



**To the members of GREVIO,**

### **Introduction**

From the Federation of Surviving Victims of Violence, we have answered some of the questions. These questions have a connection to the topic of femicide in which we in the federation have a lot to do. What we generally miss is a focus on technological development, the lack of tracking or deployment of AI tools to use predictive value, for example. Femicide is the most predictable homicide of all homicides and if we manage to deploy a correctly working tracking tool for this, it will have an immediate impact in preventing and preventing femicide.

### **Response to question 1**

On 7 June 2024, the Stop femicide approach plan was presented to the House of Representatives. This announced clear points of improvement to counter gender-related violence. Genital mutilation, abortion, forced marriage, forced sterilisation and forced abortion, in our opinion, have not been addressed to strengthen the position of women.

The Istanbul Convention states that in relations between father and child, an assessment should be made whether this does not interfere with the protection of women. No measures have been proposed for this in the Stop Femicide approach plan that adequately provide this safety.

Several ministries are working together to combat gender-related violence. In the case of sexual violence, there is now coordination by Mariëtte Hamer. With domestic violence, there is only an intention to have this coordination through a designated person or persons. All organisations that have been involved in improving the approach to gender-based domestic violence have indicated a need for this. In addition, the organisations have indicated that a budget on the cost of the proposed approach of the Stop Femicide approach plan is needed for it to be successful. At present, the proposal is to pay the cost from already ongoing projects and funds.

The various ministries have various projects underway to counter gender inequality and gender-related violence. Municipalities and regions are given a high degree of freedom to implement them regionally. As a result, all regions work in a diverse way and the quality of the approach is diverse.

### **Response to question 2**

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### Response to question 3

Dutch legislation regarding inferiority towards women.

Annex concerns discrimination towards women from the Amsterdam student body:

<https://www.om.nl/actueel/nieuws/2023/08/01/uitingen-over-vrouwen-tijdens-diner-amsterdams-studenten-corps-niet-straftbaar>

Appendix concerns discrimination towards women from the Utrecht student body:

<https://www.destentor.nl/binnenland/bangalijst-corps-usc-utrecht-a8fe561c/?referrer=https%3A%2F%2Fwww.google.com%2F>

Annex to the fact sheet Stop femicide:

<https://1drv.ms/b/c/536d7d659ddf84d2/EXTFWW4vZ0BFsgAwARcKfLoBb5jNEmPqfdnBsBFk5OZN2w>

In the Netherlands, we have legislation against discrimination. This is divided within two parts of the law.

Example 1. Art. 137c of the Penal Code. "He who in public, orally or by writing or image, deliberately makes insulting remarks about a group of people because of their race, their religion or philosophy of life, their heterosexual or homosexual orientation or their physical, psychological, or mental disability, shall be punished with imprisonment of up to one year or a fine of the third category."

Example 2. Art. 137d of the Penal Code does state hatred and discrimination on the basis of gender see "He who, in public, orally or in writing or image, incites hatred of or discrimination against people or violent action against person or group of people on account of their race, religion or philosophy of life, their gender, their heterosexual or homosexual orientation or their physical, mental or mental disability, shall be punished with imprisonment of not more than one year or a fine of the third category."

This has had the effect that a choice was made that after women as a group were discriminated against/offended by a group of male students speaking from an Amsterdam Student Corps in 2022, they were not prosecuted because Art. 137c was used of the law by the court.

I had a personal conversation with Law and Legal Protection Minister Weerwind about this. He indicated that the relevant ministry did talk to the board of the University of Amsterdam.

In early 2024, another large-scale expression of inferiority towards women was made by a student fraternity in Utrecht. This was reported to the police by the parents of the women who had been placed on a banga list. The outcome of legal action on this case is not yet known.

In the Stop femicide approach plan, the first pillar states that the Dutch government, wants to promote gender equality. In the conversation I had with Minister Weerwind about this, he indicated that he did not want to amend the aforementioned article 137c of the law.

### Response to question 4

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## **Response to question 5**

The organisations receiving funding from the Ministry of Education, Culture and Science until 2027 to provide financial, and human resources that are appropriate and sustainable to support women's rights organisations are Movisie, LOT and LKP. Movisie can provide education and knowledge which is a very positive addition! But this is not an organisation that can provide human and financial assistance to the organisations that provide urgent help and care to stand up for the rights of LGBTQ and migrant women.

The organisations providing assistance to this target group tend to be regional. This makes the quality of this care vary from region to region. Letting this fall under an organisation like Filomena, which would then become operational nationwide and make the right referrals per region, seems more logical and gives more possibilities to meet GREVIO's request to provide human and financial support from the government to offer the target group the legal protection it needs. The EFCJ (European Family Centre of Justice), in their way of working, has a supporting role in finding and pointing out appropriate justice.

The 'CHANGE FROM INSIDE' project does complement this nicely. This does need a longer term to bring about real change.

## **Response to question 6**

Keeping figures of gender-related violence, the point of improvement is having a census of femicide victims. This has not been carried out in that way as is done in many other European countries. Police computer systems are not adapted to keep track of these counts. As far as we know, this is done manually. It is unclear whether, for example, children who are killed because their mothers experience gender-related violence with a fatal or non-fatal outcome are included in the count.

## **Response to question 7**

Article on law on access after partner death:

<https://www.regioplan.nl/actueel/evaluatie-wet-clausulering-recht-op-contact-omgang-na-partnerdoding/>

The Istanbul Convention states that in contact between father and child, a consideration should be made as to whether this does not interfere with the protection of the woman. No measures have been proposed for this in the Stop Femicide approach plan that adequately provide this safety.

In the implementation of protection against domestic violence, women's shelters run up against the fact that from the safe environment they offer to victims, insecurity arises again because hardly any legal protective measures are taken to protect children and mothers from the continuation of coercive control.

For minor children of femicide victims, access to the perpetrator/father is in some cases mandatorily imposed by the court. Even more often, caregivers of these children are forced to keep the perpetrator of the murder of the other parent informed of the child's well-being.

Research was conducted to evaluate how this is going on at the current time. This study did not include the experiences of the children and caregivers involved. Nor were they surveyed. However, the agencies and legal entities that performed the executive role in these cases were interviewed. This resulted in those involved being able to derive a distorted picture of their own case from the study.

## **Response to question 8**

Article on police reports for femicide:

<https://nos.nl/artikel/2496877-vijf-jaar-na-moord-op-humeyra-stalking-nog-steeds-niet-onder-controle>

The sharing of information between relevant agencies has been set up, however, relatives of femicide victims indicate that reports to police of violence have not been linked, resulting in a failure to intervene and a fatality for victims after many reports of domestic violence.

For tracking the measures taken to stop violence, the Federation of Survivors of Violence Victims has offered to the Ministry of Justice and Security to support in making these timelines by offering assistance in extracting the information from the relatives of femicide victims. This option is still open for consideration.

**Response to question 9**

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**Response to question 10**

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## **Response to question 11**

Police training falls short on domestic violence.

Annex module training domestic violence:

<https://www.politieacademie.nl/opleidingen/overzicht-opleidingen/B002198-004-2024>

Annex fact sheet approach plan Stop femicide pillar three:

<https://1drv.ms/b/c/536d7d659ddf84d2/EXTFVW4vZ0BFsgAwARcKfLoBb5jNEmPqfdnBsBFk5OZN2w>

Within the current basic police training there is no section on how to deal with domestic violence as an officer. However, this can be followed as a two-day separate module provided there is opportunity for participation. In practice, it appears that care and security officers within the police force can hold this position without thorough training in recognising the various forms of domestic violence. They can propose external in-service training on their own initiative to gain the knowledge, but this is not mandatory to hold the position. Therefore, within the Federation of Survivors of Violence Victims, we see many unnecessary fatalities due to femicide because the officers did not have the knowledge needed to recognise the danger.

From the Federation of Survivors of Violence Victims, we consider it important that GREVIO checks that this training is thoroughly expanded with regard to domestic violence as the Dutch Government has indicated it wants to do.

Training in social work and other professions involved with victims of domestic violence falls short in terms of training on recognising and dealing with domestic and sexual violence:

There is no obligation from the government in terms of training on domestic and sexual violence. There are several programmes that request lectures or training days to give students some of this information, but this is at the initiative of the programme and there is no budget for this from the government.

This falls under the third pillar of the Stop Femicide approach plan as an intention but has not yet been realised.

## **Response to question 12**

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## **Response to question 13**

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## **Response to question 14**

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## **Response to question 15**

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## **Response to question 16**

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## **Response to question 17**

In the Netherlands, protection and support services for victims of different forms of violence against women are often offered based on a one-stop-shop approach. This approach provides an integrated service where victims can access various forms of assistance from a single point of contact. Here are some examples:

### **1. Centra Seksueel Geweld (CSG) (Sexual Violence Centre)**

The Sexual Violence Centres are an important example of the one-stop-shop approach. These centres provide multidisciplinary help to victims of sexual violence, including medical care, psychological support, legal assistance and forensic investigations. Victims can come here for a wide range of services within a week of the incident, all in one location ([OHCHR](#)) ([Wilson Center](#)).

### **2. Veilig Thuis (Safe Home)**

Safe Home is the advice and reporting centre for domestic violence and child abuse. This network of regional organisations offers support and advice to victims, perpetrators, bystanders and professionals. Safe Home coordinates assistance and ensures that victims have access to all necessary services through a single point of contact, such as shelter, medical care, and legal assistance ([OHCHR](#)).

### **3. Hulp en Steun bij Genitale Verminking (Help and Support for Genital Mutilation)**

For victims of female genital mutilation, the Netherlands offers specialised medical and psychological care through an integrated approach. This is often coordinated by organisations such as Veilig Thuis, which refer victims to appropriate medical and psychological care providers. Again, the aim is to provide all necessary help through a single point of contact (OHCHR).

In the Netherlands, much of the protection and support services for victims of violence against women are offered through a one-stop-shop approach. This approach aims to provide victims with efficient, integrated and accessible help, which is crucial for their recovery and protection. However, we advocate here for a one-stop-shop approach in the area of violence against women | femicide to promote multi-agency cooperation.

## **Response to question 18**

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## **Response to question 19**

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## **Response to question 20**

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## Response to question 21

In the Netherlands, there are specific procedures for documenting and collecting forensic evidence from victims of domestic violence, sexual violence, including rape, and female genital mutilation:

### Huiselijk Geweld

1. Safe Home: Hotlines where signs of domestic violence are collected and investigated. It often collaborates with police and healthcare professionals to document evidence.
2. Police: Police collect and document evidence, including photographs of injuries and witness statements. They work closely with forensic investigators.

### Seksueel Geweld

1. Sexual Violence Centres (CSG): These centres provide specialised care and forensic investigations to victims of sexual violence. Here, medical examinations are conducted, and DNA evidence and other forensic data are collected within a critical period after the incident
2. Medical Professionals: Doctors and nurses in CSGs are trained to collect evidence, such as semen, hairs, and other biological material. They also document injuries and provide medical and psychological support.

### Vrouwelijke Genitale Verminking (VGV)

1. Healthcare facilities and Safe Home: Medical professionals in hospitals and clinics have protocols for documenting cases of FGM. This includes recording medical findings and reporting to appropriate agencies for further legal action.
2. Medical Care: In addition to recording evidence, healthcare providers provide support and counselling to victims of FGM and work with women and girls' protection organisations.

These procedures are designed to ensure that evidence is collected in a safe and effective manner, with respect for victims and with a view to possible legal prosecution. But the Netherlands Forensic Institute (NFI) also plays an important role in documenting and collecting forensic evidence in cases of domestic and sexual violence:

**1 Forensic Research:** the NFI conducts forensic research on collected material, such as DNA traces, biological samples and other evidence. This is crucial for substantiating criminal cases.

**2 Cooperation with Police and Healthcare:** the NFI works closely with the police, medical professionals and sexual violence centres to provide forensic analysis that supports legal processes.

**3 Expertise and Advice:** the NFI also offers expertise and advice to healthcare providers and legal authorities on the proper collection and preservation of forensic evidence.

This cooperation ensures a comprehensive and precise approach to handling cases of violence against women, with a special focus on ensuring the integrity of the evidence.

In cooperation with all the above agencies, the conversations the FNG is having show that each agency is doing their best in their own way, but the systems do not work well together. A lot of valuable information is lost due to faulty IT systems and the loss of useful and helpful information from relatives and victims.

## Response to question 22

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## Response to question 23

### Closed reception centres for asylum seekers

**1 Multidisciplinary Teams:** Multidisciplinary teams trained to identify and support victims of violence work in asylum centres. These teams include social workers, psychologists, and other healthcare professionals.

**2 Security Measures and Protection:** Measures have been taken to ensure the safety of women in reception centres, such as separate living areas for vulnerable groups and increasing security.

**3 Access to Medical and Psychological Care:** Asylum centres provide access to medical and psychological care for victims of violence, with a special focus on trauma treatment and support.

These measures aim to effectively support and protect victims of violence against women in these specific settings, and to ensure that their safety and protection needs are safeguarded. However, watching the situation in Ter Apel through the media, measures have been taken to improve the identification and care of victims of violence against women, but challenges remain:

### Measures in Ter Apel

**1 Training of Employees:** Employees are trained to recognise signs of violence and support victims.

**2 Protected Spaces:** There are facilities for vulnerable groups, including separate spaces for women and children to ensure their safety.

**3 Access to Care:** Victims have access to medical and psychological care, with a focus on trauma management and support.

### Challenges

**1 Overcrowding:** The situation in Ter Apel is complicated by overcrowding, which increases pressure on facilities and complicates the identification and care of victims.

**2 Limited Resources:** There are limitations in available resources and personnel, which can affect the quality of care.

### **Conclusion**

While efforts are being made to improve the situation, significant challenges remain that limit the effectiveness of the measures in Ter Apel. Continued attention is needed to improve conditions and ensure the safety and protection of victims.

## Response to question 24

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## **Response to question 25**

National Helpline for Domestic and Sexual Violence

### **Filomena Rotterdam:**

<https://centrumhuiselijkgeweldkindermishandelingrotterdamrijnmond.nl/>

### **Blijf Groep Noord Holland Flevoland:**

<https://www.blijfgroep.nl/>

In the Netherlands, the helpline for domestic violence is managed by Veilig Thuis. Since this organization is not positively perceived by a segment of the Dutch population, another national information number would be valuable for people to inquire about their situation and the possibilities for help.

Municipalities sometimes have other numbers that can be called, but victims need some knowledge about how the approach is organized within the municipality to find these on their own. For example, in North Holland, contact can be made with Blijf Groep, in Rotterdam with Filomena, and in other municipalities with various regional agencies. The assistance provided also varies by region, making it difficult for those involved in domestic or sexual violence to navigate and understand what help is available.

A national number has been proposed by the Federation of Survivors of Victims, but it is not included as a proposal in the Stop Femicide action plan among the pillars intended to be addressed.

The way Filomena, besides a phone number for information, also has two weekly walk-in moments where people can get information, help, and referrals according to the EFCJ method would be very beneficial on a national level.

There are some gaps in the law that we regularly encounter at the FNG, such as inheritance law:

A husband kills his wife and then immediately himself. The law states that the inheritance goes to the longest-living. In this case, to the heirs of the murderer, meaning the children and family of the victim/deceased have no rights and must start a civil procedure.

Another example is when there are debts of the deceased and immediate seizure of household items and other belongings occurs, causing the children not only to lose their mother but also all their cherished belongings, which increases trauma.

## Response to question 26

In the Netherlands, there are specialized support services that include child psychologists or other professionals who specialize in supporting children exposed to domestic violence, including violence between parents:

**1 Veilig Thuis:** Besides helping adults, Veilig Thuis also supports children who have witnessed domestic violence. They collaborate with child psychologists to provide emotional and psychological support.

**2 Fier:** Fier offers specialized assistance to children and young people who have experienced domestic violence. They employ professionals specifically trained to work with young victims and witnesses of violence.

**3 GGZ Institutions:** Various mental health care institutions (GGZ) have departments that focus on children and adolescents who have experienced trauma due to domestic violence. Child psychologists and therapists specialized in trauma processing for children work here.

**4 Centres for Youth and Family (CJG):** These centres provide support to families and children, including counseling and therapy for children exposed to domestic violence. They often work in collaboration with schools and other local services to offer an integrated approach.

These services aim to help children process their experiences and provide them with the necessary psychological and emotional support. However, from the FNG and the Stop Femicide plan, we advocate for the criminalization of psychological violence and greater focus on the contributions of survivors and experts with lived experience.

## Response to question 27

Yes, In the Netherlands, there are specialized support services for migrant women and girls, and for women from national or ethnic minorities who are victims of violence:

### 1. Pharos

Pharos provides support and information specifically focused on the health and well-being of migrants and refugees. They offer education about trauma and violence and assist healthcare professionals in recognizing and addressing the specific needs of these groups.

### 2. Veilig Thuis

Although Veilig Thuis is generally accessible, they have expertise in dealing with victims from various backgrounds, including migrant women. They collaborate with cultural mediators to bridge cultural barriers.

### 3. VluchtelingenWerk Nederland

This organization provides guidance to refugees and asylum seekers, including legal support, psychosocial assistance, and access to healthcare. They address the specific challenges migrant women face, such as language barriers and cultural differences.

### 4. Fier

Fier is a national expertise and treatment center specializing in violence in dependent relationships, with a special focus on honor-related violence and human trafficking. They offer shelter and care for victims from diverse cultural backgrounds.

### 5. Centrum Seksueel Geweld

These centers also support migrant women and girls, with attention to cultural sensitivity in their services. They ensure that victims of sexual violence, regardless of their background, receive appropriate support.

### 6. Amref Health Africa:

Amref Health Africa works on programs such as "Mijn Lijf, Mijn Leven" (My Body, My Life), which focuses on empowering women and girls to make informed decisions about their sexual and reproductive health. They address issues like female genital mutilation (FGM) and other forms of gender-based violence, providing education and support to affected communities. <https://www.amref.nl/wat-we-doen/mijn-lijf-mijn-leven>

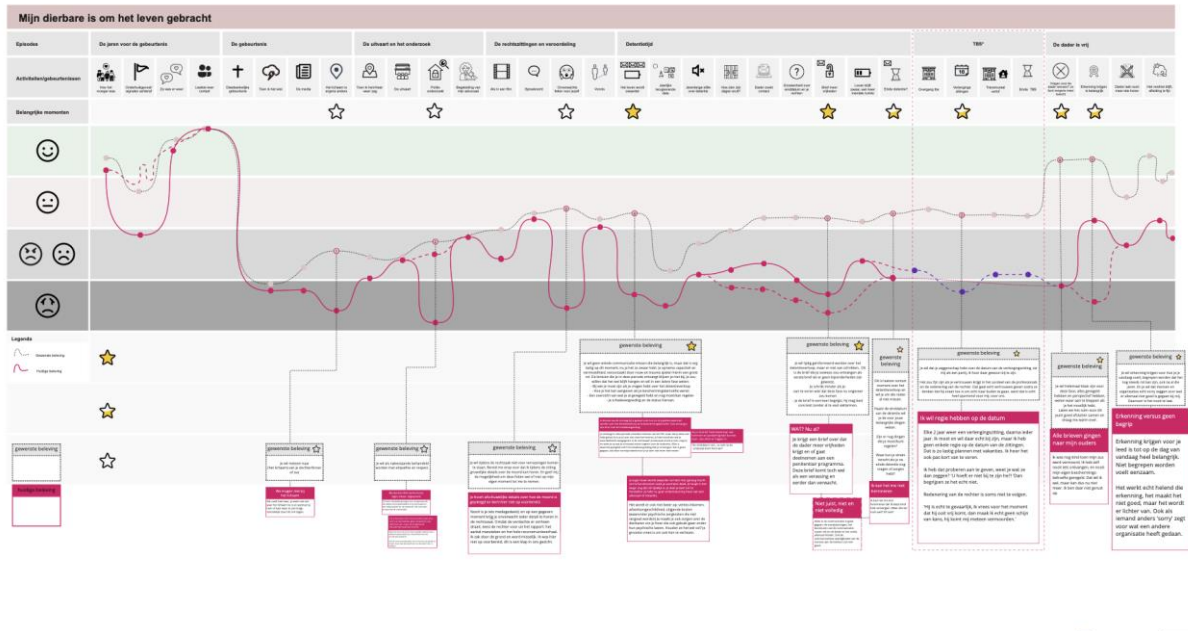
These services often work with cultural mediators and translators to ensure that the assistance is accessible and effective for women and girls from diverse backgrounds.

**Response to questions 28 – 54**

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**Response to question 55**

Through the collaboration between CJIB (Centraal Justitieel Incassobureau) and FNG (Federation of Survivors of Violence Victims), a clear customer journey has been mapped out to make informed decisions and provide commitment to improvement concepts throughout the entire customer journey. The full report can be requested via [postbusklantexpertise@cjib.nl](mailto:postbusklantexpertise@cjib.nl). The relationship with this chain partner can be described as good. Quarterly meetings are established, and survivors are involved in the decision-making process.



Hierboven zie je een overzicht van de periode en de momenten (gemarkeerd met sterren) waarop het CJIB een verschil kan maken. Op basis van deze inzichten ontwikkelt het CJIB nieuwe dienstverlening. We focussen ons vooral op de momenten en aspecten waarop we verschil kunnen maken in de beleving van deze nabestaanden.

## Response to question 56

An alarming trend we are observing is the rise of the Tate movement and the so-called tradwives movement. This reflects a broader trend of changing norms and values, where some groups seek a return to more traditional roles and structures. Social media plays a key role in spreading and popularizing these ideas, which can both foster community building and exacerbate societal polarization.

The "Tate movement" refers to the influence of Andrew Tate, a controversial figure known for his outspoken views on masculinity, success, and social dynamics. Tate, a former kickboxer and self-proclaimed motivational speaker, promotes a lifestyle centered around self-improvement, financial independence, and traditional gender roles. His message, often spread via social media, attracts both admirers and critics. He emphasizes hard work, discipline, and self-confidence but is also criticized for his allegedly sexist and misogynistic statements ([OHCHR](#)).

The "tradwives" movement is a social trend where women choose to embrace traditional gender roles. These women, known as "tradwives" (short for "traditional wives"), promote a lifestyle that centers on the roles of housewife and mother. The movement emphasizes values such as supporting the husband and staying home to care for the children. Many tradwives adhere to conservative values, such as the importance of marriage, family life, and sometimes religious beliefs ([OHCHR](#)) ([Wilson Center](#)). Critici van de tradwives beweging wijzen op de potentiële terugslag tegen feministische vooruitgang. Ze maken zich zorgen dat de beweging traditionele genderrollen romantiseert op een manier die beperkend kan zijn voor vrouwen. Er is ook bezorgdheid over de sociale druk die op vrouwen kan worden uitgeoefend om deze traditionele rollen te omarmen, wat hun vrijheid om andere levenspaden te kiezen kan beperken

Critics of the tradwives movement point to the potential backlash against feminist progress. They are concerned that the movement romanticizes traditional gender roles in a way that can be restrictive for women. There is also concern about the social pressure that may be exerted on women to embrace these traditional roles, which can limit their freedom to choose other life paths ([OHCHR](#)).

The movements of Andrew Tate and the tradwives share some common themes, such as the emphasis on traditional gender roles and a rejection of certain modern social norms. Both movements attract followers who are drawn to a more traditional view of family and society, but they also face criticism for their potentially restrictive and sometimes polarizing views.

## **General Conclusion**

In general, the Federation of Survivors of Violence Victims (FNG) advocates for the following in the Stop Femicide plan: all actions can be summarized into four pillars, all of which are necessary to truly make a difference. Within these pillars, ten priorities have been identified that we will address as a priority in 2024 and 2025. We briefly outline the pillars and priorities below.

### **Pillar 1: Primary Prevention**

Promoting gender equality is essential to prevent violence against women. This requires a broad societal approach. The government aims to raise awareness and strives to change harmful gender norms into healthy and equal ones. Specific target groups will receive extra attention to combat gender inequality.

#### Priorities for 2024 and 2025:

- Promote gender equality between men and women.

### **Pillar 2: Visibility of (Impending) Violence**

It is important to recognize the precursors, the "red flags," of femicide early and accurately, by professionals, (potential) victims, (potential) perpetrators, and bystanders. Creating awareness and providing clear action perspectives are essential here.

#### Priorities for 2024 and 2025:

- Strengthen awareness in society;
- Increase the expertise of professionals;
- Identify the nature of the violence;
- Investigate how safety and risk assessments can be improved.

### **Pillar 3: Interventions and Assistance**

When there are suspicions or signs of intimate terrorism or stalking, an appropriate response and the implementation of suitable interventions are crucial for the protection of victims and the approach to perpetrators, both legally and through support services.

#### Priorities for 2024 and 2025:

- Improve the legal approach to psychological violence;
- Enhance the protection of victims;
- Research better support offerings for perpetrators.

### **Pillar 4: Understanding the Problem and Approach**

It is necessary to continually learn and gather knowledge about femicide and gender-related violence, and actively integrate this knowledge into the approach to domestic violence and child abuse.

#### Priorities for 2024 and 2025:

- Provide a well-founded approach and continuous improvement;
- Explore strengthening national coordination.

On behalf of the Federatie Nabestaanden Geweldslachtoffers and Adviesbureau Stop Femicide,

With kind regards,

Barbara Godwaldt

Lena Oliver-Martens

**Attachment 1**



Rijksoverheid

# STOP FEMICIDE!

Plan van aanpak om dodelijk geweld tegen vrouwen en meisjes door (ex-)partner of familie te voorkomen.

## Femicide =

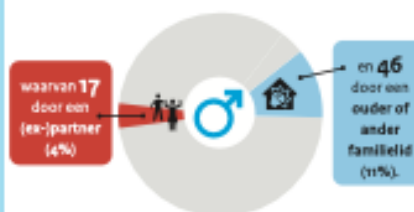
Dodelijk (gendergerelateerd) geweld tegen vrouwen en dodelijk geweld waarvan vrouwen onevenredig vaak het slachtoffer worden.

### Kerncijfers in Nederland

In de periode 2018-2022 werden in totaal 217 meisjes of vrouwen gedood



Ter vergelijking: in dezelfde periode zijn in totaal 416 jongens of mannen gedood



\*Bron: CBS

### Focus plan van aanpak

is voorkomen van femicide vanuit huiselijk geweld en kindermishandeling.

### Fundament van de aanpak

Gebaseerd op de aanpak van huiselijk geweld en kindermishandeling, vanuit een gezamenlijke visie, met extra aandacht voor specifieke deskundigheidsbevordering en samenwerking.

### 4 pijlers:



#### 1 Primaire preventie

Geweld voorkomen door grondoorzaken weg te nemen



#### 2 Zicht op (dreigend) geweld

Risicosituaties snel in beeld hebben en goed inschatten wat nodig is



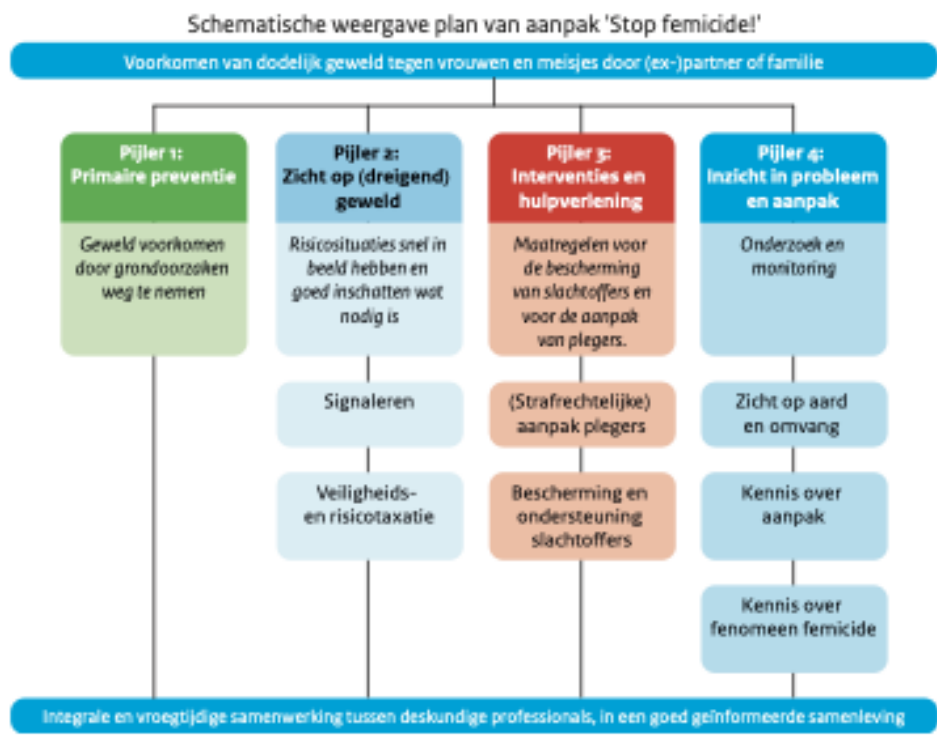
#### 3 Interventies en hulpverlening

Maatregelen voor de bescherming van slachtoffers en voor de aanpak van plegers.



#### 4 Inzicht in probleem en aanpak

Onderzoek en monitoring



**Voor 2024-2025 10 prioriteiten:**

Gelijkheid van mannen en vrouwen bevorderen	Bewustwording in de samenleving versterken	Deskundigheid professionals vergroten	Goede veiligheids- en risicobeoordeling	Betere bescherming van slachtoffers
Strafrechtelijke aanpak van psychisch geweld verbeteren	Passend hulpaanbod voor plegers	Goed onderbouwde aanpak en lerend verbeteren	De aard van het geweld benoemen	Landelijke coördinatie: implementatie, monitoring, toezicht en toetsing van beleid