries on non-consenting intersex minors are still the norm in public hospitals.

Suggested advance questions to ask during the UPR dialogue

1. What mechanisms has Zimbabwe put in place to prevent and monitor stigma, discrimination, and lack of justice for LGBTI+ persons?

2. Does the state of Zimbabwe allow for trans and intersex individuals to change gender markers assigned at birth to align with their gender identity and if so, what are the provisions, processes and frameworks for this process?

3. What provisions has the state put in place to ensure that public medical facilities offer gender affirming services including hormonal therapy and surgeries for the transgender community and end medically unnecessary, non-consensual surgeries on intersex minors?

Suggested recommendations: The State should

1. Broaden the non-discrimination clause to include sexual orientation and gender identity in section 56(3) of the constitution, as grounds upon which one should not be discriminated against to ensure ALL citizens of Zimbabwe are treated equally.

2. Allow the change of gender markers on government issued documentation for trans and intersex persons so that they can fully exercise their citizenry and personal rights through legal provisions.

3. In line with SDG3 and the goal to achieve universal health coverage with no one left behind, ensure that public medical facilities offer gender affirming services including hormonal therapy and surgeries for the transgender community and protect intersex minors from bodily harm, forced surgeries and violation of their bodily integrity.

