

Alternative Report

on the Implementation of the
Council of Europe Convention on
Preventing and Combating Violence
Against Women and Domestic
Violence

Istanbul Convention Alliance

October 2025

IMPRINT

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Table of contents

List of Abbreviations	4
Severability clause	5
Preliminary remarks	6
The Istanbul Convention Alliance	6
Explanations of the spelling used in the German-language report	6
Our position: Definition of gender-specific violence	6
Contextualisation of the term “particularly vulnerable groups and individuals”	7
1 Introduction – Protection against violence in Germany: aspiration and reality, where do we stand?	8
Answers to the questions	10
1.1 Emerging trends in violence against women and domestic violence	10
Regarding question 56 (a/b/c/d/e/f)	10
Background	10
Regarding question 56	10
Migrant and refugee women	11
Article 59: Independent residence status for women with marriage-dependent residence	12
Articles 60 and 61: Refugee protection and protection against refoulement	15
2 Not everyone is protected: Structural discrimination of survivors – Specific measures required to implement the IC in Germany (Article 4(3))	18
Germany must act intersectionally!	18
Non-discriminatory implementation of the Convention (Article 4(3)):	19
Status of implementation of the IC for groups that are or may be subject to intersectional discrimination	19
Changes in comprehensive and co-ordinated policies, funding and data collection in the area of violence against women and domestic violence	25
Article 7 – Comprehensive and co-ordinated policies	25
Background	25
Regarding Question 1	25
Regarding question 2	31
Regarding question 3	32
Article 8 – Financial resources	35
Background	35
Regarding question 4	36
Article 11 – data collection and research	41
Background	41
Regarding question 6	42
Regarding question 7	44
Regarding question 8	46

Prevention	48
Article 12 – General obligations	48
Background	48
Regarding question 9 (a/b/c)	49
Article 14 – Education	52
Background	52
Regarding question 10 (a/b/c/d/e)	52
Article 15 – Training of professionals	54
Background	54
Regarding question 11	58
Regarding question 12	59
Article 16 – Preventive intervention and treatment programmes	61
Background	61
Regarding question 13	61
Regarding question 14 (a/b/c/d)	62
Protection and support	66
Article 18 – General obligations	66
Regarding question 15 (a/b/c/d/e)	66
Regarding question 17	67
Article 20 – General support services	69
Background	69
Regarding question 18	70
Regarding question 19	72
Regarding question 20 (a/b/c/d/e/f)	74
Regarding question 21	75
Regarding question 22	77
Regarding question 23	78
Regarding question 24	79
Article 22 – Specialist support services	82
Background	82
Regarding question 25 (a/b/c/d/e/f/g/h)	82
Regarding question 26	84
Regarding question 27	85
Article 25 – Support to victims of sexual violence	87
Background	87
Regarding question 28 (a/b/c) Please indicate if any of the below services are available in your territory:	87
Regarding question 29	88
Regarding question 30	90
Regarding question 31	91
Substantive law	94
Article 31 – Custody, visitation rights and safety	94
Background	94
Regarding question 32 (a/b/c/d/e)	94

Regarding question 33 (a/b/c)	96
Regarding question 34	98
Regarding question 35	99
Regarding question 36	101
Article 48 – Prohibition of mandatory alternative dispute resolution processes or sentencing	103
Background	103
Regarding question 37	103
Regarding question 38	103
Regarding question 39	104
Investigation, prosecution, procedural law and protective measures	106
Articles 49 and 50 – General Obligations and Immediate Response, Prevention and Protection	106
Background	106
Regarding question 40	106
Regarding question 41	106
Regarding question 42 (a/b)	107
Regarding question 43	107
Regarding question 44	107
Regarding question 45	108
Regarding question 46	108
Regarding question 47	108
Article 51 – Risk assessment and risk management	110
Background	110
Regarding question 48 (a/b/c/d/e/f/g/h/i/j)	110
Regarding question 49	111
Regarding question 50	112
Article 52 – Emergency barring orders	116
Background	116
Regarding question 51	116
Regarding question 52	117
Article 53 – Contact and restraining orders (no approaching) and protection orders	119
Background	119
Regarding question 53 (a/b/c)	119
Regarding question 54	120
Article 56 – measures of protection	121
Background	121
Regarding question 55 (a/b/c/d)	121
Appendix	122

List of Abbreviations

AGG	General Equal Treatment Act (Allgemeines Gleichbehandlungsgesetz)
AsylIG	Asylum Act (Asylgesetz)
AufenthG	Residence Act (Aufenthaltsgesetz)
BAG TäHG	Federal Working Group on Domestic Violence Perpetrator Work
BAMF	Federal Office for Migration and Refugees (Bundesamt für Migration und Flüchtlinge)
BGB	Civil Code (Bürgerliches Gesetzbuch)
BGH	Federal Court of Justice (Bundesgerichtshof)
BMBFSFJ	Federal Ministry of Education, Family Affairs, Senior Citizens, Women and Youth (Bundesministerium für Bildung, Familie, Senioren, Frauen und Jugend) (Education added in May 2025)
BMFSFJ	Federal Ministry for Family Affairs, Senior Citizens, Women and Youth (Bundesministerium für Familie, Senioren, Frauen und Jugend) (name of ministry until May 2025)
BIK	German Istanbul Convention Alliance (Bündnis Istanbul-Konvention)
KA	Federal Criminal Police Office (Bundeskriminalamt)
BMF	Federal Ministry of Finance (Bundesfinanzministerium)
BMAS	Federal Ministry of Labour and Social Affairs (Bundesministerium für Arbeit und Soziales)
BMFTR	Federal Ministry of Research, Technology and Space (Bundesministerium für Forschung, Technologie und Raumfahrt)
BMI	Federal Ministry of the Interior, Building and Community (Bundesministerium des Innern, für Bau und Heimat)
BMJV	Federal Ministry of Justice and Consumer Protection (Bundesministerium der Justiz und für Verbraucherschutz)
BMG	Federal Ministry of Health (Bundesministerium für Gesundheit)
BMZ	Federal Ministry for Economic Cooperation and Development (Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung)
BRK	Convention on the Rights of Persons with Disabilities (Behindertenrechtskonvention der UN)
BVerfG	Federal Constitutional Court (Bundesverfassungsgericht)
CRPD	Convention on the Rights of Persons with Disabilities
DIMR	German Institute for Human Rights (Deutsches Institut für Menschenrechte)
djb	German Women Lawyers Association (Deutscher Juristinnenbund)
eAÜ	electronic monitoring
ECHR	European Convention on Human Rights
FamFG	Act on Proceedings in Family Matters and in Matters of non-contentious Jurisdiction (Gesetz über das Verfahren in Familiensachen und in den Angelegenheiten der freiwilligen Gerichtsbarkeit)
FGM	Female genital mutilation
GEAS	Common European Asylum System

GewSchG	Act on Civil Law Protection against Violence and Stalking; in short: Protection against Violence Act
GewHG	Act on a Reliable Support System for Gender-Specific and Domestic Violence; in short: Violence Assistance Act
GFK	Geneva Refugee Convention
GFMK	Conference of Ministers and Senators for Gender Equality and Women's Affairs of the German Federal States
GREVIO	Group of Experts on Action against Violence against Women and Domestic Violence
IC	Istanbul Convention
IMK	Permanent Conference of Interior Ministers and Senators of the Federal States
KPMD-PMK	Criminal Police Reporting Service for Cases of Politically Motivated Crime
LBTIQ*	Lesbian, Bisexual, Trans*, Intersex*, Queer*
NGO	Non-governmental organisation
PKS	Police crime statistics (Polizeiliche Kriminalstatistik)
RTB	Round Table Berlin – Healthcare after domestic and sexual violence
SGB	Social Security Code (Sozialgesetzbuch)
StGB	Criminal Code (Strafgesetzbuch)
StPO	Criminal Procedure Code (Strafprozessordnung)
UN	United Nations
UNHCR	United Nations High Commissioner for Refugees
WHO	World Health Organisation

Severability clause

The statements and demands made within this report are upheld by the NGOs that support this report according to their respective areas of responsibility and objectives. The NGOs involved are united by their intention to produce a joint report from a civil society perspective. Nevertheless, not all participating NGOs can endorse every assessment and recommendation expressed here.

Preliminary remarks

The Istanbul Convention Alliance

The *Istanbul Convention Alliance* is an association of civil society organisations, professional associations and experts from all over Germany. The aim of the alliance is to support and promote the implementation of the Istanbul Convention (IC) in Germany and to raise public awareness of the convention. As an alliance, we are providing a parallel civil society assessment for the first thematic evaluation and assess developments in the implementation of the IC, particularly from the perspective of survivors and practitioners¹.

Due to its current membership structure, the alliance is aware that this alternative report does not fully cover some issues in all their intersectional complexity. The Istanbul Convention Alliance is seeking to recruit additional members in order to adequately represent the experiences of particularly vulnerable groups.

Explanations of the spelling used in the German-language report

The Istanbul Convention Alliance uses the gender asterisk(*) in the middle of words to overcome gender stereotypes and take into account multiple gender identities². In the German version, however, only the masculine form of “perpetrator” is used to make it linguistically clear that the overwhelming majority of perpetrators are male. At the same time, it should be noted here that female perpetrators also use gender-specific violence against women and girls, in particular sexual violence against girls.

Our position: Definition of gender-specific violence³

Gender-specific violence is violence perpetrated against a person on the basis of their gender. The definition of the term “gender” in *Art. 3 lit. c IC* includes, among other things, socially determined roles, behaviours, activities and characteristics, and does not limit itself to a supposedly “biological” sex, but recognises the social component of *gender* identity. This understanding also forms the basis of the work of the Istanbul Convention Alliance.

In the following text, when referring to survivors of violence, the term “women and girls” is predominantly used. Structural gender-specific violence and discrimination do not occur within a binary gender scheme, but also and especially affect groups of people and gender identities that fall outside this scheme, for example trans* women and genderqueer, genderfluid, agender, non-binary and intersex people. These groups of people are therefore equally deserving of protection. The Istanbul Convention Alliance is also committed to this assignment of protection. From the Istanbul Convention Alliance’s perspective, men who experience structural discrimination in the context of an endo-cis-normative society, including trans*, non-binary and intersex men also have a particular need for protection and support.

¹ More information about the Istanbul Convention Alliance can be found on the Istanbul Convention Alliance’s website, [online] <https://www.istanbulconventionalliance.de/>.

² When the terms ‘women’ and ‘girls’ are used without an asterisk (*) at the end, trans women and trans girls are explicitly included.

³ BIK 2024: Definition gender-specific violence of the Istanbul Convention Alliance, in: ebd. 01.2024, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2024/01/Definition-geschlechtsspezifische-Gewalt-des-BIK-final.pdf> (accessed 18.07.2025).

Contextualisation of the term “particularly vulnerable groups and individuals”

The IC explicitly refers to persons in need of protection⁴. Perpetrators often choose these persons as victims because they know that their situation makes them less able to defend themselves or to demand prosecution of the perpetrator and other forms of redress. In German violence research, the term “*particularly vulnerable*” is used to refer to groups of people who are particularly affected by violence and its consequences⁵. At Istanbul Convention Alliance, we contextualise this term as follows: it refers to groups of people who are exposed to an increased risk of violence due to structural and institutional discrimination, e.g. on the basis of origin, “race”⁶, gender (identity), disability, poverty, health status, homelessness or residence status. The convention obliges states to guarantee non-discriminatory protection against violence for all. Vulnerability is not understood as a deficit characteristic, but as a fundamental condition of human existence⁷. It arises from relational dependence and is socially and politically unevenly distributed. This unequal distribution is politically effective because it structures the value of life through economic resources, social recognition and hegemonic discourses, thereby seemingly legitimising inequality. In this context, gender-specific violence is an active violation that exploits this vulnerability. Particular vulnerability results from multiple discrimination and the intersection of power relations⁸. For violence protection, this means expanding the scope for action not through paternalistic victim constructions, but through recognition and reduction of structural vulnerability. An intersectional, social constructivist perspective is therefore central to the analysis and implementation of non-discriminatory violence protection⁹.

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- 4 COE 2011: Explanatory Report to the Council of Europe Convention on preventing and combating violence against women and domestic violence. Council of Europe Treaty Series – No. 210, *ibid.* 11 May 2011, [online] <https://rm.coe.int/ic-and-explanatory-report/16808d24c6> (German Federal Ministry for Women’s Rights, Gender Equality, Family and Youth), Art. 12, 87 (accessed on 26 August 2025).
 - 5 Müller, Ursula & Schröttle, Monika 2012: Gewalt gegen Frauen und Gewalt im Geschlechterverhältnis. In: Günter Albrecht & Axel Groenemeyer (Hrsg.): Handbuch soziale Probleme. 2., überarb. Aufl., Wiesbaden: Springer VS, S. 668–691; Rabe, Heike & Leisering, Britta 2018: Die Istanbul-Konvention. Neue Impulse für die Bekämpfung von geschlechtsspezifischer Gewalt, Berlin: DIMR, S.12.
 - 6 The German term “race” (“Rasse”) is historically burdened by the Enlightenment, “racial research”, National Socialism and “racial hygiene” and is largely avoided in the social and cultural sciences (cf. German Zoological Society/Max Planck Society et al. 2019: Jena Declaration. The concept of race is the result of racism and not its prerequisite, in: *ibid.* n.p., [online] https://www.uni-jena.de/190910_jenaer-erklaerung) or placed in quotation marks in scientific, educational and political contexts to express distance from a biologically discriminatory understanding. For this reason, in line with international discourse, the German version uses the term race in its English spelling. This is to make it clear that it is not a biologically based category, but a historically, socially and politically constructed category of difference that is embedded in power and domination relations. This is a pragmatic decision as long as no adequate German alternative is available.
 - 7 Burghardt, Daniel et al. 2017: Vulnerabilität. Pädagogische Herausforderungen, Stuttgart: Verlag W. Kohlhammer; Butler, Judith 2005: Gefährdetes Leben. Politische Essays, Frankfurt am Main: Suhrkamp Verlag.
 - 8 Crenshaw, Kimberle 1991: Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Colour, in: *Stanford Law Review*, Vol. 43, No. 6, pp. 1241–1299.
 - 9 Sosa, Lorena & Mestre i Mestre, Ruth 2022: Ensuring the Non-Discriminatory Implementation of Measures against Violence against Women and Domestic Violence: Article 4, Paragraph 3, of the Istanbul Convention. Strasbourg: Council of Europe.
This paper examines the scope of the obligations in Article 4, Paragraph 3, and offers an intersectional reading of the Istanbul Convention.

1 Introduction – Protection against violence in Germany: aspiration and reality, where do we stand?

Violence against women and girls is an ubiquitous, structurally entrenched and massive violation of human rights worldwide. In Germany, too, women and girls experience severe sexual violence, physical violence, psychological violence and economic violence on a daily basis from their current or former partners, in their families (of origin), in their immediate social environment or from unknown persons. In 2023, almost one woman per day was killed in Germany¹⁰.

The Istanbul Convention is the first internationally reliable instrument for protection against gender-specific violence and domestic violence. It was ratified in Germany on 1 February 2018. Germany has thus committed itself to preventing all forms of violence against women, protecting all survivors and consistently prosecuting perpetrators. The IC explicitly recognises violence against women as an expression of historically grown power inequalities and structural discrimination – a long-overdue paradigm shift that, however, repeatedly fails in practice due to political resistance and a lack of willingness to implement it.

GREVIO, an independent group of experts, was set up to monitor the implementation of the Convention. In 2022, it published a baseline evaluation report on Germany. Although progress has been made since then, such as the adoption of the Violence Assistance Act and a violence protection strategy by the federal government, systemic change has not yet taken place. In some cases, we are even seeing setbacks. The structural underfunding of the support system, the lack of prevention and insufficient consideration of intersectional discrimination, as well as major gaps in protection for marginalised groups – in particular migrant and refugee women and girls, trans*, inter and non-binary people, women experiencing homelessness, and women and girls with disabilities – show that there is still a long way ahead before the Istanbul Convention is fully implemented in Germany.

This report is structured around the key questions posed by the GREVIO expert commission as part of the first thematic evaluation in 2025¹¹. We analyse developments in politics, legislation, protection and support structures and examine in particular whether the German Federal Government has fulfilled its obligations – both at federal and state level. Our analysis is based on qualitative and quantitative data, findings from public studies and expertise from Istanbul Convention Alliance member organisations, for example from feedback from practice, survivor's reports and expert discussions, as well as from laws and support structures.

The results are clear: in a political climate increasingly dominated by racist, anti-feminist and right-wing populist forces, discrimination-sensitive violence protection and violence prevention are rarely given political priority. Women's shelters, specialist counselling and support centres and girls' shelters are working at full capacity. Barrier-free and non-discriminatory access to the support system is lacking, and the rights of survivors with insecure residence status are being further curtailed. All of this contradicts the spirit and wording of the Istanbul Convention.

Especially in times of social polarisation, increasing hostility towards democracy and anti-feminist attacks, it is essential that the fight against gender-specific violence does not lose focus. **The rise of right-wing populism** in Germany is having a noticeable impact on women's rights, equality policy, protection against violence and the implementation of the Istanbul Convention. In line with the image of women propagated by right-wing extremist and some conservative parties, gender-specific violence is not recognised as a structural, systemic problem and women are reduced to their "natural" role as mothers and wives. Women who do not conform to this image are either disciplined or excluded from protection programmes, such as sex workers, trans women, wom-

10 BKA 2024: Federal Criminal Police Office: Federal Situation Report "Gender-Specific Crimes Against Women 2023" *Geschlechtsspezifisch gegen Frauen gerichtete Straftaten – Bundeslagebild 2023*, in: ebd. 19.11.2024, [online] <https://www.bka.de/SharedDocs/Downloads/DE/Publikationen/JahresberichteUndLagebilder/StraftatenGegenFrauen/StraftatengegenFrauenBLB2023.html> (accessed on 28 July 2025).

11 The report also addresses developments in the implementation of Articles 4, 59 and 60.

en experiencing homelessness and migrant women (*see Chapter 2*). At the same time, right-wing populists often exploit violence against women to serve racist narratives. The noticeable shift to the right in Germany weakens the state's duty to protect, as required by the Istanbul Convention. It jeopardises not only the protection of women from violence, but also a democratic, human rights-based society. Consistent implementation of the IC is therefore also a sign against authoritarian and anti-feminist regression.

We also view with great concern the **increasing normalisation of anti-feminist and right-wing politics in the Federal Government** and the increasing shift to the right in the Federal Government. In an assessment of the coalition agreement, the German Women's Council (Deutscher Frauenrat) denounced the fact that the acute risks posed by anti-feminism and sexism are not clearly identified and are not being countered¹². The CDU/CSU and SPD coalition has already tightened residence and asylum laws. It is now a legal objective of the Residence Act to limit immigration¹³. On 23 July 2025, a legislative amendment came into force that suspends family reunification for persons entitled to subsidiary protection¹⁴. In a directive from the Federal Ministry of the Interior to the Federal Police, authorities are being instructed to carry out rejections at the German borders¹⁵. This contradicts EU law¹⁶. Against this background, we have serious concerns that the planned changes in the area of "migration and asylum" in the new Federal Government's overall strategy will not contribute to the implementation of comprehensive protection against violence (*for the situation of migrant and refugee women, see question 56e*).

The progress already achieved in the previous legislative period, such as the adoption of the Self-Determination Act, is being systematically reviewed by the new governing coalition¹⁷. The terminology of the Istanbul Convention is being called into question: it is supposedly only supposed to refer to biologically female persons¹⁸. This is linked to a climate of hostility towards organisations that advocate a broad definition of gender, such as the Istanbul Convention Alliance and the National Rapporteur Mechanism on gender-based violence at the DIMR, and the discrediting of these organisations with regard to their public funding. This ignores the fact that GREVIO, which is itself responsible for monitoring the implementation of the Convention (Articles 66 to 69 IC), calls on the Federal Government to provide better protection and support for LGBTIQ women¹⁹.

Our recommendations to the Federal Government are clear: human rights must not be relativised, protection standards must not be lowered, and violence must never be considered a private matter. Reliable legal regulations, reliable funding, intersectional perspectives and the actual participation of survivors are needed. The Istanbul Convention is the promise of a life free from gender-specific violence. Our report shows that this promise is currently not being fulfilled in Germany. We demand change – now.

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- 12 German Women's Council 2025: – This much equality is included in the coalition agreement of CDU, CSU and SPD. Evaluation by the German Women's Council., in: ebd. 22.05.2025 [online] https://www.frauenrat.de/wp-content/uploads/2025/05/Deutscher-Frauenrat_Auswertung-Koalitionsvertrag-2025-2029.pdf, S. 9 (accessed on 11 August 2025).
 - 13 Residence Act §1, Abs. 1, Satz 1, Aufenthaltsgesetz vom 25. Februar 2008, BGBl. I S. 162, geändert durch Artikel 1 des Gesetzes vom 17. Juli 2025, BGBl. 2025 I Nr. 173.
 - 14 Bundesregierung 2025: Zusammenleben zukunftsgerichtet gestalten, in: ebd. 23.07.2025, [online] https://www.bundesregierung.de/breg-de/aktuelles/kabinett-familiennachzug-2349196?utm_source=chatgpt.com (accessed on 11 August 2025).
 - 15 Today at the Bundestag 2025: Left Part is demanding an end to the rejection of asylum seekers, in: ebd. 04.06.2025, [online] <https://www.bundestag.de/presse/hib/kurzmeldungen-1084532> (accessed on 11 August 2025).
 - 16 Decisions of the 6th chamber of the administrative court of Berlin, 2. Juni 2025, VG 6 L 191/25, VG 6 L 192/25, 6 L 193/25.
 - 17 CDU/CSU & SPD 2025: Coalition contract between CDU, CSU and SPD, 21. Wahlperiode, in: Koalitionsvertrag 2025 o. A., [online] https://www.koalitionsvertrag2025.de/sites/www.koalitionsvertrag2025.de/files/koav_2025.pdf, S. 104, Zn. 3319 (accessed on 06.08.2025).
 - 18 Louis, Chantal 2025: Trans-Debatte: Was ist eine Frau? In: EMMA 25.07.2025, [online] <https://www.emma.de/artikel/un-sonderberichterstatterin-reem-alsalem-was-ist-eine-frau-341891> (accessed on 19.08.2025).
 - 19 GREVIO 2022: First report of the expert committee on the implementation of the Council of Europe convention (Istanbul convention) in Germany in: BMBFSJF 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, (accessed on 29.08.2025).

Answers to the questions

Due to limited capacity, we were unable to answer all questions. As a result, Chapter 7, *Emerging Trends in Violence against Women and Domestic Violence*, has only been answered briefly and with references – the corresponding answers can be found elsewhere. This makes it all the more important to pay attention to **the introduction and Chapter 2**, as these chapters address current trends and highlight relevant points.

1.1 Emerging trends in violence against women and domestic violence

Regarding question 56 (a/b/c/d/e/f)

Background

The question about emerging trends in violence against women and domestic violence is addressed here at the beginning, although it appears at the end of the questionnaire for the first thematic evaluation round, as it asks for key information on the political context, national case law, allocation of resources, etc., and for references to the relevant articles. We will limit ourselves here to references to the answers to the questions. One exception is sub-question e) on migrant and refugee women, as there are major problems with the implementation of the Istanbul Convention in relation to migrant and refugee women affected by violence.

Regarding question 56

Please provide information on new developments since the adoption of GREVIO's baseline evaluation report on your country concerning:

a. *emerging trends in violence against women and domestic violence, including its digital manifestations (types of perpetration, groups of victims, forms of violence);*

For current trends, such as the consequences of the normalisation of anti-feminist and right-wing norms, *see the introduction and Chapter 2*.

With regard to digital violence, the adoption of a **Digital Protection against Violence Act is planned**, as well as the **reform of cyber criminal law** (*see question 1*).

Types of violence, victim groups and forms of violence are discussed in detail in *Chapter 2 Not everyone is protected* and in the individual articles.

b. *emerging trends in domestic case law related to violence against women;*

c. *emerging trends in the allocation of funding and budgeting by your state authorities;*

In July 2023, with the **reform of criminal sanctions law** in the Criminal Code, “*gender-specific*” and “*directed against someone’s sexual orientation*” motives were explicitly included in *Section 46 of the Criminal Code* to be taken into account in sentencing. The addition is intended to encourage the courts to appropriately punish, for example, femicide, sexual violence against (ex-)partners or hate crimes against women and LGBTIQ persons (*see Article 51, question 50*).

The **Violence Assistance Act (GewHG)** came into force with its publication in the Federal Law Gazette on 27 February 2025. It thus has the status of a binding federal law. The passing of this law

is to be regarded as an important and urgently needed step and is extremely positive – and was achieved in part due to extensive pressure from civil society – as it is, alongside the federal government's Protection against Violence Strategy, an important component of a uniform federal legal framework for the implementation of the Istanbul Convention in Germany (*for more details, see Article 7, Question 1; for financing, see Article 8*).

The **Protection Against Violence Act (GewSchG)** aims to ensure that people are quickly and effectively protected from physical violence, threats, coercion and harassment, especially in their private lives. For example, after threats, stalking or physical assaults, no-contact and restraining orders and sole usage of flat/housing can be applied for at the family court. A reform project is planned for 2025 (*for details, see Article 7, Question 1*).

d. innovative approaches to primary prevention, for example new target audiences and means of communication, public/private partnerships etc.

See chapter on prevention

e. emerging trends related to access to asylum and international protection for women victims of violence against women.

Migrant and refugee women

As already criticised in 2022, migrant and refugee women face considerable legal and practical barriers in accessing specialist support services and women's shelters²⁰. There are still considerable implementation deficits with regard to the obligations of the Istanbul Convention in asylum and migration law (*Art. 59–61 IC*). The demand for unrestricted access to protection and counselling facilities regardless of residence status²¹ has not yet been implemented. With the removal of reservations to *Art. 59 (2) and (3)* in February 2023, Germany is obliged to fully implement this article, which requires a reform of residence law.

Although the individual legal entitlement enshrined in the Violence Assistance Act also covers women with insecure residence status, structural and institutional barriers remain. Residency requirements, marriage-dependent residence rights and residency obligations (e.g. under *Sections 12a, 31(2) of the Residence Act, Sections 56 ff. Asylum Act (Aufenthaltsgesetz)* make it difficult to access women's shelters and women's safe housing²² in case of acute violence, as a waiver must first be applied for from the authorities, which regularly takes several weeks and is associated with excessive requirements for proving the occurrence of violence²³. The legal obligation of social welfare authorities to report persons without residence permit to the immigration authority (*Section 87 (1) and (2) of the Residence Act*) also prevents non-discriminatory access.

With the revised Common European Asylum System (**GEAS**) coming into force in mid-2026, the possibilities for tightening residence requirements and drastically restricting the radius of movement of asylum seekers will be expanded. The Federal Government is currently preparing the implementation of the legislation in Germany. Even leaving one's accommodation without permission can be punished by withdrawal of social benefits. It remains unclear how women affected by violence will be able to receive rapid and effective help in an emergency under these conditions²⁴.

20 *ibid.*, Rn. 161 ff.; Rn. 173 ff. (accessed on 28.07.2025).

21 *Ibid.*, para. 177.

22 abbreviated as women shelter

23 Baba, Ludger et al. 2024: Evaluation der Wohnsitzregelung nach § 12a AufenthG, in: BAMF o. A., [online] https://www.bamf.de/SharedDocs/Anlagen/DE/Forschung/Beitragsreihe/beitrag-band-13-evaluation-wohnsitzregelung.pdf?__blob=publicationFile&v=7, S. 134 ff (accessed on 28.07.2025). (accessed on 28 July 2025).

24 During the association hearing, numerous NGOs expressed criticism, for example Pro Asyl 2025: Stellungnahme zum Entwurf eines Gesetzes zur Anpassung des nationalen Rechts an die Reform des Gemeinsamen Europäischen Asylsystems, in: ebd. 08.07.2025, [online] https://www.proasyl.de/wp-content/uploads/2025-07-08_PRO-ASYL-Stellungnahme-GEAS-Umsetzungsgesetz.pdf (accessed on 07.07.2025).

Article 59: Independent residence status for women with marriage-dependent residence

The current provision in *Section 31(2)* of the *Residence Act (AufenthG)* is still not sufficient for the full implementation of *Article 59(1)* of the Istanbul Convention, which guarantees women affected by violence an independent residence status in the event of separation from their violent partner: The hardship provision does not apply in all circumstances, requires a close causal link between violence and separation, does not recognise all forms of violence covered by the IC and imposes high standards of proof²⁵. The granting of an independent residence permit requires a marriage duration of at least three years in the Federal Republic of Germany. In cases of particular hardship, where it is unreasonable to expect the marriage to continue, for example in cases of domestic violence, an independent right of residence may be granted before the end of the marriage. However, the interpretation by courts and authorities is usually restrictive and inconsistent, as domestic violence and its forms are not uniformly defined within Germany²⁶. Medical certificates documenting injuries or a police report filed by the survivor are often required as evidence. Authorities and courts reject cases of hardship if the decision to separate was made by the perpetrator or if the woman did not separate immediately after experiencing violence²⁷. In most cases, living conditions, socio-economic factors or the effects of violence are not sufficiently taken into account. The same applies to the requirements for declaring and proving the use of violence. It should be clarified in law that, in deviation from *Section 82 of the Residence Act (AufenthG)*, only a declaration of the use of violence is required. This should apply to all cases of domestic violence.

An independent residence permit for affected persons is only possible if the spouse has a permanent or renewable residence permit (*Section 31 (1) sentence 2 of the Residence Act (AufenthG)*). This regulation restricts the right to a residence permit and does not cover all survivors²⁸. The duration of the marriage regulation creates dependencies that perpetrators exploit to prevent survivors from separating or seeking help²⁹. In addition, this regulation represents a blatant inequality between women with and without secure residence status, as well as an anachronistic, patriarchal understanding of marriage and couple relationships. The removal of the minimum duration of marriage requirement can meet the purposes and provisions of the IC³⁰.

Germany has not extended its reservations to *Article 59(2) and (3)*. Therefore the Convention applies from 2023 without reservations. According to *paragraph 2*, survivors may not be deported together with their violent partner without their residence rights being examined first. *Article 59(2)*

25 djb 2023: Reform des § 31 AufenthG, in: ebd. 17.07.2023, [online] <https://www.djb.de/presse/pressemitteilungen/detail/st23-20> (accessed on 26.06.2025).

26 djb 2024: Gewaltschutz von Frauen im Aufenthaltsgesetz, in: ebd. 04.06.2024, [online] <https://www.djb.de/presse/pressemitteilungen/detail/st24-20> (accessed on 26.06.2025).

27 Federal Foundation for Gender Equality 2024: Gender equality in residence status, Berlin: ibid., p. 68ff.

28 This regulation was already criticised in the GREVIO report 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany, in: BMBFSJF 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9ba-d150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, Ziff. 351 (accessed on 28.07.2025).

29 Middelhaue, Helene 2023: Aufenthaltstitel für Betroffene häuslicher Gewalt. Umsetzungsempfehlungen zu Artikel 59 Absatz 1-3 Istanbul-Konvention, Berlin: DIMR, S. 30; djb 2023: Reform des § 31 AufenthG, in: ebd. 17.07.2023, [online] <https://www.djb.de/presse/pressemitteilungen/detail/st23-20> (accessed on 26.06.2025).

30 BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf>, S. 176f (accessed on 30.06.2025); DaMigra e. V. 2021: Grevio-Schattenbericht zur Umsetzung der Istanbul-Konvention in Deutschland., ebd. o. A., [online] https://www.damigra.de/wp-content/uploads/DaMigra_GREVIO-Schattenbericht_2021.pdf, S. 21-29 (accessed on 30.06.2025); djb 2023: Reform des § 31 AufenthG, in: ebd. 17.07.2023, [online] <https://www.djb.de/presse/pressemitteilungen/detail/st23-20> (accessed on 26.06.2025).

provides procedural safeguards for survivors. In view of the group of persons covered by *Section 31(2)*, further regulation is needed to close gaps in protection.

Article 59(3) regulates two circumstances in which a right of residence applies: on the basis of the personal situation of the survivor (*3a*) and on the basis of their cooperation in the investigation or criminal proceedings (*3b*). In these cases, a renewable residence permit must be issued to the persons concerned. This obligation has not yet been implemented in German law³¹. The provisions on refugee protection, subsidiary protection and bans on deportation do not reflect the requirements of *Article 59(3)(a)* of the Convention. The criteria for assessing this status relate primarily to dangers in the country of origin and not to the situation in the host country, making it difficult to assess the personal situation of women affected by domestic violence in Germany.

Article 59(3)(b) of the IC is also not reflected in German law. *Section 60a(2) sentence 2 of the Residence Act (AufenthG)* only provides that a temporary suspension of deportation will be granted in cases of cooperation in criminal proceedings for a crime. This merely represents a suspension of deportation, however, and does not constitute a residence permit, significantly restricting access to the labour market, social benefits and the healthcare system. Another major hurdle is the residency requirement, which in cases of gender-specific violence prevents access to protection and support outside the local area³². Furthermore, the restriction to criminal proceedings for crimes prevents the implementation of *Art. 59 (3) (b)*, as many domestic violence offences (e.g. simple and negligent bodily harm pursuant to *Section 223 and Section 229 of the German Criminal Code (StGB)*) do not constitute ex officio crimes. The option to return after a forced marriage (*Section 37(2) of the Residence Act (AufenthG)*, *Article 59(4) IC*) is also inadequately regulated with a short period of three months if survivors cannot find support services abroad³³.

As outlined above, legal regulations are required to fully implement *Article 59*. We refer to the recommendations of the National Rapporteur Mechanism on gender-based violence and the djb and call for the **full implementation of Article 59 IC**³⁴.

Recommendations

We recommend

- » in order to provide comprehensive protection for survivors in precarious residence rights situations, humanitarian residence permits must be introduced for survivors whose residence is necessary due to their personal situation (*paragraph 3a*) or their cooperation in police investigations or criminal proceedings (*paragraph 3b*) against perpetrators³⁵.
- » the concept of violence should be standardized in the *Residence Act* in accordance with *Art. 3 IC*, taking into account social and structural factors of domestic violence.

31 Middelhaue, Helene 2023: Aufenthaltstitel für Betroffene häuslicher Gewalt. Umsetzungsempfehlungen zu Artikel 59 Absatz 1–3 Istanbul-Konvention, Berlin: DIMR, S. 29.

32 The National Rapporteur Mechanism on gender-based violence has issued a detailed explanation of the implementation of Article 59, which also highlights gaps in protection: DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S.303–307.

33 GREVIO 2022: First report of the expert committee on the implementation of the Council of Europe convention (Istanbul convention) in Germany, in: BMBFSJF 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, Ziff 349, 350 (accessed on 28.07.2025).

34 For recommendations, see: <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, Ziff 349, 350 (accessed on 28.07.2025).

35 Middelhaue, Helene 2023: Aufenthaltstitel für Betroffene von häuslicher Gewalt. Umsetzungsempfehlungen zu Artikel 59 Absatz 1–3 Istanbul-Konvention, in: DIMR 08.2023, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Aufenthaltstitel_fuer_Betroffene_haueslicher_Gewalt.pdf, S. 13 ff (accessed on 26.06.2025); djb 2024: Gewaltschutz von Frauen im Aufenthaltsgesetz, in: ebd. 04.06.2024, [online] <https://www.djb.de/presse/stellungnahmen/detail/st24-20> (accessed on 26.06.2025).

- » in order to meet the requirements of *Article 59(1) IC*, a reform of *Section 31* of the *Residence Act* is necessary. The minimum duration of marriage as a prerequisite for an independent residence status should be removed and an automatic extension of the residence permit during ongoing proceedings should be guaranteed for victims of violence³⁶.
- » the evidence requirements for fulfilling the conditions set out in *Section 31(2)* should be low-threshold and included in the application notes to *the Residence Act*.
- » the personal scope of protection of the hardship clause in *Section 31* of the *Residence Act* should be extended to all persons affected in marriage-dependent residence situations.

³⁶ The djb had already called for at least a reduction in the length of marriage in 2023. djb (2023): Reform des § 31 AufenthG, in: Stellungnahmen [online] <https://www.djb.de/presse/stellungnahmen/detail/st23-20> (accessed on 10.09.2025).

Articles 60 and 61: Refugee protection and protection against refoulement

The recognition of gender-specific violence as a reason for flight (*Article 60(1) IC*) continues to be hampered by restrictive recognition practices. The Convention obliges all Member States to recognise violence against women on the basis of their gender, “*which is to be understood as a violation of human rights and a form of discrimination against women under Article 3 of this Convention*”, as a reason for persecution (in accordance with *Article 1A(2) of the GFK*)³⁷. According to *Article 60(2)*, the Convention requires a gender-sensitive interpretation of the reasons for flight. According to *Article 61*, survivors of gender-specific violence must not be returned to a country where their lives would be in danger or where they could be subjected to inhuman or degrading treatment or punishment. With *Article 60(1) and (2) and Article 61(1)*, the IC expressly confirms and reinforces the protective provisions of the *GFK* and *Article 3* of the *ECHR*.

The legal provision in *Section 3b(1)(4) of the Asylum Act (AsylG)* allows gender-specific persecution (based on membership of a particular social group) to be recognised as a reason for fleeing if the persecution is solely related to the person's gender or gender identity. Nevertheless, gender-specific violence is often not recognised as such, or gender alone is considered insufficient for membership of a social group³⁸. According to the Asylum Procedure Service Instructions (*DA-Asyl*), the BAMF does not recognise women as a “social group” within the meaning of *Section 3b (1) No. 4 of the Asylum Act*, as they are not perceived as “different” due to the size of the group³⁹. The inconsistent and restrictive interpretation of this provision by authorities and courts prevents the granting of refugee protection to applicants and contradicts the case law of the ECJ, which – with reference to the IC – has expressly stated that women as a whole can constitute a particular social group if it is established that they are exposed to physical or psychological violence, including sexual violence and domestic violence, in their country of origin on the basis of their gender⁴⁰.

The new provisions of the Common European Asylum System (*GEAS*) will come into force in mid-2026. The adaptation laws in Germany are currently in the process of being voted on by the German parliament. With regard to **the GEAS reform**, there is particular concern about multiple violations of *Article 61 of the IC* – e.g. the prohibition under international law of returning survivors of gender-specific violence to countries where their lives are threatened or where they face inhuman or degrading violence. In future, it will be possible for EU member states to deport people without examining their asylum claims to so-called “*safe third countries*” where compliance with the *GFK* and the *ECHR* is not fully guaranteed. This means that the survivor may also face chain deportation to their country of origin or persecution⁴¹.

37 EuGH, verdict Urteil vom 04.10.2024 – C-608/22, Rn. 35.

38 djb 2024: Flüchtlingsanerkennung aufgrund geschlechtsspezifischer Verfolgung, in: ebd. 28.11.2024, [online] https://www.djb.de/presse/pressemitteilungen/detail/st24-42#_ftn14 (accessed on 28.07.2025); vgl. VG Hamburg, Urteil vom 02.03.2023 – 1 A 3289/21, asyl.net, S. 19 f.; VG Potsdam, Urteil vom 28.04.2022 – 16 K 2743/17.A, S. 4–7; OVG Bremen, Beschluss vom 24.01.2023 – 1 LA 200/21, asyl.net, Rn. 21.

39 The first periodic report from the reporting center for gender-specific violence gives a detailed state for implementation of 60 Abs. 2 und 3: DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 303–313; Ronte, Lena 2023: Frauen

40 EuGH, Urteil vom 16.01.2024 – C – 621/21, Rn. 57; EuGH, Urteil vom 04.10.2024 – C-608/22, C-609/22. Here, we would like to point out that, several VGs in Germany consider the case law of EuGH now, they thus establish the plaintiff's membership in a particular social group, for example VG Köln, Urteil vom 19.05.2025, 22 K 6147/22.A; VG Regensburg, Urteil vom 22.04.2025, RN 2 K 24.30262; VG Würzburg, Urteil vom 02.07.2024, W 3 K 22.30534.

41 Pro Asyl 2025: Stellungnahme zum Entwurf eines Gesetzes zur Anpassung des nationalen Rechts an die Reform des Gemeinsamen Europäischen Asylsystems, in: ebd. 08.07.2025, [online] https://www.proasyl.de/wp-content/uploads/2025-07-08_PRO-ASYL-Stellungnahme-GEAS-Umsetzungsgesetz.pdf (accessed on 28.07.2025); DIMR 2025: Stellungnahme zum Entwurf eines Gesetzes zur Anpassung des nationalen Rechts an die Reform des Gemeinsamen Europäischen Asylsystems, in: ebd. 07.2025, [online] <https://www.institut-fuer-menschenrechte.de/publikationen/detail/stellungnahme-geas-anpassungsgesetz-2025> (accessed on 10.09.2025).

The current practice is already incompatible with *Articles 60 and 61* of the *IC*. Since taking office, the CDU/CSU and SPD coalition government has been turning away asylum seekers at the federal borders without further concern for their welfare or a regulated asylum procedure⁴². In doing so, the government is ignoring the European *Dublin Regulation* (soon to be replaced by the *AMM Regulation, Asylum and Migration Management Regulation*) and current case law in a questionable and unlawful manner⁴³. Since other European countries have used and are increasingly using the same mechanisms, there is no guarantee that women and girls affected by violence and in need of protection will receive admission at all and be given access to medical and psychosocial care and support, let alone a gender-sensitive asylum procedure. In order to comply with European asylum law and the prohibition of refoulement under the *ECHR* and *Art. 61 IC*, Germany would have to carry out a case-by-case assessment. However, this does not happen in practice. The border police immediately reject the survivors at the border and have neither the substantive competence nor the skills and necessary infrastructure (such as language mediators) to carry out gender-sensitive protection or asylum assessments.

This also violates *Article 60(3)* of the *IC*, which requires gender-sensitive asylum and admission procedures. Contrary to this obligation, there has been a lack of nationally compulsory guidelines for identifying survivors of gender-specific violence and comprehensive violence protection concepts to prevent gender-specific violence in collective accommodation facilities for years⁴⁴. The identification of vulnerable persons – and, among them, women affected by violence – in the *Länder's* accommodation facilities is currently limited to a visual inspection and sometimes a brief interview. This is evidently insufficient.

Overall, national law lacks compulsory guidelines on gender-sensitive asylum and admission procedures.

In admission procedures, no significant progress has been made in recent years in terms of protection against violence and access to support services, taking into account that accommodation is regulated by the respective *Länder*s. There are fears, however, that the *GEAS* reform will drastically worsen the admission conditions for women affected by violence⁴⁵. In future, the initial screening and asylum procedure will take place for many in detention-like border accommodation facilities, where gender-sensitive admission and assessment are virtually impossible. The time pressure in the border procedures, which are limited to a few weeks, is also likely to contribute to women who have suffered gender-specific violence (especially trans* women) hardly receiving the necessary security, quiet, counselling and assistance to disclose their experiences and reasons for flight and to assert them effectively. The possibility of deporting asylum seekers to countries declared as “safe third countries” without examining the substance of their asylum claims means that in future there will be no guarantee that women who have been persecuted on the basis of their gender will even have the opportunity to attend an asylum hearing in Europe. This is a flagrant breach of Germany's and the EU's human rights responsibility to protect women from violence. In addition, last year saw the entry into force of the EU Directive on violence against women (*Directive 2014/1385 of 14 May 2024 on combating violence against women and domestic violence*), which in *Article 33(3)* obliges Member States to ensure that survivors are provided with gender-segregated housing in accommodation and detention centres during return procedures upon request. According to *Article 33(4)*, a reporting procedure for incidents of violence must be established in

42 DIMR 2025: Zurückweisungen von Asylsuchenden an den Grenzen: Eine menschenrechtliche Bewertung der aktuellen Debatte, in: ebd. 06.2025, [online] <https://www.institut-fuer-menschenrechte.de/publikationen/detail/zurueckweisungen-von-asylsuchenden-an-den-grenzen> (accessed on 28.08.2025).

43 ibid.; Beschlüsse des VG Berlin vom 02.06.2025, Az. 6 L 192/25; 6 L 191/25; 6 L 192/25.

44 GREVIO 2022: First report of the expert committee on the implementation of the Council of Europe convention (Istanbul convention) in Germany, in: BMBFSJF 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, Rn. 362, 369 (accessed on 18. 07.2025); DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 317.

45 Çelebi, Diiken, Braun, Rebekka; Conrad, Catharina 2025: (Schl)echter Schutz vulnerabler Gruppen? Geschlechtsspezifische Bedarfe und die GEAS-Reform, in: Verfassungsblog 11.06.2025, [online] <https://verfassungsblog.de/geas-schutz-vulnerabler-gruppen/> (accessed on 17.07.2025).

these facilities. These requirements were not taken into account in the current draft bill (by ministry staff) for the GEAS amendment.

Although EU law provides for the identification of special protection needs through screening, there is a lack of specific provisions to ensure that the needs of those affected are met. Furthermore, persons in particular need of protection are not exempt from de facto detention, border asylum procedures or third-country deportation regulations.

At the end of October 2024, a regulation (§ 1 (4) of the *Asylum Seekers Benefits Act*) came into force in Germany, according to which persons seeking protection who are to be examined for asylum by another European state or who are already recognised as in need of protection there are to be deprived of all social benefits in Germany. Since then, in a first in the history of the Federal Republic of Germany, more and more people seeking protection have been put out on the street by the authorities without any support. The social courts can naturally only compensate to a limited extent for the outbreak of such an obviously unconstitutional practice by the authorities. In February 2025, PRO ASYL documented a case in which the refusal to provide benefits affected a woman who was mentally ill as a result of persecution and severe experiences of violence⁴⁶.

Despite all social court rulings and the requirements of the constitution and EU law⁴⁷, the Federal Government is currently planning further tightening of the rules as well as possibilities for withdrawing benefits as part of the GEAS amendment. This approach is contrary to the requirements of the IC and even the basics of rudimentary protection against violence, as the survivor is completely deprived of rights, facing hunger and homelessness as a result of official decisions.

Recommendations

We recommend

- » the interpretation of *Section 3b (1) No. 4* of the *Asylum Act* should be corrected in accordance with ECJ case law: both women from a specific country as a whole and specific groups of women should be considered a “particular social group”⁴⁸. It is advisable to clarify in *3b (1) No. 4* of the *Asylum Act* that membership of a social group must also be recognised if the persecution is based solely on gender or gender identity, regardless of the characteristic of social “otherness”⁴⁹. *Section 3c* of the *Asylum Act* should clarify that violence by non-state actors can also constitute relevant persecution if state protection is not guaranteed⁵⁰. The examination of internal flight alternatives under *Section 3e* of the *Asylum Act* must systematically take into account gender-specific risks and the best interests of children⁵¹.
- » in order to consistently implement the obligations under *Article 60(1)* of the *IC*, a legal clarification should explicitly define gender-specific violence as an act of persecution within the meaning of *Section 3a(2)(6)* of the *Asylum Act*⁵².

46 Pro Asyl 2025: Obdachlos per Gesetz? Junge Geflüchtete wird aus Unterkunft geworfen, in: ebd. 26.2.2025, [online] <https://www.proasyl.de/news/obdachlos-per-gesetz-junge-gefluechtete-wird-aus-unterkunft-geworfen/> (accessed on 28.07.2025).

47 GGUA 2025: 44 Social courts declare benefit exclusions in Dublin cases to be unlawful, in: ebd. 18.6.2025, [online] <https://www.ggua.de/aktuelles/einzelansicht/44-sozialgerichte-erklaeren-leistungsausschluesse-in-dublin-faellen-fuer-rechtswidrig/> (accessed on 28.07.2025).

48 EuGH, 2024: Urteil vom 16.01.2024 – C-621/21 – WS gegen Bulgarien, in: Asylmagazin 3/2024, S.117 ff. [online] <https://www.asyl.net/rsdb/m32111> (accessed on 28.08.2025).

49 djb 2025: Flüchtlingsanerkennung aufgrund geschlechtsspezifischer Verfolgung, in: ebd. 28.11.2024, [online] <https://www.djb.de/presse/stellungnahmen/detail/st24-42> (accessed on 28.07.2025).

50 ibid.

51 ibid.

52 For specific wording suggestions, see: djb 2025: Flüchtlingsanerkennung aufgrund geschlechtsspezifischer Verfolgung, in: ebd. 28.11.2024, [online] <https://www.djb.de/presse/stellungnahmen/detail/st24-42> (accessed on 28.07.2025).

- » in order to implement *Article 60(3)*, compulsory guidelines for the identification of survivors (especially those with special protection needs) are required, as well as nationwide violence protection concepts for all accommodation facilities.
- » compulsory and unified measures for the prevention of and protection from domestic and gender-specific violence are needed in refugee accommodation facilities.
- » the *Asylum Act (Section 25)* should be supplemented by the legal right to an interview by specialised staff for applicants affected by violence during the asylum procedure .
- » in the interests of violence protection, Germany should refrain from establishing separate, prison-like accommodation for Dublin cases and refugees recognised in other countries (*Section 44 Asylum Act-E*), as well as restrictive regulations on residence requirements in refugee accommodation (*Section 47a Asylum Act-E and Section 68 Asylum Act-E*) and withdrawal or cancellation of social benefits.

It is not only migrant and refugee women who are affected by structural discrimination. Chapter 2 refers to the non-discriminatory implementation of the Convention for other groups that are or may be exposed to intersectional discrimination.

2 Not everyone is protected: Structural discrimination of survivors – Specific measures required to implement the IC in Germany (Article 4(3))

From the Istanbul Convention Alliance's point of view, when assessing the implementation of the Istanbul Convention in Germany, it is necessary to point out specific problems and areas where action is needed to ensure the non-discriminatory implementation of the Convention (*Article 4, paragraph 3*), even if these are not explicitly asked about in the GREVIO questionnaire.

Germany must act intersectionally!

The Istanbul Convention primarily protects women and girls, but also recognises that all people can be victims of domestic and gender-specific violence and need protection as a result. The term "domestic violence" is based on a broader concept that is not limited to the home. The Convention states that certain groups may be exposed to multiple discrimination and thus to an increased risk of violence. In order to ensure comprehensive, non-discriminatory protection, an intersectional perspective on protection against violence is essential.

Intersectionality describes how different forms of discrimination (e.g. racism, sexism, classism, heteronormativity, etc.) can interact and reinforce each other. An intersectional perspective helps to understand how power relations at different levels are intertwined and influence each other. Intersectionality is an approach and tool for not only initiating change in theory, but also implementing it in practice⁵³. Beyond a deeper understanding, this enables the development of concrete strategies for action. This is precisely why it is particularly suitable for promoting non-discriminatory protection for all persons affected by violence. This is not about looking at individual categories in isolation, such as "woman", "black", "poor", "minor", "homeless", "mentally ill" or "refugee", but rather to consider their mutual intersections in the sense of an intersectional perspective that makes

53 Hill Collins, Patricia 2023: *Intersektionalität als kritische Sozialtheorie*, Münster: Unrast Verlag.

structural disadvantages visible and enables comprehensive protection concepts. Currently, social constructs such as women and girls are necessary in order to make gender-based violence visible and address it at all. The problem is that particularly vulnerable groups, which are often minorities, fall through the system. We need approaches that also take into account small vulnerable groups and their specific concerns.

Non-discriminatory implementation of the Convention (Article 4(3)):

The Istanbul Convention recognises violence against women as a human rights violation and discrimination against women (*Art. 3a*). In *Article 4(3)*, the state parties commit themselves to implementing the Convention without discrimination “on any ground”, e.g. gender, “race”, language, religion, political opinion, national or social origin, belonging to a minority, sexual orientation, gender identity, age, health status, disability or refugee status. The grounds for discrimination listed in this provision are not exhaustive, although residence status is expressly mentioned as a prohibited criterion for differentiation, meaning that people may not be treated less favourably on the basis of their residence status⁵⁴. *Article 4* states an unambiguous demand: the state parties are called upon to use all available legal, political and practical means to ensure that all victims of violence can enjoy the rights set out in this Convention free from discrimination and that all dimensions of discrimination are considered and dismantled. The Convention differs from other human rights treaties in that it prohibits discrimination without restriction and within a very broad framework. The Istanbul Convention Alliance notes that the unrestricted, consistent and non-discriminatory implementation of the Convention in Germany is not yet guaranteed. As a result, many survivors are left out, even though they are particularly vulnerable.

The following section illustrates examples of problems in implementing *Article 4(3)* for certain groups who are in need of protection. We are aware that not all such groups are listed (e.g. women with mental health issues, women who have been forced into marriage).

Status of implementation of the IC for groups that are or may be subject to intersectional discrimination

Women with disabilities

Study results from 2024 confirm the high incidence of violence against women and girls with disabilities. Women who live in residential care facilities or work in sheltered workshops for people with disabilities are particularly likely to experience sexual violence – twice as often as men. 60% of women in sheltered workshops for people with disabilities also report incidents of sexual harassment⁵⁵. This risk is almost three times higher than in the general labour market⁵⁶. The violence protection concepts that have been mandatory in institutions since 2021 in accordance with *Section 37a of the Social Security Code (SGB IX)* are not (yet) consistently effective in practice (see *question 23*). Since 2017, women’s representatives must be elected from among the employees in every workshop for people with disabilities. Their tasks include, among other things, supporting violence protection. A survey conducted in 2024 reveals a lack of participation in the development

54 Europarat 2011: Council of Europe Convention on preventing and combating violence against women and domestic violence and explanatory report Übereinkommen des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt und erläuternder Bericht, Council of Europe Treaty Series, No. 210, Istanbul 2011, Ziff. 53.

55 Schröttle, Monika et al. 2024: Gewalt und Gewaltschutz in Einrichtungen der Behindertenhilfe, in: BMFSFJ 05.07.2024, [online] <https://www.bmfsfj.de/bmfsfj/service/publikationen/gewalt-und-gewaltschutz-in-einrichtungen-der-behindertenhilfe-241798> (accessed on 15.05.2025).

56 For information on the prevalence of sexual harassment in the general labour market, see: Schröttle, Monika Ksenia Meshkova & Clara Lehmann 2019: Dealing with sexual harassment in the workplace. A study commissioned by the Federal Anti-Discrimination Agency, in: Federal Anti-Discrimination Agency 20 June 2022, [online] (accessed on 1 July 2025).

of violence protection concepts and insufficient structural requirements for providing adequate advice to colleagues and performing their duties within the institution⁵⁷.

Access to the women's support system for women and girls with disabilities remains difficult due to a lack of accessibility and is sometimes impossible outside of large cities, as search portals of the bff and the ZIF demonstrate⁵⁸. According to information from the (federal) Länder, 29.5% of women's shelters are not accessible at all. Only 10.5% of facilities offer access for personal assistants, 7.4% have Braille signage, and 6.3% of facilities allow assistance dogs⁵⁹.

According to the BMBFSFJ, the federal investment programme "Together against violence against women" created 176 new or converted barrier-free/low barrier family places and 72 corresponding individual places by 2024⁶⁰. These are far from sufficient to eliminate the shortage. Women and girls with disabilities are confronted with particular risk constellations in their different life realities, while at the same time measures of protection are ineffective: for example, the limited effectiveness of the Protection Against Violence Act (GewSchG) both in their own homes, when perpetrators also provide care/assistance services, and in residential facilities. Women and girls with disabilities under legal guardianship often have no access to emergency care and subsequent further services without the consent of their guardian. Communication barriers continue to exclude women with hearing loss/deaf women in particular from information, counselling and protection measures.

Political measures to protect against violence and studies often treat the living situations of women and girls with disabilities separately: on the one hand, there are separate measures for people in institutions – mostly by the BMAS or social ministries of the federal states; on the other hand, there are gender equality measures to protect against violence – from the BMBFSFJ and "women's" ministries of the federal states. This is also evident in the Federal Government's Protection against Violence Strategy: measures taken by the BMAS (*Chapter 3.1.4 on violence protection in institutions*) are not conceptually linked to measures taken by the BMBFSFJ (*in Chapter 3.2.4*). As a result, they are often not aligned and also the necessary consideration and implementation of *the IC* with the *CRPD* is often lacking.

Since 2024, the results of two studies on violence against persons with disabilities (commissioned by the BMBFSFJ and BMAS) have been available. The representative study on "Violence and protection against violence in services for people with disabilities"⁶¹ and the follow-up study "Sexual harassment, violence and protection against violence in workshops for people with disabilities"⁶². These studies are one-off surveys; regular surveys are not planned. Both studies highlight the extremely high incidence of violence against women with disabilities – both in childhood and in adulthood, regardless of whether the women live in institutions or in their own homes. Furthermore, they show that access to police and support systems for victims of violence with disabilities is associated with considerable barriers. In addition to prevalence, the study results provide important insights into violence prevention for women with disabilities and highlight challenges in accessing protection and support systems. These findings require further research, but they should also be

57 For information on the work of women's representatives in institutions and the survey, see: Homepage des Bundes-Netzwerks der Frauen-Beauftragten in Einrichtungen *Starke.Frauen.Machen*. e.V., [online] <https://www.starke-frauen-machen.de/umfrage-ergebnisse-frauen-beauftragte.html>.

58 Bundesweite Frauenhaus-Suche o.J.: Frauenhäuser in Deutschland, in: ebd. o.A., [online] <https://www.frauenhaus-suche.de/> (accessed on 01.07.2025) und Suse hilft o.A.: Beratung, Schutz und Hilfe bei Gewalt, in: ebd. o.J., [online] <https://www.suse-hilft.de/de/hilfe-in-der-naehe/beratung-schutz-hilfe-bei-gewalt.html> (accessed on 01.07.2025).

59 DIMR 2024: *Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht*, Berlin: ebd., S. 192f.

60 BMBFSFJ o.J.: *Frauenhausplätze*, in: ebd. o.A., [online] <https://www.gemeinsam-gegen-gewalt-an-frauen.de/bundesfoerderung/frauenhausplaetze/> (accessed on 01.07.2025).

61 Schröttle, Monika et al. 2024: *Gewalt und Gewaltschutz in Einrichtungen der Behindertenhilfe*, in: BMBFSFJ 05.07.2024, [online] <https://www.bmfsfj.de/bmfsfj/service/publikationen/gewalt-und-gewaltschutz-in-einrichtungen-der-behindertenhilfe-241798> (accessed on 15.05.2025). (accessed on 15 May 2025).

62 Schröttle, Monika et al. 2024: *Sexuelle Belästigung, Gewalt und Gewaltschutz in Werkstätten für behinderte Menschen (WfbM) – Langfassung*, in: BMBFSFJ 06.2025, [online] <https://www.bmfsfj.de/resource/blob/241788/cafd3a02eb1aeeda15ccbd08238160d5/sexuelle-belaestigung-gewalt-und-gewaltschutz-in-werkstaetten-fuer-behinderte-menschen-langfassung-data.pdf> (accessed on 08.07.2025).

used to urgently implement measures to protect and support women with disabilities who are affected by violence.

Older and very old women

Data from the study “Living Situation, Safety and Health of Women in Germany” were evaluated by age in a European study on intimate partner violence against older women⁶³. 9% of women aged 60 to 74 and 2.6% of women over 75 reported having experienced physical and/or sexual assault at least once in their current relationship. Psychological violence was experienced by 17.6% of women aged 60 to 74 (women over 75: 9.9%)⁶⁴. The 2023 Federal Situation Report on gender-specific crimes against women also found age-specific findings for (attempted and completed) homicides against women and girls⁶⁵. The proportion of homicides committed by (ex-)partners increases with the age of the victims between 14 and 50, decreases among those aged 50 to 60, and increases again among those over 60. Just under a quarter of all femicides were committed against women over the age of 60 (40.5% of whom were over 80). Of all femicides with victims over the age of 60, in just under 37% of cases the perpetrators were (former) partners and in 25% other family members (e.g. sons and grandsons). However, it should be noted here that the Federal Situation Report takes a broader view than usual definitions on Femicide and lists all homicides against women as femicide, unlike the WHO, for example, which defines femicide as belonging to the group of women⁶⁶ (see also Article 11).

Practical experience shows that older women rarely seek support from specialist counselling and support centres on their own initiative. In addition, there are specific risk factors and age-specific vulnerabilities. Stereotypical social images of age, gender roles and sexuality can lead to violence against elderly women not being recognised or taken seriously in the general support system. For example, reports of violence as a result of dementia are misinterpreted and violence by partners or relatives in a care context is downplayed. Material and other dependencies (e.g. in the case of care needs) hamper separation. In many cases, these are long-term violent relationships and/or women who have experienced violence in the past (e.g. in childhood and adolescence) and have been stigmatised, pathologised or denied help in this context. Needs-based support requires low-threshold access, time and patience. At the same time, there is a lack of short-term emergency assistance options for women with illness- and age-related limitations. Women’s shelters are generally unable to accommodate women in need of care, and other forms of support or changes to the care situation are subject to lengthy application procedures and are not available at short notice. Access to short-term assistance must be improved – both for female survivors in need of care and for female survivors who are caring for relatives. Support facilities such as women’s counselling centres require specific expertise and good networking in the field of elderly care and care facilities. One example of best practice since 2012 is Paula e. V. in Cologne – a specialist counselling and support centre for women aged 60 and over, which also provides advice and networking services nationwide⁶⁷.

TIN* persons and non-heterosexual persons

Trans*, inter* or non-binary persons are equally affected by violence in their relational structure. According to the study “Coming Out – und dann...?”, almost half of the 14- to 27-year-olds surveyed reported family discrimination based on sexual orientation or gender identity, including ignoring,

63 Müller, Ursula et al. 2004: Lebenssituation, Sicherheit und Gesundheit von Frauen in Deutschland. Ergebnisse der repräsentativen Umfrage zu Gewalt gegen Frauen in Deutschland, in: BMBFSFJ 09.2004, [online] <https://www.bmbfsfj.bund.de/resource/blob/84328/3bc38377b1cf9ebb2dcac9a8dc37b67/langfassung-studie-frauen-teileins-data.pdf> (accessed on 01.07.2025).

64 Nägele, Barbara et al. 2010: IPVow. Länderbericht Deutschland. Partnergewalt gegen ältere Frauen, in: IPVow 12.2010, [online] https://www.ipvow.org/media/reports/IPVow_Endbericht_Deutschland_final.pdf (accessed on 19.08.2025).

65 BKA 2024: Federal Criminal Police Office: Federal Situation Report “Gender-Specific Crimes Against Women 2023” Geschlechtsspezifisch gegen Frauen gerichtete Straftaten – Bundeslagebild 2023, in: ebd. 19.11.2024, [online] <https://www.bka.de/SharedDocs/Downloads/DE/Publikationen/JahresberichteUndLagebilder/StraftatenGegenFrauen/StraftatengegenFrauenBLB2023.html>, S. 39 (accessed on 28.07.2025).

66 ibid. p. 35f.

67 See the website of Paula e. V. Cologne, [online] <https://paula-ev-koeln.de>

threats, exclusion and, in some cases, physical violence⁶⁸. The results of an international study from 2014 show that between a quarter and three-quarters of lesbian, gay and bisexual people experience violence in their intimate relationships⁶⁹. Another international study shows that bisexual women in particular are affected by domestic violence at an above-average rate of 61%⁷⁰. The experiences of the queer counselling centre “gewaltfreileben” also show that trans* women are disproportionately affected by violence from members of their family of origin or current family, whether from their partner or the children⁷¹. Coming out processes in particular are often linked to experiences of domestic violence.

The care situation for TIN* survivors of domestic violence is not guaranteed in Germany, as most women's shelters do not accept trans*, inter* or non-binary persons, or there are high barriers (e.g. proof of gender reassignment). This creates a significant gap in care and an increased risk of homelessness, especially after violent incidents in the family environment. Currently, there are only two shelters in Berlin and Munich that explicitly cater to adult queer people who have experienced violence in their intimate relationships.

Queer pupils are often subjected to bullying by their classmates at school, which leads, among other things, to them dropping out of school. Coming out processes are also rarely supported in a sufficiently positive manner. Trans* students are often advised to change schools instead of incorporating educational concepts about queer lifestyles into teaching. Queer teachers are also exposed to discrimination themselves if they disclose their sexual or gender identity at all.

Homeless and rough-sleeping women

In Germany, at least 220,000 women and girls were homeless in 2024. According to current figures from the *Federal Government's 2024 homelessness report*⁷², two out of three rough sleepers and almost half of those who are temporarily staying with friends or acquaintances (hidden homelessness) have experienced violence *since becoming* homeless, with mental illness or drug use exacerbating the situation. There are gender-specific differences: women are more likely to be affected by sexual harassment, assault or rape. 27% of women have experienced such violence (men 6%) and are more likely to be forced into prostitution (10%) than men (2%). Beyond violence during homelessness on the “streets”, in mixed-gender communal accommodation and in so-called hidden homelessness, the lives of women and girls experiencing homelessness are marked by violence: early childhood violence; domestic violence as a cause for homelessness specifically among women; prolonged stays in women's shelters due to a lack of affordable housing. The latter are not (yet) included in the above figure.

Despite their particular endangerment, women experiencing homelessness continue to face particularly high barriers to accessing specialist assistance (due to addiction or mental illness)⁷³. Homeless women and girls are also sometimes denied the gender-specific dimension of their experiences of violence, with these experiences being considered “environmental”.

This political invisibility of the gender-specific experiences of violence suffered by homeless women, girls and TIN* persons in Germany has far-reaching consequences, as illustrated by the lack of consideration in the Violence Protection Strategy and in state action plans (see *Article 7, Question 1*) and the lack of financial resources in emergency housing services, e.g. for training, structural changes and violence prevention (see *Article 15 & Article 20*). Only the new Violence Assistance Act

68 Krell, Claudia & Oldemeier, Kerstin 2017: Coming-out – und dann...?!

Coming-out-Verläufe und Diskriminierungserfahrungen von lesbischen, schwulen, bisexuellen, trans* und queeren Jugendlichen und jungen Erwachsenen in Deutschland, Opladen/Berlin/Toronto: Verlag Barbara Budrich.

69 Stiles-Shieldes, Colleen & Carroll, Richard A. 2014: Same-Sex Domestic Violence: Prevalence, Unique Aspects, and Clinical Implications, in: *Journal of Sex & Marital Therapy*, Vol. 41, Issue 6, pp. 636–648.

70 Black, Michele C. et al. 2011: The National Intimate Partner and Sexual Violence Survey (NISVS): 2010 Summary Report, Atlanta: National Centre for Injury Prevention and Control, Centres for Disease Control and Prevention.

71 See the website of the counselling centre for women, lesbians, trans* and queer people gewaltfreileben, [online] <https://gewaltfreileben.org/>.

72 BMWBS 2025: Federal Government Report on Homelessness, Wohnungslosenbericht der Bundesregierung 2024, in: ebd. 08.01.2025, [online] <https://www.bmwsb.bund.de/SharedDocs/pressemitteilungen/DE/2025/01/Wohnungslosenbericht.html> (accessed on 28.07.2025).

73 Frauenhauskoordinierung e.V. 2024: Wissenschaftliche Studie. Unterstützung von Frauenhäusern auf dem Weg zur Inklusion, in: ebd. 06.05.2024, [online] https://www.frauenhauskoordinierung.de/fileadmin/redakteure/PDF/Mitgliederinfo/FHK_Studie_Inklusion_NEU.pdf (accessed on 26.06.2025).

explicitly recognises their special need for protection for the first time and establishes a legal right to support from 2032 onwards (*see Article 22*).

Women and girls who use drugs

Women who use substances are disproportionately affected by gender-specific violence⁷⁴. Many survivors use substances as a form of self-medication, especially in connection with trauma-related disorders⁷⁵. Despite this connection, they still encounter systemic barriers when accessing support system: women's shelters are mostly abstinence-oriented⁷⁶, and addiction support services are male-dominated, so that gender-specific violence often remains unrecognised or taboo⁷⁷. Safe spaces and trauma-sensitive services are largely lacking. Underage female users in particular are severely underserved⁷⁸. The illegalisation of many substances further exacerbates the situation: it leads to criminalisation, stigmatisation and an increased risk of police violence⁷⁹. Female survivors are often denied access to substitution therapies – even though these can offer an important way out of violent dependency relationships. There is also a lack of adequate therapy options in prisons⁸⁰. The social construct of addiction as 'one's own fault' fails to recognise structural power relations⁸¹. Many survivors have to finance their substance use through sex work – which increases the risk of sexual violence⁸².

There is an urgent need for consumption-accepting, gender-sensitive and harm-reduction-based support and protection structures to effectively address the living conditions of women who use substances.

Sex workers

The majority of people in sex work are women who, despite the legal recognition of sex work as a legitimate profession in Germany (*Prostitution Act, ProstG*), experience violence due to social stigmatisation and the resulting discrimination against them. Even though the evaluation of the Prostitute Protection Act (*ProstSchG*) published in June 2025⁸³ does not classify sex work as a high-risk work situation per se, people (especially those with a migrant background) in sex work experience above-average levels of violence due to structural barriers and exclusion.

The registration requirement under *Section 3 of the ProstSchG* is a significant structural barrier for many sex workers, especially those who have migrated from non-EU countries. The figures published by the Federal Statistical Office for registrations under the ProstSchG up to the end of

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- 74 European Monitoring Centre for Drugs and Drug Addiction 2022: Women and drugs: health and social responses. Miniguide, in: European Union Drugs Agency o.A., [online] https://www.euda.europa.eu/publications/miniguide/women-and-drugs-health-and-social-responses_en (accessed on 22.07.2025).
 - 75 Egartner, Eva & Holzbauer, Susanne 1994: „Ich hab's nur noch mit Gift geschafft..." Frauen und illegale Drogen, Pfaffenweiler: Centaurus.
 - 76 Bernard, Christiane 2012: Konsumentinnen illegaler Drogen in Deutschland und den USA. Eine explorative Vergleichsstudie zur Wirkung von Drogenpolitiken auf die Lage drogenkonsumierender Frauen, Frankfurt a.M.: Johann Wolfgang-Goethe-Universität.
 - 77 Schrader, Kathrin 2012: Drogenprostitution: Lebens- und Überlebensstrategien von drogenabhängigen Straßenprostituierten, Wiesbaden: VS Verlag für Sozialwissenschaften.
 - 78 Kollektiv Solidarische Sozialarbeit 2023: Geschlechtsbezogene Gewalt auf der Straße, in: von Auer, Katja et al. (Hrsg.): Intersektionalität und Gewalt. Verwundbarkeiten von marginalisierten Gruppen und Personen sichtbar machen, Münster: Unrast Verlag, S. 207–219.
 - 79 Klaus, Luise 2024: Drogen und Racial Profiling. Wie die Polizei das Bild des „Schwarzen Dealers“ konstruiert, in: Feustel, Robert et al. (Hrsg.): Handbuch Drogen in sozial- und kulturwissenschaftlicher Perspektive, 2. Auflage, Wiesbaden: Springer Fachmedien, S. 629–644.
 - 80 WHO Regionalbüro für Europa & United Nations Office on Drugs and Crime 2009: Gesundheit von Frauen im Strafvollzug. Beseitigung von Ungleichheiten zwischen den Geschlechtern im Strafvollzug. Wien/Kopenhagen: WHO Regionalbüro für Europa.
 - 81 Bernard, Christiane 2012: Konsumentinnen illegaler Drogen in Deutschland und den USA. Eine explorative Vergleichsstudie zur Wirkung von Drogenpolitiken auf die Lage drogenkonsumierender Frauen, Frankfurt a.M.: Johann Wolfgang-Goethe-Universität.
 - 82 Langer, Antje 2023: Wohnungslosigkeit von Frauen in informellen Drogen- und Sex-Ökonomien, in: Borstel, Dierk et al. (Hrsg.): Handbuch Wohnungs- und Obdachlosigkeit, Wiesbaden: Springer VS.
 - 83 BMBFSFJ 2025: Evaluation of the law regulating the prostitution business and protecting persons engaged in prostitution (Prostitute Protection Act), in: ebd. 24.06.2025, [online] <https://www.bmbfsfj.bund.de/bmbfsfj/service/publikationen/evaluation-des-gesetzes-zur-regulierung-des-prostitutionsgewerbes-sowie-zum-schutz-von-in-der-prostitution-taetigen-personen-prostituiertenschutzgesetz-prostschg--266228>

2024⁸⁴ show a continuous decline in registrations since the introduction of the registration requirement. The ProstSchG evaluation confirms that not all sex workers register (or are able to register). Since the introduction of the registration requirement, there are now effectively legally and illegally working sex workers. Illegal status creates the risk of exploitation. According to sex workers who participated in the evaluation study, individual prostitution operators, clients and even fraudsters have exploited this for their own purposes⁸⁵. In this respect, the ProstSchG has created a two-tier system within sex work, in which illegalised sex workers are driven underground, increasing their risk to experience violence. At the same time, the fear of punishment or possible deportation lessens willingness to report.

Article 4, paragraph 2 of the Istanbul Convention calls on the parties to take measures to prevent discrimination against women, “*in particular by repealing all laws and abolishing all practices that discriminate against women.*” To ensure that sex workers are not neglected in the implementation of this article, it is strongly recommended that the registration requirement under *Section 3 of the ProstSchG* be abolished and measures introduced that aim to change social attitudes towards sex work and protect sex workers from discrimination in everyday life. By educating the public about the different realities of sex work, breaking down negative stereotypes and raising awareness among authorities about the situation of migrant sex workers, the stigma against the industry can be systematically reduced, thereby better preventing violence in sex work.

Sintizze and Romnja

Sintizze and Romnja are particularly affected by gender-specific violence, while there are significant gaps in information and support provision. In Germany, there is hardly any data available on women and girls from these groups. A 2020 study showed that over 70% of Sinti and Roma people surveyed experienced violence, marginalisation and victim blaming when reporting discrimination⁸⁶. The 2024 annual report of the *Antiziganism Reporting and Information Centre (MIA)* documented 1,678 incidents, including threats and physical attacks⁸⁷. For the survivor, this means an increased risk of violence and, at the same time, significant barriers to accessing shelters and support. The 9th International Roma and Traveller Women’s Conference emphasised the limited access to support systems across Europe⁸⁸. Contrary to GREVIO’s recommendation 168d⁸⁹, there is no nationwide action plan or specific strategy for Romnja and Sintizze, meaning that their protection needs are hardly taken into account in support systems⁹⁰. Women’s shelters and specialist counselling and support centres are often not interculturally oriented and do not take into account the specific experiences of antiziganism. It is worrying that the position of the Thuringian Commissioner on Antiziganism, which has existed since 2023, has been abolished by the new Thuringian government. Without a central contact person, the perspectives and needs of the minority are in danger of being lost among the multitude of political departments and actors.

84 DeStatis 2025: Pressemitteilung. Ende 2024 rund 32 300 Prostituierte bei Behörden angemeldet, in: ebd. 03.07.2025, [online] https://www.destatis.de/DE/Presse/Pressemitteilungen/2025/07/PD25_240_228.html?templateQueryString=anmeldung+prostitution (accessed on 10.08.2025).

85 BMBFSFJ 2025: *ibid.*

86 GREVIO 2022: First report of the expert committee on the implementation of the Council of Europe convention (Istanbul convention) in Germany in: BMBFSFJ 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, Ziff. 159–163 (accessed on 28.07.2025).

87 MIA – Melde- und Informationsstelle Antiziganismus 2024: Jahresbericht 2024, in: ebd., 06.2025, [online] <https://www.antiziganismus-melden.de/wp-content/uploads/2025/06/MIA-JB-2024.pdf>, S. 6f (abgerufen am 29.08.2025).

88 Europarat 2023: 9th International Roma and Traveller Women’s Conference: Building Equality together, in: ebd. 13.09.2023, [online] <https://rm.coe.int/9th-international-roma-and-traveller-women-conference-skopje-north-mac/1680ac8f8e>, S. 3 (accessed on 29.08.2025).

89 *ibid.*: GREVIO 2022.

90 Europarat/ECRI 2020: ECRI-Bericht über Deutschland, 6. Prüfungsrunde, in: Europarat 17.03.2020, [online] <https://rm.coe.int/ecri-report-on-germany-sixth-monitoring-cycle-german-translation-/16809ce4c0> (accessed on 29.08.2025).

CHANGES IN COMPREHENSIVE AND CO-ORDINATED POLICIES, FUNDING AND DATA COLLECTION IN THE AREA OF VIOLENCE AGAINST WOMEN AND DOMESTIC VIOLENCE

Article 7 – Comprehensive and co-ordinated policies

Background

The following answers describe comprehensive and coordinated policy measures, such as the National Coordination Office, the Protection against Violence Strategy, monitoring and federal state (Länder) action plans, the Violence Assistance Act, the reform of the Protection against Violence Act, and digital violence and legislation.

Regarding Question 1

Please provide information on any new policy development since the adoption of GREVIO's baseline evaluation report on your country to ensure comprehensive policies covering the areas of prevention, protection, and prosecution in relation to stalking, sexual harassment and domestic violence, including their digital dimension, rape and sexual violence, female genital mutilation, forced marriage, forced abortion and forced sterilisation, thereby demonstrating further implementation of the convention. Please specify the measures taken particularly in relation to those forms of violence against women that have not been addressed in past policies, programmes and services encompassing the four pillars of the Istanbul Convention.

The establishment of **the National Coordination Office** for the implementation of the Istanbul Convention at the BMFSFJ (*cabinet decision of 11 December 2024*) and the establishment of **focal points** in the concerned departments to ensure cooperation between various ministries and the national coordination office are to be welcomed.

In January 2025, the BMFSFJ took the lead in presenting the Federal Government's **Protection against Violence Strategy** for the implementation of the IC⁹¹.

We criticise the limited opportunity for civil society to participate in its development. There were no plans to engage in a detailed examination of the Protection against Violence Strategy prior to its publication. On 14 November 2023, the BMFSFJ invited representatives from civil society, academia, the federal states, municipalities and federal ministries to a one-off consultation event. There, thematic recommendations for measures to implement the IC were collected. However, there was no joint prioritisation, concretisation or further systematic participation of civil society beyond this. Existing preparatory work, documents and publications were not included. There are still no plans for institutionalised and systematic cooperation between civil society and the coordination office.

⁹¹ BMBFSFJ 2025: Gewaltschutzstrategie nach der Istanbul- Konvention [online] <https://www.bmfsfj.de/resource/blob/252132/6f19d4a8afb13905fff03a9fca7218dd/gewaltschutzstrategie-der-bundesregierung-data.pdf> (accessed on 08.04.2025).

We also criticise the lack of a consistent intersectional approach to particularly vulnerable groups. Women at the intersection of addiction, homelessness and violence are not mentioned in the Protection against Violence Strategy. On the subject of women experiencing homelessness, it only contains measure 37, according to which professionals in general emergency housing assistance should be trained in the needs of survivors of domestic violence⁹².

The presented Protection against Violence Strategy lacks reliability across legislative periods. This contradicts GREVIO's call for the development of a long-term strategy⁹³. It is to be further developed at the beginning of each legislative period on the basis of the agreements in the respective coalition agreement. It is not specified whether parts of the overall strategy that are marked as "*planned for the next legislative period*" are concrete obligations for the Federal Government from 2025 to 2030. It also remains unclear how concrete integration with existing strategies and plans, such as the National Action Plan against Human Trafficking, will be ensured. From the perspective of survivor protection, it is imperative to avoid overlapping responsibilities, duplicate structures and gaps in protection due to a lack of transparency. A joint, effective and sustainable protection structure is needed.

The overall strategy lists a mixture of existing measures, measures to be implemented in the near future and measures to be implemented at an unspecified point in time. Some of the measures listed (and budgets specified) have only a minor connection to the implementation of the IC or the Protection against Violence Strategy, such as the "*Municipal Monitoring of Hate, Agitation and Violence against Public Officials (KoMo)*" (period 2022–2024, continuation planned, budget: €252,000) and "*Further development of the interactive equality atlas*" (period 2024 ff., budget approx. €102,000 p.a.)⁹⁴ and "*Improving data availability / creating evidence-based knowledge through various funding measures of the Health Research Framework Programme*" (period 2023–2025, budget approx. €29.5 million)⁹⁵.

The federal government's overall strategy does not include any new measures (or only includes inadequate ones) for the **healthcare system**⁹⁶:

- » "*Improving data availability / creating evidence-based knowledge through various funding measures under the Health Research Framework Programme (from 2022 to 2025)*": It is unclear how much of the €29.5 million is used for research in the health sector on the topic of violence and the forms of violence mentioned in the IC. Violence is only one of many topics in the framework programme⁹⁷.
- » "*Confidential evidence collection (since 2020)*": Merely a reference to the legal basis already created in 2020; implementation is a matter for the federal states (*for further information, see Article 25*).
- » "*Handbook on clinical care for women who experience violence or sexual violence (ongoing measure)*": With financial support from the Federal Ministry of Health, the handbook was translated and distributed by S.I.G.N.A.L. e. V. in 2015 (!). Since then, no further measures have been taken by the Federal Ministry of Health in this regard.
- » *Guidelines on (sexual) violence and abuse*: it is stated that there are over 30 medical guidelines that address these issues in varying degrees of depth (ongoing measure): it is not clear from the overall strategy which guidelines these are and, above all, how and with what objectives the

92 *ibid.*, p. 38.

93 *ibid.*

94 BMBFSFJ 2025: Gewaltschutzstrategie nach der Istanbul-Konvention, in: ebd. 06.03.2025, [online] <https://www.bmfsfj.de/resource/blob/252132/8275196915292f8ff4cb39ad7f158731/gewaltschutzstrategie-der-bundesregierung-data.pdf>

95 *ibid.*, p. 30.

96 *ibid.*

97 BMFTR 2018: Rahmenprogramm Gesundheitsforschung der Bundesregierung, in: ebd. 11.2018, [online] https://www.gesundheitsforschung-bmbf.de/files/Rahmenprogramm_Gesundheitsforschung_barrierefrei.pdf (accessed on 09.05.2025).

issue of violence and the groups and forms of violence mentioned in the IC are dealt with. For capacity reasons, the BMG was unable to provide any further information on this matter upon request and refers to the guideline register of the *Association of Scientific Medical Societies* (AWMF) (keyword search “violence”). There is no AWMF guideline on care after domestic violence, and an S1 guideline on care after sexual violence is currently being developed (see *Articles 20 and 25*).

We are critical of the fact that the **observation and evaluation of the implementation of the IC** in the sense of monitoring in accordance with *Article 10* is not yet enshrined in law. Although the DIMR has been entrusted by the Federal Government since November 2022 with monitoring the implementation in Germany in accordance with *Article 10* and has set up the **National Rapporteur Mechanism on gender-based violence** for this purpose, this is only on a project basis until October 2026. There is no guarantee that monitoring will continue on a permanent basis. We call for monitoring to be made permanent with a legal basis, based at the DIMR. The federal states endorsed this at the Conference of Ministers for Equality on 26 and 27 June 2025⁹⁸.

In addition, there is a lack of dedicated monitoring bodies at the (federal) Länder level. A few (federal) Länder are planning to set these up or are commissioning selective evaluations, for example Berlin with its study on *the “Care situation for women* and girls* survivors of domestic violence in Berlin”*⁹⁹.

Coordination structures between the federal and state levels are needed to counteract the lack of or limited regional and national cooperation and to ensure comparability with the results of the National Rapporteur Mechanism on gender-based violence. In addition, an overview of existing monitoring and evaluation functions is required. IC coordination offices have now been set up in most (federal) Länder, but not yet in all of them. Furthermore, their permanent establishment is not guaranteed everywhere and depends on financial resources and political changes, such as changes in political leadership as a result of state elections. It is worrying that in Berlin in 2024, an existing coordination office was even closed down after the departure of its staff member and was not included in the budget¹⁰⁰.

On a positive note, most (federal) Länder have adopted **state action plans** to combat violence against women and implement the Istanbul Convention. Since it came into force in Germany in 2018, twelve (federal) Länder have adopted a new state action plan, three more are in the process of developing a new plan, and one (federal) Land has a plan dating from 2016. In the partial analysis of seven state action plans published between 2018 and 2024 and carried out by the National Rapporteur Mechanism on gender-based violence, the lack of a comprehensive nationwide violence protection strategy to date has become clearly apparent: The plans examined differ considerably in terms of form, content, status and reliability, as well as in terms of how they were developed, their specialized basis and their specialized scope¹⁰¹. Some plans refer exclusively to domestic violence or only to certain forms of gender-specific violence against women. Measures are not in place for all vulnerable groups affected. Although the perspective of survivors is increasingly being taken into account in the more recent action plans, its fundamental inclusion has not yet been established. There are also differences in the priorities set and the measures taken, which creates gaps. There is an urgent need for joint action across (federal) Länder borders in the form of greater coordination and harmonisation of state action plans. The varying degrees of specificity

98 GFMK 2025: Beschlüsse und Entschlüsse 35. Konferenz der Gleichstellungs- und Frauenministerinnen und -minister, -senatorinnen und -senatoren der Länder. Fortführung des bundeseinheitlichen Monitorings zur Umsetzung der Istanbul-Konvention, in: GFMK o. A., [online] https://www.gleichstellungsministerkonferenz.de/documents/35-gfmk-hauptkonferenz-protokoll_1753091667.pdf, TOP 7.4 (accessed on 04.07.2025).

99 Zentrum für Evaluation und Politikberatung 2024: Versorgungssituation für von häuslicher Gewalt betroffenen Frauen* und Mädchen. in: ebd. 30.05.2024, [online] https://zep-partner.de/wp-content/uploads/2024/09/2024_ZEP_Versorgungsstudie_Gewaltschutz_Berlin_20240530_final.pdf (accessed on 18.07.2025).

100 Tagesspiegel Checkpoint 2024: Stockende Umsetzung von Istanbul-Konvention: Berlin spart an Koordinierungsstelle zum Schutz von Frauen vor Gewalt. in: ebd. 9.4.2024, [online] https://checkpoint.tagesspiegel.de/langmeldung/wYcfv3JY8ZZh2cD62AnXg?utm_source=chatgpt.com (abgerufen am 18.07.2025).

101 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd, S. 99-104.

and compulsoriness of the measures are also due to a lack of, or at least uncertainty about, financial security. Financial planning security and clear responsibilities are needed¹⁰².

Furthermore, the **Violence Assistance Act (GewHG)** represents a central legal milestone for Germany. It mandates the **needs-based, comprehensive expansion of the support system** in the areas of counselling and protection, as well as the comprehensive **establishment and expansion of preventive measures** (including perpetrator work), and establishes a **legal right to counselling and protection from 2032 onwards**. The **target group** includes women and their children. The law leaves open whether trans* women are included here or not, but we assume that they are and demand that they be included. Earlier versions of the law explicitly included all trans*, inter* and non-binary persons in its scope of protection, partly because the interpretation of *Article 4* of the Istanbul Convention states that these groups of persons are considered worthy of protection.

When it comes to **expanding women's shelters and counselling centres**, accessibility is only mentioned as a recommendatory provision. This may result in persons with disabilities continuing to find less adequate protection and counselling spaces (see also *Articles 4, 8, 20*).

From a civil society perspective, it should be noted critically that **specific obstacles for refugee girls and women**, in particular the regulations on the duration of marriage and residence requirements, were not adapted by the last Federal Government in the right of residence and asylum law (in accordance with the Istanbul Convention) in the run-up to the adoption of the Violence Assistance Act (see *Article 56e*). This prevents women affected by violence from receiving effective protection in asylum and residence status proceedings. By continuing to ignore the precarious situation of these women, discrimination against refugee and migrant women and their children – including their increased vulnerability – continues to be condoned.

Despite their particular vulnerability and exposure to violence, **homeless women** continue to face significant barriers to accessing the specialist support system¹⁰³. On a positive note, *Section 2 (2) of the GewHG* explicitly states for the first time that in cases of domestic violence, *“a permanent residence or permanent membership of a household (...) is not required”* for the woman affected by violence. From 2032, homeless women affected by violence will also have a legal right to protection and support – and must be given access to specialist assistance (see also *Article 4, Article 22*). It is questionable whether the implementation of the GewHG in the federal states takes sufficient account of this.

The law does not cover all forms of violence listed in the Istanbul Convention: economic and digital violence, forced marriage, female genital mutilation and honour-based violence are missing.

The **implementation** of the new Violence Assistance Act is essentially the responsibility of the **(federal) Länder**. The drafts of the individual state implementation laws must be submitted by 1 January 2027, based on a needs analysis and development planning. However, the current approach of the (federal) Länder already shows that this could be very heterogeneous. It cannot be taken for granted that the state implementation laws will be comprehensive enough and designed and implemented in an intersectional manner. Against this background, civil society considers it urgently necessary to draw attention to the following key points in particular:

According to **Section 8 of the GewHG**, the federal states are required to assess *“the availability of protection and counselling capacities, including their coverage density”*. It obliges the federal states to *“carry out an analysis to determine the necessary protection and counselling capacities and, based on this,”* to plan *“the necessary development of a network of protection and counselling services”*. In order to effectively implement this legal requirement, the needs assessment and development planning must be based on legally and professionally sound and recognised benchmarks. The following are central to this:

¹⁰² *ibid.*, S. 104–124.

¹⁰³ Frauenhauskoordinierung e. V. 2024: Wissenschaftliche Studie. Unterstützung von Frauenhäusern auf dem Weg zur Inklusion, in: ebd. 04.2025, [online] https://www.frauenhauskoordinierung.de/securedl/sdl-eyJ0eXAiOiJKV1QiL-CJhbGciOiJIUzI1NiJ9.eyJpYXQiOiJE3NTYzNzQzMTEsImV4cCI6MTc1NjQ2NDMxMSwidXNlci6MCwiZ3JvdXBzIjpjb-MCwtMV0sImZpbGUiOiJmaWxIYWRTaW4vcmlwICFnZSI6Mjk4fQ.apPRHte0wLMWv9rZcY1CncoOCQGQ75uTYVx-l7aloog/FHK_Studie_Inklusion.pdf (accessed on 28.08.2025).

- » reference to the Istanbul Convention, in particular: *Art. 20* (general support services), *Art. 22* (specialist support services), *Art. 23* (Shelter),
- » as well as to the accompanying explanatory report, in particular *paragraph 135* (key figures for women's shelter places per 100,000 inhabitants),
- » recommendations and standards of relevant federal professional associations, e. g. on staffing, spatial requirements and the calculation of budgets for operating/administrative costs,
- » a transparent and participatory analysis of the current situation, involving the regional representatives of professional associations, municipal agencies (including Equal Opportunities Officers) and non-profit organisations.

In addition, **it is recommended**

- » to collect all relevant characteristics in coordination with existing statistics and data collections in the implementation of the Violence Assistance Act. Categories previously listed as "optional" characteristics should be redefined as mandatory characteristics.
- » Ensuring low-threshold, barrier-free and cross-state access to help and support, regardless of structural and regional differences and regardless of survivors residence status. The Violence Assistance Act needs to be amended in this regard.

We call for reliable, adequate expansion planning that both secures existing services and specifically establishes and expands new structures – comprehensively, intersectionally and sustainably.

Since the last legislative period, the Federal Government has been working on a **reform project of the Protection against Violence Act (GewSchG)**, which is planned for 2025 and must be implemented without fail: family courts should be given the option of ordering perpetrators to attend a social training course. This would comply with *Article 16(1)* of the Istanbul Convention. The use of electronic monitoring (**eAÜ**) should also be made possible¹⁰⁴. This planned reform is currently not synchronised with criminal and police sanctions or with child custody regulations on custody and visitation rights. Without a reform of the German Civil Code (BGB) and the Family Procedure Act (FamFG) with regard to access and custody regulations, the introduction of electronic monitoring in the GewSchG is pointless (see *also question 54*). In a detailed statement on the reform projects, the German Women Lawyers Association criticises: "*Without the comprehensive introduction of a standardised risk analysis to identify high-risk cases and interdisciplinary case management, the introduction of electronic monitoring within the framework of the GewSchG falls short and does not meet the European and international legal requirements of the EU Protection Against Violence Directive and the Istanbul Convention*"¹⁰⁵.

The simultaneous jurisdiction of family courts for visitation arrangements and the ordering of electronic monitoring (eAÜ) raises serious concerns. For example, practitioners fear that ordering eAÜ without the consent of survivors could contribute to a further escalation of the situation or that survivors will file fewer applications for protection against violence due to this concern. The IC's demand for low-threshold access to the GewSchG by women under threat is being ignored.

It is unclear on what scientific data the effectiveness of the proposed measures in high-risk cases (electronic monitoring, perpetrator work) is based in relation to other measures such as addressing persons likely to threaten, detention, and consistent application of criminal law options. The Federal Government refers to positive experiences in Spain, where, following the implementation of the 2004 law, electronic monitoring was also introduced five years later and no further cases of femicide were recorded in cases monitored by electronic monitoring. This argument ignores the

104 BMJV 2025: Elektronische Aufenthaltsüberwachung und verpflichtende soziale Trainingskurse zum Schutz vor häuslicher Gewalt: Bundesregierung beschließt Formulierungshilfe, in: ebd. 08.01.2025, [online] https://www.bmjv.de/SharedDocs/Pressemitteilungen/DE/2025_A/0108_GewaltschutzG.html (accessed on 20.08.2025).

105 djb 2024: Zum Entwurf eines ersten Gesetzes zur Änderung des Gewaltschutzgesetzes, in: ebd. 13.12.2024, [online] https://www.djb.de/presse/pressemitteilungen/detail/st24-44#_ftn5 (accessed on 18.07.2025).

fact that the so-called “Spanish model” includes significant sanctions, protection and prevention measures, as well as standardised high-risk management and specialist judiciary.

In order for electronic monitoring to be effective, a coordinated overall concept and the conditions for sound risk assessments in all family courts must be created. The following are currently still lacking:

- » scientifically sound and uniform standards for risk/danger assessment and safety planning,
- » locally implemented, interdisciplinary case conferences and the involvement of non-governmental survivor protection institutions such as women’s shelters, women’s counselling centres and perpetrator work institutions, etc.,
- » mandatory training for family court judges,
- » reliable structures for the effective monitoring of high-risk perpetrators.

The **obligation to participate in social training courses or perpetrator programmes** in the draft reform of the GewSchG offers the opportunity to respond quickly to intimate partner violence and close the currently existing gap in the intervention chain. It is crucial that perpetrator work is not carried out arbitrarily, but according to specific criteria and guidelines. These include a critical and gender-sensitive approach and a long-term focus for the intervention (*see also Article 16, Question 14*).

To date, there has been no comprehensive concept for **combating digital gender-specific violence**. Measures for prevention, victim protection, media literacy and effective, low-threshold action against digital violence in the immediate social environment remain inadequate. Counselling and support centres often have insufficient or no human resources¹⁰⁶. There are also considerable differences in the level of expertise in dealing with digital violence, both at counselling and support centres and law enforcement agencies.

Regarding **legislation and law enforcement**, the coalition agreement between CDU, CSU and SPD announced a **tightening of the offence of stalking**, which is also to include tougher penalties for violations under the Protection against Violence Act¹⁰⁷. Unnoticed GPS trackers are to be included in the provisions, and manufacturers of tracking apps will be required to regularly request the consent of device owners. It remains unclear which apps can be categorised as tracking apps and what exactly is meant by the tightening of the law.

An **increase in the penalty range** is planned for group rapes, especially in cases of joint commission of the offence and in cases where pregnancy is caused. In addition, the “*Draft Law on the Criminal Prosecution of the Administration of So-called Knockout Drops for the Purpose of Committing Robbery and Sexual Offences*” is intended to increase the penalties for the administration of such substances¹⁰⁸. In contrast to the tightening of the law in this area, the coalition agreement stipulates only a review in relation to significant verbal and non-physical sexual harassment.

Although **digital violence** – especially in the form of cyberstalking, image-based violence and the dissemination of non-consensual deepfakes – represents a significant experience of violence for many survivors and is on the rise, it has not yet been systematically integrated into German legislation. For example, there are **gaps in criminal liability for digital stalking** – e.g. through the use of Bluetooth trackers for location tracking – and for the dissemination of intimate content without consent. The planned adoption of a **Protection against Digital Violence Act** and the announced **reform of cyber criminal law** are important steps towards combating digital violence more effectively. It is particularly welcome that this will enable the blocking of so-called “hate accounts” and extend criminal liability to non-consensual deepfakes and the making available of manipulated in-

106 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd. S. 354.

107 CDU/CSU & SPD 2025: Koalitionsvertrag zwischen CDU, CSU und SPD, 21. Wahlperiode, in: Koalitionsvertrag 2025 o. A., [online] https://www.koalitionsvertrag2025.de/sites/www.koalitionsvertrag2025.de/files/koav_2025.pdf, S. 91, Zn. 2921 (accessed on 06.08.2025).

108 BT-Drucks. 21/551.

timate recordings to third parties. We welcome the goal of closing existing gaps in criminal liability and thus better protecting survivors.

The Federal Situation Report “*Gender-specific crimes against women 2023*” collects initial data on the prevalence of digital violence and shows that 62.3% of survivors are female¹⁰⁹. However, there is a lack of data on the manifestations and consequences of digital violence, including unreported cases. Without this data, it is virtually impossible to design effective and needs-based protection and criminal law mechanisms.

The implementation of the new **EU Directive on combating violence against women and domestic violence** obliges Germany to close existing gaps in protection and criminal liability. Germany must fulfil its obligation to address the digital dimension of gender-specific violence structurally and bring it into line with *GREVIO’s recommendations on digital violence against women*¹¹⁰. This requires a sustainable expansion of counselling and support structures, comprehensive training courses and a strong network (including IT specialists) in order to be able to offer concrete and effective help to survivors. The 35th GFMK has requested that the federal government set up a central nationwide service to support employees in protection and support facilities for female survivors of violence in order to combat digital violence in the immediate social environment¹¹¹.

The coalition agreement does not provide for any changes in the areas of genital mutilation, forced marriage, forced abortion and forced sterilisation (see Alternative Report 2021).

It remains to be seen how and to what extent these goals will be implemented. We are critical of purely punitive measures, especially if they fail to take into account the need to raise awareness of these issues within the judiciary.

Regarding question 2

Where relevant, please provide information on any measures taken to ensure the alignment of any definitions of domestic violence and of violence against women in national legislation or policy documents with those set out under Article 3 of the Istanbul Convention and provide the relevant applicable provisions in English or French.

We welcome the fact that the **Protection against Violence Strategy** under the Istanbul Convention emphasises the IC’s broad understanding of the term ‘violence’, refers to ‘psychological and economic harm’ in its definition of terms, and also addresses those who experience gender-specific violence because they are trans*, inter* or non-binary persons. The Protection against Violence Strategy interprets the IC broadly and understands “LBTIQ*-hostile violence as an expression of gender-specific violence”¹¹².

Another positive development is a 2021 **Guideline for immigration administration staff in Schleswig-Holstein**, which uses the Istanbul Convention’s definition of violence (*Art. 3 a-f*)¹¹³. It

109 BKA 2024: Bundeslagebild „Geschlechtsspezifisch gegen Frauen gerichtete Straftaten 2023“, in: ebd. 19.11.2024, [online] https://www.bka.de/SharedDocs/Kurzmeldungen/DE/Kurzmeldungen/241119_BLBStraftatengegen-Frauen2023.html accessed on 28.08.2025).

110 GREVIO 2021: GREVIO general recommendations No. 1 on digital violence against women. in: Council of Europe 24 November 2021, [online] <https://rm.coe.int/grevio-rec-no-on-digital-violence-against-women/1680a49147> (accessed on 28 August 2025).

111 GFMK 2025: Beschlüsse und Entschlüsse 35. Konferenz der Gleichstellungs- und Frauenministerinnen und -minister, -senatorinnen und -senatoren der Länder. Digitale Gewalt im sozialen Nahraum – Aufbau einer zentralen bundesweiten Anlaufstelle zur Unterstützung von Beschäftigten in Schutz- und Beratungseinrichtungen für von Gewalt betroffene Frauen, in: GFMK o. A., [online] https://www.gleichstellungsministerkonferenz.de/documents/35-gfmk-hauptkonferenz-protokoll_1753091667.pdf, TOP 7.7 (accessed on 14.08.2025).

112 BMFSFJ 2025: Gewaltschutzstrategie nach der Istanbul-Konvention, in: ebd. 06.03.2025, [online] <https://www.bmfsfj.de/resource/blob/252132/8275196915292f8ff4cb39ad7f158731/gewaltschutzstrategie-der-bundesregierung-data.pdf>, S. 12, 13, 78 (accessed on 04.07.2025).

113 Ministerium für Inneres, ländliche Räume, Integration und Gleichstellung Schleswig-Holstein 2021: Leitfaden in der schleswig-holsteinischen Zuwanderungsverwaltung zu dem Thema: Taking into account domestic and/or gender-specific violence against women with a refugee or migrant background in the context of spatial restrictions and residence regulations, as well as the granting of an independent right of residence that is not

provides an in-depth understanding of gender-specific violence and is intended to enable staff to make protection-oriented decisions on asylum and residence status that focus on the protection of women.

However, the application of a definition of domestic violence and violence against women according to the IC is not yet comprehensive in the application of law. For example, in the Residence Act – implementing *Art. 59 (1) of the IC* – the courts usually only include physical violence in their assessment of domestic violence under *Section 31 (2) of the Residence Act*¹¹⁴.

Section 2 of the **GewHG** introduces legal definitions for gender-specific and domestic violence based on the Istanbul Convention. However, digital forms of gender-specific violence are not included.

Regarding question 3

Please provide information on how your authorities ensure that policies on violence against women and domestic violence put women's rights and their empowerment at the centre and on any measure taken to enhance the intersectionality of such policies, in line with Articles 4 paragraph 3 of the convention.

With regard to the **National Coordination Office** under the IC, it is not clear to what extent an intersectional approach is envisaged and whether the perspectives of survivors from different groups are taken into account.

Although **the Protection against Violence Strategy** under the IC mentions intersectional perspectives in various places, it does not apply them fundamentally as a strategy or concept and does not implement them stringently in relation to the individual measures. A large part of the measures need to be revised in order to actually put an intersectional perspective into practice and ensure non-discriminatory implementation (*Article 4(3) IC*). Crucially, there are no measures to eliminate the exclusion of refugee women from protection measures (see *Articles 59–61, Chapter 2*). Particularly vulnerable groups such as homeless women, women sleeping rough and women who use drugs are not even mentioned in the overall strategy and thus remain invisible and unprotected.

Shortly before the **Violence Assistance Act** was passed, the last Federal Government made a change to the definition of persons affected by violence within the meaning of the Act and decided: “Gender-specific violence within the meaning of the Act is limited to violence against women”¹¹⁵. *Article 4(3)* of the IC calls on the parties to implement the Convention without discrimination on grounds of, among other things, biological or social gender or gender identity. In the Alliance’s view, the definition may constitute such discrimination.

A positive development is the funding of the model project “*Intersectional Centre for Protection against Violence and Competence Building*” (*InGeKom*)¹¹⁶ by the umbrella organisation of migrant women DaMigra e. V. by the federal state of Saxony from 2024 to 2026. This project is aimed both at survivors, for example by offering spaces for exchange, and at professionals who are sensitised to intersectional perspectives in further training, and conducts surveys on gaps in the support system of specialist services. InGeKom also offers human rights-based further training for community trainers. Two of the six events in 2025 focused explicitly on gender-specific violence: one on gender-specific violence forms (against women and TIN persons) and intersectional violence, and one

dependent on a spouse, [online] https://www.landtag.ltsh.de/export/sites/ltsh/beauftragte/fb/veranstaltungs-dokumente/20230221_Gewaltschutz-vor-aufenthaltsrechtlichen-Regelungen/Leitfaden-Beruecksichtigung-von-haesuslicher-undoder-geschlechtsspezifischer-Gewalt-gegenueber-Frauen-mit-Flucht-oder-Migrationshintergrund-im-Rahmen-von-raeumlichen-Besc.pdf (accessed on 13.08.2025).

¹¹⁴ OVG Hamburg 06.09.2019 – 1 Bs 155/19; OVG Lüneburg vom 04.12.2018 – 13 ME 458/18; VGH München Beschluss vom 25.06.2018 – 10 ZB 17.2436; VG Ansbach, Urteil vom 28.01.2020 – AN 11 K 16.01570; OVG des Saarlandes, Beschluss vom 19.04.2018 – 2 B 52/18.

¹¹⁵ BT-Drucks. 20/14785.

¹¹⁶ DaMigra 2025: InGeKom – Intersektionales Zentrum für Gewaltschutz und Kompetenzaufbau [online] <https://www.damigra.de/projekte/ingekom/ueber-das-projekt/> (accessed on 13.08.2025).

on the work of the KIS counselling centre in Leipzig against domestic violence and stalking¹¹⁷. There are already collaborations with other associations, such as the Saxony State Medical Association. The continuation of this project is fundamental to its long-term effectiveness.

In the area of **asylum policy**, there is a dangerous trend that highlights the need for intersectional and interdepartmental planning of violence protection. There have been cases where migrant women who have been victims of violence have been deported to places where their violent ex-partners are located¹¹⁸. One example is a woman who was deported from a women's shelter to Austria, even though she had already informed the authorities of her voluntary return to her home country. During a visit to the authorities to extend her temporary residence permit, she and her children were brutally taken into custody, which women's shelter staff present perceived as (re)traumatising. In a press release, the Autonomous Women's Shelters of Hamburg describe this action as a "historic breach of taboo"¹¹⁹.

Recommendations

We recommend the following to the Federal Government and Länder

- » strengthen the National Coordination Office and use it to establish a uniform definition of violence against women and domestic violence that closely follows the standards of the Istanbul Convention, takes all forms of violence into account, and is incorporated into all relevant (political) strategies and legislative procedures in a long-term and reliable manner.
- » secure the mandate for monitoring the implementation of the Istanbul Convention on a permanent basis in order to ensure evidence-based evaluation in the long term. This requires the monitoring to be enshrined in law at the DIMR.
- » comprehensive programmes should be established for the long term.
- » introduce a central national definition of gender-specific violence against women in accordance with *Article 3 of the IC* and apply this definition in all areas of law, institutions and authorities (e.g. residence status law).
- » establish and attune coordination structures at federal and Länder level to enable comparability of results, avoid duplication of structures and create an overview of existing monitoring and evaluation functions.
- » revise the Protection against Violence Strategy, underpin it with concrete information on funding and long-term reliability, and anchor intersectional approaches throughout. We also recommend developing indicators that can be used to monitor implementation through systematic monitoring.
- » urgently place particularly vulnerable groups at the centre of effective, comprehensive and co-ordinated political strategies, align them intersectionally as defined and recommended by

¹¹⁷ *ibid.*

¹¹⁸ Monitor 2025: Schutzlose Frauen: Misshandelt und Abgeschoben, in: ARD Mediathek 24.07.2025, [online] <https://www.ardmediathek.de/video/monitor/schutzlose-frauen-misshandelt-und-abgeschoben/das-erste/Y3Jp-ZDovL3dkci5kZS9CZWl0cmFnLXNvcGhvcnEtMmFiOTQ3M2MtNDU0Yi00MTFILTkzMGMtMzQ5NWQ1NTY3Y-jM2> (accessed on 14.08.2025).

¹¹⁹ Autonome Hamburger Frauenhäuser Safe shelters in danger: Brutal eviction from Hamburg women's shelter 8.11.2024. [online] <https://hamburgerfrauenhaeuser.de/in-aktion/infos/artikel/sichere-schutzraeume-in-gefahr-brutale-abschiebung-aus-hamburger-frauenhaus> (accessed on 14.08.2025).

the Council of Europe, and implement this perspective across all departments in all measures in order to ensure non-discriminatory implementation (*Article 4(3) IC*)¹²⁰.

- » coordinate policy strategies for protection against gender-specific violence (such as Länder action plans) more closely, update them regularly and develop them further in accordance with uniform standards in order to do justice to the societal nature of gender-specific violence. Reliable rules on responsibilities and financial planning security are essential for this.
- » ensure that Länder action plans take into account all forms of violence and survivor groups and systematically incorporate the perspectives of those affected.
- » further develop the federal-state working group as a participatory body and review whether it works in a manner that addresses all forms of violence falling within the scope of the Istanbul Convention. Civil society expertise and the perspectives of those affected should be ensured in this process.
- » comply with the requirements of the GREVIO 2022 baseline evaluation report.

Instead of symbolic increases in penalties, there is a need for holistic, effective and preventive protection against violence that counteracts gender-stereotypical approaches and takes structural aspects into account.

¹²⁰ Sosa, Lorena & Mestre i Mestre, Ruth 2022: Ensuring the Non-Discriminatory Implementation of Measures against Violence against Women and Domestic Violence: Article 4, Paragraph 3, of the Istanbul Convention. Strasbourg: Council of Europe.

Article 8 – Financial resources

Background

German authorities have not yet complied with GREVIO's demands for adequate human and financial resources.

Federal networking agencies working on violence against women and girls are doing important work to support the implementation of the Istanbul Convention in policy and practice. **NGOs**, some of which are financially supported by the BMBFSFJ (*bff*, *Frauenhauskoordination*, *KOK*, *Weibernetz*, *DaMigra*, *BAG perpetrator work domestic violence* **still have no financial security beyond temporary project funding**. Continuous work in the area of violence protection is therefore not guaranteed, as was evident, among other things, in the case of the umbrella organisation of migrant women's organisations DaMigra, which was threatened with cuts in November 2024¹²¹.

Only one federal state (Land) provides financial resources for the coordination of intervention and prevention in the **healthcare system** in cases of domestic and sexual violence. This has been the case since 2010 for the S.I.G.N.A.L. *Coordination and Intervention Centre* in Berlin (see Article 20). Although an analysis of various Länder action plans reveals a growing awareness of healthcare and the expansion of trauma therapy services, there is a lack of structural approaches for strategic and financial improvement¹²². There is still a lack of nationwide networking among NGOs and actors active in the field.

Länder networking and coordination offices of specialist counselling and support centres and support facilities often receive no or insufficient financial resources. One example is the *state co-ordination office in the network of women's and girls' counselling centres against violence in Lower Saxony*, which was funded as a model project from 2020 to 2022, after which funding was discontinued¹²³. One of the few exceptions is the *Initiative for Women (SCHIFF)*, which is implemented by the Landesverband Frauenberatung Schleswig-Holstein e. V. (LFSH) and receives long-term funding of €117,000 per year from the (federal) Land for its expert accompaniment of the implementation of the Istanbul Convention and projects against structural violence¹²⁴. Furthermore, Länder networks run by and for women with disabilities are not consistently funded in line with their needs, meaning that in some cases no staff can be employed. This also applies to financial support from the federal and Länder governments for projects specifically aimed at women with disabilities who are affected by violence.

121 DaMigra 2024: Open letter to politicians and civil society: DaMigra's existence is under threat., in: ebd. 27.11.2024, [online] <https://www.damigra.de/meldungen/offener-brief-an-politik-und-zivilgesellschaft-damigras-existenz-ist-bedroht/> (accessed on 11.05.2025).

122 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 116.

123 Verbund der niedersächsischen Frauen- und Mädchenberatungsstellen gegen Gewalt o.J.: Geschichte des Verbundes, in: ebd. o. A., [online] <https://frauen-maedchen-beratung.de/geschichte/> (accessed on 04.07.2025).

124 Schleswig-Holstein 2023: Schleswig-Holsteinische Initiative für Frauen, in: ebd. 13.02.2023, [online] https://www.schleswig-holstein.de/DE/landesregierung/themen/soziales/schutz-von-frauen-vor-gewalt/Projekte/_documents/projekte_schiff (accessed on 20.08.2025).

Funding of specialist counselling and support centres and women's shelters See Articles 18 and 22.

The *cost study* commissioned by the BMFSFJ *on the support system for survivors of domestic and gender-specific violence* shows that a good quarter of the costs for specialist counselling and support centres were **voluntarily funded** by municipalities and another quarter was funded through specialist counselling and support centres' **own funds**¹²⁵. Nationwide, only 98 million euros were available per year. According to the study, at least double this amount would be needed **to meet demand**, and depending on the criteria applied up to **nine times as much**. In addition to the funds provided by the federal government from 2027 onwards, reliable funding from the Länder and municipalities is needed. However, there is a tendency for municipalities to reduce their own funding due to federal subsidies, which means that municipal funds can no longer be reliably calculated (see *question 4*).

To date, most specialist counselling and support centres are not fully accessible and access for migrant and refugee women and/or for women with multiple problems (including mental illness, homelessness, drug use and poverty) remains inadequate. The federal government's 2020–2024 investment programme enabled 34 women's shelters and 5 specialist counselling and support centres to become barrier-free or more accessible for the first time. However, this programme was particularly difficult to access for small providers and ambulatory (outpatient) specialist counselling and support centres. Survivors with disabilities still lack good access here (see chapter "*Status of implementation of the IC for intersectionally discriminated groups – women with disabilities*").

Further information on funding of specialist counselling and support centres and women's shelters can be found in Articles 18 and 22.

Funding for civil society/NGOs

Since 2018, the Istanbul Convention Alliance has been critically monitoring the implementation of the Istanbul Convention from a civil society perspective. It has been operating without a coordination office since 2022. Since then, alliance councillors have been performing coordination tasks using resources from their associations or on a voluntary basis. The other organisations and experts also have no additional human or financial resources available for their work in the alliance.

With regard to **funding from the federal states and municipalities**, the situation has remained unchanged since the last alternative report¹²⁶. According to recommendations from key professional associations, €1,646.1 million is needed *annually* to provide quantitative and qualitative resources for women's shelters and specialist counselling and support centres¹²⁷. Further information on funding **of violence protection in general support services** can be found in *Article 20*.

Regarding question 4

Please provide information on any new development since the adoption of GREVIO's baseline evaluation report on your country concerning the allocation of appropriate and sustainable financial

125 Ruschmeier, René et al. 2023: Kostenstudie zum Hilfesystem für Betroffene von häuslicher und geschlechtsspezifischer Gewalt, in: bmfsfj 31.10.2023, [online] <https://www.bmfsfj.de/resource/blob/240216/969bd-2f27283109c202a07928c0aa480/kostenstudie-zum-hilfesystem-fuer-betroffene-von-haeuslicher-und-geschlechtsspezifischer-gewalt-data.pdf> (accessed on 11.05.2025).

126 BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf>, S. 20ff (accessed on 30.06.2025).

127 Ruschmeier, René et al. 2023: Kostenstudie zum Hilfesystem für Betroffene von häuslicher und geschlechtsspezifischer Gewalt, in: BMFSFJ 31.10.2023, [online] <https://www.bmfsfj.de/resource/blob/240216/969bd-2f27283109c202a07928c0aa480/kostenstudie-zum-hilfesystem-fuer-betroffene-von-haeuslicher-und-geschlechtsspezifischer-gewalt-data.pdf>, S. 11 (accessed on 11.05.2025).

and human resources for the implementation of integrated policies, measures and programmes to prevent and combat all forms of violence covered by the Istanbul Convention.

The **Violence Assistance Act** can bring about improvements at the local level compared to the critical status quo. The following should be noted with regard to **the financing framework**:

The federal government is providing €2.6 billion for the necessary expansion of the support system in the period 2027–2036. In view of the (annual) costs of around €670 million forecasted by the federal government's cost study, the burden is shared between the federal government and the Länder on a 1/3 to 2/3 basis. The federal government's funding is proportional funding. It is urgently necessary for the individual (federal) Länder to increase the funds provided by the federal government to the extent necessary and to ensure that these funds actually reach the support structure. The support system can only be strengthened and expanded if the funding exceeds the current level. The implementation of the entitlements enshrined in the Violence Assistance Act requires that new resources be made available in addition to existing ones – **not to replace existing financial responsibilities, but for the targeted further structural development of the counselling/support and protection system**. Civil society has reason to be concerned that the federal and Länder funds earmarked for this purpose could in future be used merely for redistribution, by restricting or replacing existing municipal responsibilities and expenditure. This would not lead to any fundamental change in the actual support structures – and the expectations associated with the law would remain largely unfulfilled. For the law to be effective, rapid, clear and sustainable financing agreements between Länder and municipalities are needed to ensure the expansion and provision of a needs-based support system (also from an intersectional perspective).

The demands of GREVIO *“to introduce adequate long-term funding structures for the specialist service provision in order to ensure their availability and accessibility as required”*¹²⁸ have therefore not yet been implemented.

Funding for the work of federal ministries in the area of violence

The amounts listed by ministries in the context of Protection against Violence tStrategy measures are not meaningful. In some cases, multi-year periods and specific budgets are mentioned, while in others, annual amounts or unspecific references such as *“provided for in the individual budget plan”*, *“not quantifiable”* or *“not of budgetary consequence”* are given. In addition, the strategy also mentions measures that can only be partially attributed to the implementation of the IC¹²⁹. It is not clear from the overall strategy whether there is a review mechanism within the ministries for the actual implementation of the listed measures and the financial resources used. In order to have an impact on society, the strategy must be backed by additional financial resources. For example, Title 86 (*Federal Initiative “Protection of Refugees in Refugee Accommodation”*) lists a budget for 2024. The time frame is given as *“since 2016”*, so it remains unclear whether this will be funded in the long term¹³⁰.

In its baseline evaluation report, GREVIO called for the introduction of separate budget and funding lines for all strategies, which has not been implemented in the Protection against Violence Strategy (*for Protection against Violence Strategy, see Article 7*).

The **establishment of a National Coordination Office for the implementation of the Istanbul Convention in accordance with Article 10** is to be welcomed. There is an urgent need for adequate

128 GREVIO 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany., in: BMBFSJF 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, S. 25 (accessed on 29.08.2025).

129 One example is Measure 16: *“Improve data availability/create evidence-based knowledge through various funding measures under the Health Research Framework Program.”*, BMFSFJ 2025: Gewaltschutzstrategie nach der Istanbul-Konvention, in: ebd. 06.03.2025, [online] <https://www.bmbfsfj.de/resource/blob/252132/8275196915292f8ff-4cb39ad7f158731/gewaltschutzstrategie-der-bundesregierung-data.pdf>, S. 30 (accessed on 04.07.2025).

130 ebd. S. 67

funding for such a coordination body and sufficient staff to advance the implementation of the Istanbul Convention quickly and sustainably.

The **Directive of the European Parliament and of the Council on combating violence against women and domestic violence**, which must be transposed into national law by 14 June 2027, contains important standards that promise greater protection for victims of violence in Germany. However, it is unclear what financial and human resources will be available for implementation and whether funds have been earmarked in the budget for the new structures that will be created. These include, for example, measures for prevention and skills training for all relevant professional groups in the field of digital violence, and the establishment of hotlines and crisis centres for survivors of sexual violence.

In the health sector, it is positive to note that the **Innovation Committee of the Joint Federal Committee (G-BA)** explicitly mentions the topics of *“domestic violence and sexual violence – care and prevention”* in its topic-specific funding announcement for 2024. The decision on which projects will receive funding is still pending¹³¹.

The **federal government’s overall strategy** does indeed include a budget. However, it is unclear, for example, how much of the €29.5 million will be used for research in the health sector on the topic of violence or forms of violence covered by the Convention (see *Article 7, Question 1*). The total amount of funding provided by the federal government, Länder and local authorities for preventing and combating gender-specific violence and protecting survivors has not been adjusted to actual needs since the last alternative report and remains insufficient.

It is also particularly worrying that federal networking agencies and NGOs still have no financial security and are in some cases threatened with cuts.

At the federal level in Germany, there is neither gender-based budget planning nor a gender-specific impact analysis of the funds used. Furthermore, there has still been no evaluation of government spending on combating violence. This requirement of GREVIO has not been met¹³².

Regarding question 5

Please provide information on any development concerning the provision of appropriate and sustainable financial and human resources for women’s rights organisations that provide specialist support services to victims, including those supporting migrant women and girls.

The **federal funding programme “Together against violence against women”** provided financial support for construction measures in the violence protection infrastructure and innovative measures to support women affected by violence in 2020–2024. The goal of *“closing known gaps in the support system for women affected by violence and their children and further advancing the needs-based expansion of the support system in Germany”*¹³³ was not achieved during this period, in the view of the associations. Nor was there any measurable *“improvement in access for groups that had previously been insufficiently reached”*¹³⁴. This had already been pointed out by associations and organisations at the start of the programme¹³⁵.

131 Innovationsausschuss beim Gemeinsamen Bundesausschuss (G-BA) 2024: Neue Versorgungsformen: Innovationsausschuss veröffentlicht vier neue Förderbekanntmachungen, in: GBA 22.03.2024, [online] <https://www.g-ba.de/presse/pressemitteilungen-meldungen/1174/> (accessed on 23.07.2025).

132 GREVIO 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany, 11. Mai 2011 (Istanbul-Konvention) in Deutschland, in: BMBFSJF 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, S. 25 (accessed on 29.08.2025).

133 BMBFSJF o.J.: Bundesförderprogramm, in: ebd. o. A., [online] <https://www.gemeinsam-gegen-gewalt-an-frauen.de/bundesfoerderprogramm/> (accessed on 11.05.2025).

134 ibd.

135 Hecht, Patricia 2022: Auf dem Trockenen. Aus- und Umbau von Frauenhäusern, in: taz 21.02.2022, [online] <https://taz.de/Aus-und-Umbau-von-Frauenhaeusern/!5835848/> (accessed on 11.05.2025).

The programme funds were used to rebuild 48 women's shelters (374 family places/868 beds) and build 70 new women's shelters (191 family places/404 beds). In order to meet the IC benchmark, Germany would need 18,103 more beds in women's shelters¹³⁶.

Despite the urgent need to improve protection against violence, in some cases it was not even possible to apply for the €30 million made available annually¹³⁷. In particular NGOs operating women's shelters, safe houses and counselling and support centres do not have the human resources to meet the high requirements of a funding application. Preparing the application took around nine months, even though the project was supposed to be implemented by the end of 2024¹³⁸. As a result, major structural changes have not been feasible for many organisations in terms of personnel, time or finances, meaning that the funds have not been accessed.

With the **adoption of the GewHG**, the government has set an important milestone for the implementation of *Articles 22 and 23* of the IC, according to which a sufficient number of suitable and easily accessible **shelters** and low-threshold, local **specialist counselling and support centres** for women affected by violence and their children must be provided (*for specialist counselling and support centres, see Article 22*). The provision for uniform, nationwide funding of shelters (2.6 billion euros) can improve access to shelters for women affected by violence¹³⁹. However, the legal entitlement will not apply until 2032, meaning that until then, women affected by violence and their children will continue to be prevented from accessing shelters due to (financial) barriers. Long waiting lists at **specialist counselling and support centres** for women affected by violence also document an urgent need for nationwide expansion. An obligation to *expand shelters to make them accessible* was not included in the law and is only found as a legally non-binding target provision, although such a basis is required by the monitoring body under *Article 10 IC*¹⁴⁰. The text of the law states under § 6 Requirements for facilities: *"The spatial layout shall protect the privacy of persons affected by violence and promote accessible services"*¹⁴¹. The current wording allows for different interpretations and does not create a reliable basis for the expansion of barrier-free access to shelter places. Existing shelters that are unable to carry out renovations to improve accessibility must be granted preservation of the status quo¹⁴².

The urgently needed **expansion of the missing shelters** remains a key challenge. Since the last alternative report, the number of places has not changed significantly. There is still a shortage of over 13,000 places of refuge in Germany¹⁴³. The *35th GFMK* in June 2025 underlined the time-critical need and called on the Federal Government to contribute sufficiently to the primary construction investment costs of the federal states until the legal entitlement comes into force¹⁴⁴. The *federal ministries responsible for women, finance and infrastructure* were asked to develop a corresponding

136 Ruschmeier, René et al. 2023: Kostenstudie zum Hilfesystem für Betroffene von häuslicher und geschlechtsspezifischer Gewalt, in: bmfsfj 31.10.2023, [online] <https://www.bmfsfj.de/resource/blob/240216/969bd-2f27283109c202a07928c0aa480/kostenstudie-zum-hilfesystem-fuer-betroffene-von-haeuslicher-und-geschlechtsspezifischer-gewalt-data.pdf>

137 BT-Drucks. 20/8938, S. 1.

138 BT-Drucks. 20/8938, S. 3.

139 Bundesregierung 2025: Bessere Unterstützung für Gewaltopfer, ebd. 14.02.2025, [online] <https://www.bundesregierung.de/breg-de/service/archiv/gewalthilfegesetz-2321756> (accessed on 11.05.2025).

140 Weibernetz e.V. 2025: Geschafft: Gewalthilfegesetz vom Bundestag beschlossen, in: ebd. 03.02.2025, [online] <https://www.weibernetz.de/ar/geschafft-gewalthilfegesetz-vom-bundestag-beschlossen.html> (accessed on 11.05.2025); DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 237.

141 GewHG, § 6, Abs. 4, Satz 3.

142 ZIF 2024: Stellungnahme der Zentralen Informationsstelle Autonomen Frauenhäuser zum Referent*innenentwurf zur Erarbeitung eines Gesetzes für ein verlässliches Hilfesystem bei geschlechtsspezifischer und häuslicher Gewalt, [online]: <https://autonome-frauenhaeuser-zif.de/wp-content/uploads/2024/11/ZIF-StN-Refentwurf-GewHG-20.11.2024.pdf>, S. 10 (accessed on 10.08.2025).

143 Frauenhauskoordinierung e.V. 2024: Bundesweite Frauenhausstatistik 2023, in: ebd. o.A., [online] https://www.frauenhauskoordinierung.de/fileadmin/redakteure/Publikationen/Statistik/2024-10-08_Langfassung_Frauenhausstatistik_2023_final.pdf, S. 9 (accessed on 11.05.2025); DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 186.

144 GFMK 2025: Beschlüsse und Entschlüsse 35. Konferenz der Gleichstellungs- und Frauenministerinnen und -minister, -senatorinnen und -senatoren der Länder. Gewalthilfesystem gemeinsam bauinvestiv stärken, in: GFMK o.A., [online] https://www.gleichstellungsministerkonferenz.de/documents/35-gfmk-hauptkonferenz-protokoll_1753091667.pdf, TOP 7.5 (accessed on 04.07.2025).

federal programme. The cost calculations made to date and the federal government's contribution as determined so far are considered to be too low. Concrete action plans for increasing the number of places by the federal states are not yet known.

Staffing levels in women's shelters are insufficient across the board and have hardly improved¹⁴⁵. The staff shortages that exist in counselling women, children and young people and in the administration of the facilities lead to a high workload for the employees in the facilities¹⁴⁶.

It is also unclear to what extent **general support services** (e.g. structural changes to improve protection against violence or further training) and **networking with specialist support services** will be financially supported as part of the implementation of the GewHG in the federal states¹⁴⁷. There is concern that municipalities will withdraw from funding due to the fact that the Violence Assistance Act addresses federal and Länder governments. The funding currently provided by municipalities for women's support services as so-called "*voluntary contributions*" is an important component in maintaining the support system. If this existing funding were to be discontinued, the funds provided for in the Violence Assistance Act, which are already too low, would not be able to guarantee a corresponding improvement.

There is not yet a separate budget and funding line and no adequate human and financial resources for this area.

Recommendations

We recommend

- » secure and long-term funding structures for the women's support system for organisations working to implement the IC and to protect against gender-specific violence in all its forms – especially those working to protect particularly vulnerable groups. This includes financial support for networking.
- » ensuring and establishing sustainable, long-term funding for specialist support services under the Violence Assistance Act, to be jointly funded by the federal government, the Länder and municipalities.
- » an intersectional approach to funding: ensuring that the needs of women with disabilities, homeless women, migrant women and refugees, as well as trans* women, inter* and non-binary persons who are affected by violence are taken into account.
- » sufficient financial and human resources for federal ministries and the National Coordination Office for the effective implementation of the IC.
- » Provision of resources in line with needs in the federal Länder for the implementation of the IC and the Violence Assistance Act, including support for networking centres and civil society co-ordination centres in specialist support services and general support services.
- » financial participation of the federal government in the construction investment costs for shelters in the federal Länder until the *GewHG* comes into force in 2032 and beyond, through the establishment of a federal programme for structural support.

¹⁴⁵ Ruschmeier, René et al. 2023: Kostenstudie zum Hilfesystem für Betroffene von häuslicher und geschlechtsspezifischer Gewalt, in: BMBFSFJ 31.10.2023, [online] <https://www.bmfsfj.de/resource/blob/240216/969bd-2f27283109c202a07928c0aa480/kostenstudie-zum-hilfesystem-fuer-betroffene-von-haeuslicher-und-geschlechtsspezifischer-gewalt-data.pdf>, S. 71 (accessed on 11.05.2025).

¹⁴⁶ ebd. S. 77

¹⁴⁷ Bundesverband Trans* 2025: Das Gewalthilfegesetz kommt – aber schützt explizit nur Frauen, in: ebd. 31.01.2025, [online]: <https://www.bundesverband-trans.de/gewalthilfegesetz-kommt/> (accessed on 05.2025).

Article 11 – data collection and research

Background

Administrative data collection in Germany does not comply with the requirements of *Article 11* of the IC¹⁴⁸. In particular, criticism has been levelled at the high degree of fragmentation of data between relevant authorities and services, the lack of harmonised and systematically disaggregated data¹⁴⁹ and the lack of statistics on the entire course of a case of violence. This situation remains unchanged (see *questions 6, 7 and 8*).

The main task of **the DIMR's National Rapporteur Mechanism on gender-based violence** is the human rights based monitoring of gender-specific and domestic violence in Germany in order to observe and evaluate the extent of such violence and the status of implementation of the Istanbul Convention. Among other things, it published a data report on gender-specific and domestic violence in Germany in 2023¹⁵⁰ and, in December 2024, the first Monitor on Violence against Women, which is to be published regularly¹⁵¹. The monitor evaluates police data (*PKS, KPMD*) and data from support services on the incidence of violence in the years 2019–2023, as well as data based on a comprehensive survey at federal Länder level from the years 2020–2022, according to the criteria of the Istanbul Convention. It focuses on the following topics: *prevention, access to protection and counselling, custody and visitation rights, femicide, protection against violence, asylum and migration, and the digital dimension of violence*. To this end, the National Rapporteur Mechanism on gender-based violence uses indicators developed in advance on the basis of the Istanbul Convention to assess the status of its implementation, which are based on the methodology of the UN High Commissioner for Human Rights (*UNHCR*). A key finding is that there are still significant data gaps in the analysis of the status of implementation (see further recommendations of the Monitor).

At the **35th GFMK in June 2025**, several positive decisions were taken regarding the implementation of the Istanbul Convention in Germany¹⁵². It calls for more research into gender-specific violence¹⁵³, including reliable data on multiple discrimination and intersectionality – both on the extent of violence and on access to general support services and specialist support services.

The first results of the dark field study **“Living Situation, Safety and Stress in Everyday Life” (LeSuBIA)** are announced for the end of 2025. The last population-wide survey on violence against

148 GREVIO 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany., BMBFSFJ 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf> (accessed on 07.08.2025).

149 Ruschmeier, René et al. 2023: Kostenstudie zum Hilfesystem für Betroffene von häuslicher und geschlechtsspezifischer Gewalt, in: bmbfsfj 31.10.2023, [online] <https://www.bmbfsfj.de/resource/blob/240216/969bd-2f27283109c202a07928c0aa480/kostenstudie-zum-hilfesystem-fuer-betroffene-von-haeuslicher-und-geschlechtsspezifischer-gewalt-data.pdf>, S. 77 (accessed on 11.05.2025).

150 DIMR 2023: Bericht über die Datenlage zu geschlechtsspezifischer Gewalt gegen Frauen und häuslicher Gewalt in Deutschland. Grundlagen für ein Umsetzungsmonitoring zur Istanbul-Konvention. in: ebd. 08.2023, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Weitere_Publikationen/20230831_Datenbericht_gG.pdf (accessed on 07.07.2025).

151 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd..

152 GFMK 2025: Beschlüsse und Entschlüsseungen 35. Konferenz der Gleichstellungs- und Frauenministerinnen und -minister, -senatorinnen und -senatoren der Länder. Gewalt Hilfesystem gemeinsam bauinvestiv stärken, in: GFMK o. A., [online] https://www.gleichstellungsministerkonferenz.de/documents/35-gfmk-hauptkonferenz-protokoll_1753091667.pdf, TOP 7.1ff (accessed on 04.07.2025).

153 ebd., TOP 7.13 (accessed on 04.07.2025).

women in Germany dates from 2004¹⁵⁴. LeSuBiA is a cross-gender dark field (reported and unreported cases) survey focusing on intimate partner violence, sexual violence and digital violence in Germany. It is not known whether the survey will be repeated or even conducted on a regular basis. The alliance criticises the fact that this study is not gender-specific in its design or focused on gender-specific violence. It is being conducted by the BKA without the active participation of gender-critical research. The research design, methods and evaluation are not being carried out by gender researchers. There are therefore fears that experiences of violence, the consequences of violence, dynamics and power relations in the development of violence will not be critically examined, and that the gender-political dimension of violence against women and gender-specific violence will therefore not be visible. Due to the survey design, it can be assumed that intersectionally discriminated persons, such as people without a permanent residence or registered address, will not be reached or will be insufficiently represented. In addition, people experiencing homelessness are less likely to report incidents of violence, partly due to negative experiences with the police and law enforcement agencies¹⁵⁵ – the number of unreported cases of violence against people experiencing homelessness is therefore estimated to be high¹⁵⁶.

In Germany, there is still a lack of sufficiently differentiated administrative data and, as GREVIO criticised¹⁵⁷, there is still a lack of regular representative population surveys on all forms of gender-specific violence, in particular forced marriage, female genital mutilation, abortion, sterilisation without free and informed consent, and economic violence – especially from an intersectional perspective.

These shortcomings are exacerbated by structural problems: data collection suffers from a lack of continuity due to uncertain funding and fragmented collection, partly as a result of differences in how it is organised by the (federal) Länder (see Article 7, Chapter 1).

Regarding question 6

Please provide information on any new development since the adoption of GREVIO's baseline evaluation report on your country on the introduction of data collection categories such as type of violence, sex and age of the victim and the perpetrator, the relationship between the two and where it took place, for administrative data of relevance to the field of violence against women and domestic violence emanating from law enforcement agencies, the justice sector, social services and the public health care sector.

Contrary to the GREVIO recommendation on this issue, still no relevant data collection takes place in **the health sector**. The report on the data situation regarding gender-specific violence against women and domestic violence in Germany identifies a significant data gap¹⁵⁸. There is a lack of systematic data on needs assessment and on (acute) medical and therapeutic care for survivors of gender-specific violence, especially domestic and sexual violence. Based on feedback from the support system, it can be assumed that there is a glaring lack of therapeutic care.

154 Müller, Ursula et al. 2004: Eine neue Lebenssituation, Sicherheit und Gesundheit von Frauen in Deutschland. Ergebnisse der repräsentativen Umfrage zu Gewalt gegen Frauen in Deutschland, in: BMBFSFJ 09.2004, [online] <https://www.bmbfsfj.bund.de/resource/blob/84328/3bc38377b11cf9ebb2dcac9a8dc37b67/langfassung-studie-frauen-teil-eins-data.pdf> (accessed on 01.07.2025).

155 Neupert, Paul (2024): Gewalt gegen wohnungslose Menschen, in: wohnungslos 2/24.

156 BMWSB 2025: Wohnungslosenbericht der Bundesregierung 2024, in: ebd. 08.01.2025, [online] <https://www.bmwsb.bund.de/SharedDocs/pressemitteilungen/DE/2025/01/Wohnungslosenbericht.html> (accessed on 28.07.2025).

157 GREVIO 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany, BMBFSFJ 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, Ziff. 67f (accessed on 07.08.2025).

158 DIMR 2023: Bericht über die Datenlage zu geschlechtsspezifischer Gewalt gegen Frauen und häuslicher Gewalt in Deutschland. Grundlagen für ein Umsetzungsmonitoring zur Istanbul-Konvention. in: ebd. 08.2023, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Weitere_Publikationen/20230831_Datenbericht_gG.pdf, S. 32 (accessed on 07.07.2025).

There are already good templates that could be used for the introduction of data collection. For example, in 2022, the “*Berlin Round Table – Healthcare for Domestic and Sexual Violence*” presented the discussion paper “**(Routine) Data Collection in Berlin Healthcare on Domestic and Sexual Violence**”, which contains a proposal for a data set and suggests a pilot project¹⁵⁹. A 2020 analysis by the DIMR on acute care after sexual violence and the implementation of Article 25 of the Istanbul Convention contains recommendations on data collection on the use of (forensic) medical care after sexual or domestic violence¹⁶⁰.

There have been notable developments in the evaluation of police data. For example, the **Federal Criminal Police Office (BKA)** now publishes **three federal situation reports** on topics covered by the Istanbul Convention. There have also been changes in the recording of hate crimes:

Since July 2023, the **Federal Situation Report on Domestic Violence** has been published annually, replacing the previous criminal statistics analysis of intimate partner violence published since 2016¹⁶¹. In addition to intimate partner violence, offences involving intra-family violence are now also considered. The report is broken down according to most of the minimum disaggregation criteria required by GREVIO (see above), but the Federal Situation Report does not distinguish between forms of violence as defined by the IC, but rather according to selected offences. It is not possible to classify the incidence of violence in the context of domestic violence in the police’s known cases according to the forms of violence.

In November 2024, the **Federal Situation Report “Gender-specific crimes against women”** was published for the first time on the basis of federal crime statistics, which is to follow an annual cycle¹⁶². On the one hand, it highlights hate crimes (KMPD-PMK data, see below) and, on the other hand, specific offences that primarily affect women and are predominantly committed to their detriment. It makes explicit reference to the Istanbul Convention. With the exception of the analysis of the socio-spatial context, the report is based on the minimum disaggregation criteria required by GREVIO. The offences are divided into overlapping case groups: sexual offences, “femicide”, domestic violence, digital violence and trafficking in human beings – the latter is not covered by the Istanbul Convention. The report also contains data on stalking (however, combined with “coercion” and “threats”), forced marriage, sexual harassment and FGM. The Federal Situation Report therefore partially considers forms of violence that must be taken into account according to the Istanbul Convention. However, it does not collect data on all forms of violence, such as economic violence, forced sterilisation and forced abortion. The selection of criminal offences and their allocation to case groups is too limited. Furthermore, the category of femicide is based on a different definition than is generally used, which makes it difficult to compare the figures¹⁶³. Important data on insults, defamation and slander is missing, as it is not recorded in the PKS.

The **Criminal Police Reporting Service for Politically Motivated Crime** collects data on politically motivated crime under the heading of “*hate crime*”. This includes all offences motivated by group-related prejudice. Since 1 January 2022, a distinct new subcategory of “misogynistically” politically motivated crime, “has been introduced. It only covers gender-specific violence to a limited extent: classification into the various forms of violence is only possible with regard to physical violence – resulting in physical injury – and insults, if these have been reported. The number of reported victims and crimes is extremely low.

159 RTB et al. 2022: Diskussionspapier. (Routine-)Datenerhebung in der Berliner Gesundheitsversorgung zu häuslicher und sexualisierter Gewalt, in: ebd. 11.2022, [online] <https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2023-03/RTB%20Diskussionspapier%20Web.pdf> (accessed on 23.07.2025).

160 Fischer, Lisa 2020: Akutversorgung nach sexualisierter Gewalt. Zur Umsetzung von Artikel 25 der Istanbul-Konvention in Deutschland, in: DIMR 11.2020, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Akutversorgung_nach_sexualisierter_Gewalt.pdf, S. 95 (accessed on 15.05.2025).

161 BKA o.J.: Bundeslagebilder Häusliche Gewalt, in: ebd. o.A., [online] https://www.bka.de/DE/AktuelleInformationen/StatistikenLagebilder/Lagebilder/HaeuslicheGewalt/haeuslicheGewalt_node.html (accessed on 28.07.2025).

162 BKA 2024: Geschlechtsspezifisch gegen Frauen gerichtete Straftaten – Bundeslagebild 2023, in: ebd. 19.11.2024, [online] <https://www.bka.de/SharedDocs/Downloads/DE/Publikationen/JahresberichteUndLagebilder/StraftatenGegenFrauen/StraftatengegenFrauenBLB2023.html> (accessed on 28.07.2025).

163 ebd.

In 2022, the subcategory of hate crimes against “*gender diversity*” was added, which presumably covers crimes against trans* women and girls as well as intersex and non-binary people. However, here too, the critically noted limited statistical usefulness for depicting the extent of gender-specific violence applies.

In August 2025, the **short report on figures and analyses from the Anti-Feminism Reporting Centre** was published¹⁶⁴. It shows how many and which anti-feminist incidents, gender-specific violence, sexism, discrimination and group-related hostility were reported. As the centre only began its work in 2023, comparative figures are not yet available. However, what is striking is the considerable number of attacks overall, the high level of concern among civil society activists and the high proportion of digital violence.

In the area of **social institutions**, *Section 10* of the GewHG, “*Statistics; Regulatory Authority*,” provides for the compilation of annual statistics from 2028 onwards on **access to protection and counselling/support** in cases of gender-specific and domestic violence. However, the categories proposed in the text of the law are formulated as “optional” characteristics, so it remains to be seen what data will actually be collected.

At the 35th GFMK, the Federal Government was asked to look into combining the planned federal statistics of the GewHG with the monitoring of the National Rapporteur Mechanism on gender-based violence on the implementation of the IC in terms of efficiency and knowledge gain (and to avoid double surveys and parallel structures)¹⁶⁵.

According to the resolution, the GFMK expresses the concern that a joint central office within the meaning of *Section 4 (3) sentence 2 GewHG* should be established for all 16 (federal) Länder – and not, as currently provided for in the law, a competent office at the (federal) Länder level. The office should have an overview of the nationwide occupancy situation and capacity of women's shelters and be able to place women seeking protection with their children in shelters throughout the country. This serves the purposes of efficiency and effectiveness and can ensure cross-state accommodation¹⁶⁶. Following the decision of the GFMK, the establishment of such a central office should be linked to the introduction of a corresponding programme that provides an overview of the occupancy situation and allows for statistical evaluation.

Regarding question 7

Where relevant, please provide information on any new development since the adoption of GREVIO's baseline evaluation report on your country to enable disaggregated data collection:

a. ...on the number of emergency barring and protection orders and the number of breaches and the resulting sanctions;

In terms of **the number of urgent protection orders and protection orders, the number of violations** of these orders and the resulting sanctions, there have been no developments since 2022 with regard to the collection of disaggregated data by the authorities. In 2025, the GFMK decided to ask the IMK to work towards the uniform collection of data on police measures taken by the federal Länder, including urgent and measures of protection in connection with domestic violence¹⁶⁷. This also includes the number of expulsions. However, even a positive IMK decision would not completely

¹⁶⁴ Meldestelle Antifeminismus 2025: Antifeministische Zustände sichtbar machen! Antifeministische Vorfälle in Deutschland 2024, in: ebd. 08.2025, [online] https://antifeminismus-melden.de/wp-content/uploads/sites/7/2025/08/Antifeminismus2024_KurzberichtMeldestelle_LOLAeV2025_WEB.pdf (accessed on 18.08.2025).

¹⁶⁵ GFMK 2025: Beschlüsse und Entschlüsse 35. Konferenz der Gleichstellungs- und Frauenministerinnen und -minister, -senatorinnen und -senatoren der Länder. Fortführung des bundeseinheitlichen Monitorings zur Umsetzung der Istanbul-Konvention, in: GFMK o. A., [online] https://www.gleichstellungsministerkonferenz.de/documents/35-gfmk-hauptkonferenz-protokoll_1753091667.pdf, TOP 7.4 (accessed on 04.07.2025).

¹⁶⁶ ebd., Top 7.14

¹⁶⁷ ebd., TOP 12.1 (accessed on 04.07.2025).

remedy this deficit, as violations of emergency and protection orders and the resulting sanctions would still be excluded from data collection. The evaluation in the Monitor Violence against Women revealed fundamental data gaps and differences in data collection between the respective authorities¹⁶⁸:

Regarding the number of urgent and protection orders issued by the police:

Less than half of the (federal) Länder are able to provide information on the number of emergency and protection orders issued in cases of domestic violence. The data is undifferentiated and inconsistent¹⁶⁹.

On the number of violations of urgent and protection orders issued by the police in connection with police sanctions:

It is not possible to make a statement on the number of violations and the resulting coercive measures applied in practice due to a lack of data in the (federal) Länder; only one (federal) Land was able to provide information on this¹⁷⁰.

On the number of civil emergency and protection orders, as well as the number of violations and resulting sanctions:

The *GewSchG* forms the legal basis for civil law protection orders against perpetrators of gender-specific violence. As part of the monitor, data beyond the insufficient publicly available data at federal state level was requested. Here, too, it is apparent that not a single (federal) Land provided data on the number of court orders issued under *Section 1* or *Section 2 of the GewSchG* or on the gender of the addressees of the orders. **No data** is available on the number of violations of these orders or the sanctions imposed¹⁷¹.

It is therefore still not possible to make statements about the frequency of certain emergency and protection measures; the data cannot be compared with each other and the number of domestic violence cases cannot be compared with the number of court protection orders under the *GewSchG*. It remains unclear whether and to what extent the various administrative and judicial protection measures in the area of domestic violence build on each other or are interlinked in their application.

The systematic collection of relevant data is essential, particularly with regard to the prevention of revictimisation of survivors of domestic violence and affected children, and in the context of preventing femicide. Only through comprehensive, cross-case data collection in the form of an integrated case management system can the extent of those cases be made visible in which institutional response deficits have contributed to revictimisation or, in extreme cases, femicide.

7.b. *...on the number of times custody decisions have resulted in the restriction and withdrawal of parental rights because of violence perpetrated by one parent against the other.*

The statistics of the family courts on decisions regarding custody/visitation rights/the residence of children still do not contain any data on whether domestic violence is present¹⁷². In custody decisions, there is often a conflict between the interests of protecting the woman and children and the right of the violent parent to have contact (*see also Article 31*)¹⁷³. An evaluation of the effects of decisions regarding renewed endangerment and revictimisation of survivors, including possible

168 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 287–302.

169 ebd., S. 293, Tabelle 39, S. 293.

170 ebd., S. 295

171 ebd., S. 298–302

172 DIMR 2023: Bericht über die Datenlage zu geschlechtsspezifischer Gewalt gegen Frauen und häusliche Gewalt in Deutschland, in: ebd. 08.2023, [online] <https://www.institut-fuer-menschenrechte.de/publikationen/detail/bericht-ueber-die-datenlage-zu-geschlechtsspezifischer-gewalt-gegen-frauen-und-haeuslicher-gewalt-in-deutschland>, S. 76 (accessed on 29.07.2025).

173 Franke, Lena 2023: Häusliche Gewalt im Umgangs- und Sorgerecht. Berlin: DIMR.

femicides, cannot be carried out without a corresponding data basis¹⁷⁴. The statistics of child and youth welfare services still do not contain any data on whether a risk assessment is attributable to domestic violence. Here, too, there is still a lack of data for evidence-based measures.

Regarding question 8

Please provide information on measures taken to allow cases of violence against women and domestic violence to be tracked from reporting to conviction, at all stages of the law-enforcement and judicial proceedings.

In Germany, no measures have been taken since 2022 to introduce case management systems or statistics that link police and court data and make it possible to track the progress of a case from the initial report to the criminal court decision (such as conviction or acquittal) and the enforcement of the sentence. This means that it is still not possible to draw reliable conclusions about low conviction rates or discrepancies between the number of reports and convictions, as well as recidivism rates. Accordingly, possible deficits in institutional responsiveness remain undetected¹⁷⁵.

There is also a knowledge gap in the context of asylum proceedings with regard to progress statistics¹⁷⁶. Such statistics would make it possible to record the number of asylum applications made on the grounds of gender-specific persecution and their outcomes. The BAMF's data collection on gender-specific persecution continues to refer only to persons who have been granted refugee status.

Recommendations

We endorse the recommendations of the GREVIO report, paragraph 66 (pages 26–27 in the original English version)¹⁷⁷.

And we recommend the following to the Federal Government

- » to conduct a scientific evaluation of all measures and laws aimed at preventing and punishing gender-based violence and supporting survivors in terms of their impact and effectiveness.
- » commission an expert report to clarify how routine data can be collected in healthcare in a manner that is safe for those affected, meaningful and useful for service planning.
- » to establish gender-specific violence as an integral part of the federal government's health reporting.
- » ensure the harmonisation of data collection in law enforcement and the judiciary throughout the federal government in accordance with the provisions of the Istanbul Convention
- » extend the Federal Criminal Police Office's Federal Situation Reports to cover all forms of gender-specific violence and improve comparability by moving away from the analysis of criminal offences.
- » ensure uniform and systematic collection of administrative data on police and civil law emergency and protection orders – including the number of orders, violations and sanctions – and clearly map this data in a database-supported case management system in order to monitor conviction,

174 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S.251.

175 ebd., S. 356

176 ebd. S. 313

177 <https://rm.coe.int/report-on-germany-for-publication/1680a86937>

failure and recidivism rates and identify gaps in response. The impact on affected children must also be taken into account.

- » in custody decisions, additional characteristics should be included in the statistics of the family courts to enable analyses from the perspective of domestic violence.
- » introduce progress statistics and case management systems for asylum procedures involving gender-specific persecution in order to ensure systematic analysis of the causes of flight.
- » the federal statistics on access to protection and counselling in cases of gender-specific violence and domestic violence provided for in the Violence Assistance Act should be managed centrally by a nationwide agency instead of by individual Länder as planned, in order to create transparency and enable analysis of the occupancy situation of protection facilities through a programme.

PREVENTION

Article 12 – General obligations

Background

A **comprehensive concept** for prevention of violence against women and girls and domestic violence, which would bring about an effective reduction in violence and cultural and social changes in behaviour, has not yet been developed or implemented nationwide in Germany. These approaches are only funded locally and for a limited period of time¹⁷⁸. There is a lack of a continuous, sustainable prevention strategy with primary, secondary and tertiary prevention measures, as well as of a process-accompanying and regular impact evaluation. A comprehensive concept that addresses all age and target groups, including boys and men as well as potential perpetrators and social environments, is lacking, as is participatory development with women and girls affected by violence. Measures taken to date mainly comprise unevaluated information campaigns that often address survivors and encourage them to seek help after experiencing violence. These campaigns lack multilingualism and fail to address intersectional discrimination. In addition, they only refer to a few forms of violence, primarily domestic or sexual violence. Some campaigns refer to sexual harassment and psychological violence. Very few refer to digital violence, stalking, FGM/C, forced marriage, abortion or sterilisation without free and informed consent, or economic violence. Primary prevention measures aimed at behavioural change or the empowerment of women and girls in all areas of life have hardly been taken. Women are not addressed and empowered as self-determined actors.

The active political involvement of women who have experienced violence in the development of prevention measures and public relations work as experts by experience is an important measure for empowerment that has so far been little implemented in Germany. This also applies in particular to marginalised and discriminated groups. One development at the (federal) Länder level is that advisory councils of survivors have now been established or decided upon in Bremen and Berlin to accompany the implementation of the IC¹⁷⁹. The Saxony state action plan stipulates the participation of survivors from 2027 onwards¹⁸⁰.

Tight housing markets as a factor relevant to prevention have not yet been taken into account, even though they force women and girls affected by violence to make the difficult decision between “putting up with violence” or risking homelessness¹⁸¹.

On behalf of the BMFSFJ, a **“Needs Analysis for Prevention of Gender-Specific and Domestic Violence”** was conducted¹⁸². The short version of the study was presented in June 2025. The long

178 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S.140–144.

179 Bremen sagt nein e. V. o.J.: Bremer Betroffenenbeirat Istanbul-Konvention, in: ebd. o. A., [online] <https://bremen-sagt-nein.de/betroffenenbeirat/> (accessed on 29.07.2025); Abgeordnetenhaus Berlin Drucks. 19/2029.

180 Landespräventionsrat Sachsen 2024: Landesaktionsplan des Freistaates Sachsen zur Verhütung und Bekämpfung geschlechtsspezifischer Gewalt gegen Frauen und häuslicher Gewalt in Umsetzung der Istanbul-Konvention, in: ebd. 07.2025, [online] https://www.lpr.sachsen.de/download/LAP_IK.pdf (accessed on 04.08.2025).

181 Frauenhauskoordinierung 2024: Nationwide women's shelter statistics 2023, in: ebd. 09.2024, [online] https://www.frauenhauskoordinierung.de/fileadmin/redakteure/Publikationen/Statistik/2024-10-08_Langfassung_Frauenhausstatistik_2023_final.pdf, S. 19–34 (accessed on 18.08.2024).

182 Kavemann, Barbara et al. 2025: Final report. Needs assessment for the prevention of gender-specific and domestic violence. Summary Abschlussbericht., in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafz.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraeven

version of the study has not yet been published, so the findings contained therein cannot be taken into account at this time (as of the end of August 2025). The short version provides insights into existing prevention services, prevention measures and practitioners' assessments of current prevention needs. The recommendations are aimed at all relevant actors and levels of action, including federal government, Länder, municipalities and civil society organisations. The results show that prevention measures (especially primary prevention) in Germany are very heterogeneous and their effectiveness is rarely evaluated. There is a fundamental lack of a comprehensive and long-term evidence-based prevention strategy. Adequate and secure funding for prevention measures and the evaluation of their effectiveness are prerequisites for developing an evidence-based strategy with effective measures.

Regarding question 9 (a/b/c)

Please provide information on any primary prevention measures aiming to change mentalities and attitudes in relation to violence against women and to reduce women's exposure to gender-based violence by:

- a.** *Addressing harmful gender stereotypes and prejudices, customs and traditions based on the idea of the inferiority of women;*

Measures against dangerous stereotypes and traditional ideas about gender roles based on the assumption that women are inferior are rare. In isolated cases, projects such as "*Heroes (Against Oppression in the Name of Honour)*" work at (federal) state and municipal level with young men to combat the restriction of individual self-determination by patriarchal structures¹⁸³. According to the National Rapporteur Mechanism on gender-based violence, only the state action plans of Brandenburg, Bremen, Hessen and Lower Saxony contain content on the broad topic of "*work on gender stereotypes (some explicitly)*"¹⁸⁴. Most action plans contain "*general awareness-raising on the topic*"¹⁸⁵. However, the individual measures **do not** constitute **a comprehensive, nationwide strategy**, and there is no systematic monitoring of the implementation of the planned measures.

- b.** *Addressing the heightened exposure to gender-based violence by women and girls at risk of intersectional discrimination;*

Many publicly funded or implemented measures lack an intersectional perspective and fail to take into account the increased risk for women and girls who are exposed to intersectional discrimination. Culturally sensitive, multilingual and accessible services are lacking. Vulnerable groups are rarely reached by campaigns. It remains unclear how the intersectional perspective is implemented in the Protection against Violence Strategy, particularly with regard to prevention measures. Many projects do not focus on particularly vulnerable persons¹⁸⁶.

- c.** *Encouraging all members of society, including men and boys, to contribute actively to preventing all forms of violence against women covered by the scope of the Istanbul Convention, and promoting the empowerment of women and girls in all areas of life, notably their participation in politics at all levels and in the labour market.*

tion/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdfBMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf (accessed on 19.08.2025).

183 Heroes o.J.: Startseite, in: ebd. o. A., [online] <https://heroes-netzwerk.de> (accessed on 29.07.2025).

184 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 136.

185 Bayern, Brandenburg, Bremen, Hessen, Niedersachsen, Sachsen-Anhalt; DIMR 2024: ebd., S. 135.

186 DIMR 2024: ebd., S. 141.

The initiatives “*Alliance Against Sexism*”, “*Klischeefrei*” (*Stereotype-Free*) and “*Girls’ Day*” and “*Boys’ Day*” are measures at federal level that aim to end sexism and gender stereotypes in various areas of life, including career choices. This can counteract stereotypes and traditional ideas about gender roles to a certain extent. Measures that encourage all members of society (including men and boys) to actively contribute to the prevention of all forms of violence against women and to promote the empowerment of women and girls in all areas of life have so far been insufficient. An EU-funded European cooperation project to empower women in local politics is currently also being implemented in Germany¹⁸⁷ and follows on from previous projects such as “*Aktionsprogramm Kommune*” (*Municipal Action Programme*) and “*Frauen in die Politik*” (*Women into Politics*)¹⁸⁸. The projects aim to strengthen participation of women in local politics and to remove barriers for women in this context (e.g. violence).

There is currently a lack of services to remove specific bureaucratic barriers to participation in the labour market for migrant and refugee women, e.g. with regard to the recognition of foreign qualifications and access to language courses¹⁸⁹. The term “empowerment” is found in various action plans, but is used for very different measures. Empowerment services such as intersectional feminist self-assertion and self-defence, which meet quality standards and are effective in preventing gender-based violence, are not offered nationwide and are not accessible to all due to a lack of government funding. As a result, only few women have access to these services. This affects especially women with low incomes, migrant and refugee women, and women with disabilities. The results of the BMFSFJ-commissioned needs analysis seem to indicate a high prevalence of empowerment services for women and girls. This finding should be treated with caution, not the least due to the methodology of the survey, as it asked about the existence of such services in local communities, but not about the content or quality of the services, their accessibility or the number of women and girls that were actually reached¹⁹⁰. Further, it should be noted critically that the BMFSFJ-commissioned analysis of existing research does not take into account the broad evidence base on the effectiveness of certain empowerment measures targeting women and girls for the primary prevention of gender-specific violence. Studies such as those by Barata et al. 2024¹⁹¹ and Hollander 2018¹⁹² were not included. For the development of an evidence-based national prevention strategy, it is essential to integrate measures such as feminist self-assertion and self-defence training, for example WenDo, specifically for women and girls. A positive example at the municipal level is chapter “3.2 Empowerment, Self-Assertion and Prevention” of the 2nd Action Plan of the City of Munich for the implementation of the European Charter for Equality of Women and Men with a focus on: Gender-specific violence 2022–2024, with a series of measurable actions to be taken for sustainable access to primary prevention services for empowerment and self-assertion for girls and women”¹⁹³.

187 EAF Berlin o.J.: 3R – Recognize, Resist, Rise up, in: ebd. o.A., [online] <https://www.eaf-berlin.de/was-wir-tun/modellprojekte/projekt/3r-recognize-resist-rise-up> (accessed on 11.08.2025).

188 EAF Berlin o.J.: Aktionsprogramm Kommune, in: ebd. o.A., [online] <https://www.eaf-berlin.de/was-wir-tun/modellprojekte/projekt/demokratie-und-partizipation-diversity-strken> (accessed on 11.08.2025); Frauen in die Politik o.J.: Über das Aktionsprogramm, in: ebd. o.A., [online] <https://www.frauen-in-die-politik.com/> (accessed on 11.08.2025).

189 Ergebnisse einer mündlichen Umfrage von Mitgliedorganisationen der DaMigra e.V.; DaMigra o.J.: InGeKom – Intersektionales Zentrum für Gewaltschutz und Kompetenzaufbau, in: ebd. o.A., [online] <https://www.damigra.de/projekte/ingekom/ueber-das-projekt/> (accessed on 29.07.2025).

190 Kavemann, Barbara et al. 2025: Abschlussbericht. Final report. Needs assessment for the prevention of gender-specific and domestic violence. Summary Bedarfsanalyse zur Prävention geschlechtsspezifischer und häuslicher Gewalt. Kurzfassung, in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf, S.18 (accessed on 08.2025).

191 Barata, Paula et al. 2024: A Successful Sexual Assault Resistance Program Also Reduced Intimate Partner Violence, in: *Journal of Interpersonal Violence*, Jg. 40, Heft 9–10, S. 2234–2256.

192 Hollander, Jocelyn 2018: Women’s Self-Defense and Sexual Assault Resistance: The State of the Field, in: *Sociology Compass*, Jg. 12, Heft 8.

193 Landeshauptstadt München Gleichstellungsstelle 2022: Europäische Charta für Gleichstellung von Frauen und Männern. 2. Aktionsplan der Landeshauptstadt München. Schwerpunkt: Geschlechtsspezifische Gewalt 2022–2024, in: Gleichberechtigung schützt vor Gewalt 04.2022, https://gleichberechtigung-schuetzt-vor-gewalt.de/wp-content/uploads/2022/11/2-Aktionsplan_barrierefrei.pdf (accessed on 29.07.2025).

Recommendations

We recommend

- » implementing the GREVIO recommendation on *Article 12 (paragraph 79, p. 30, baseline report¹⁹⁴)*, which is still relevant.
- » establishing primary prevention, which so far has often been neglected, as a priority in the development of evidence-based prevention strategies. While care for victims and perpetrator work are important in order to prevent further offences, the goal must be to prevent violence before it occurs.
- » to include comprehensive scientific findings and quality standards alongside standardised education programmes, when assessing effectiveness of primary prevention¹⁹⁵.
- » we refer to the recommendations for action applicable to primary prevention in the final report (short version) of the Needs Analysis for Prevention of Gender-Specific Violence and Domestic Violence – in particular recommendations under *8.1 Federal and interdepartmental development of a national research-based prevention strategy* and *8.4 Sustainable interdepartmental and cross-sectoral coordination and quality development¹⁹⁶*.
- » we also refer to the recommendation of the National Rapporteur Mechanism on gender-based violence for the regular, coordinated implementation of federal state-specific and cross-federal state exchange meetings on planned and implemented measures¹⁹⁷.
- » develop an evidence-based, intersectional strategy for the primary prevention of gender-specific violence that includes specific measures and campaigns for women and girls in vulnerable situations and all forms of violence mentioned in the Istanbul Convention.
- » when developing primary prevention strategies, take into account other factors that influence living conditions and increase vulnerability, including barriers to participation in politics and the labour market (e.g. through recognition procedures for professional qualifications and educational qualifications) and barriers to access to affordable housing.
- » establish evidence-based measures for boys and men across the board so that they can live equal, non-violent relationships with girls and women and actively promote gender equality and solidarity.

194 GREVIO 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany, BMBFSFJ 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf> (accessed on 07.08.2025).

195 When assessing the effectiveness of primary prevention, the focus should not be exclusively on evaluations of narrowly defined, standardized educational programs, but should also draw on general findings from psychology, education, and gender studies, as well as established quality standards, in order to strengthen resilience, self-assertion, self-efficacy, self-reflection, and conflict management skills in young people and adults. This also includes long-term, continuous, local measures such as gender-reflective child and youth work, gender-reflective services for adults, e.g., in neighborhood meeting places, and low-threshold services for psychosocial and health-related counseling, WHO 2019: RESPECT women – Preventing violence against women, in: ebd. 06.04.2019, [online] <https://www.who.int/publications/i/item/WHO-RHR-18.19> (accessed on 19.08.2025).

196 Kavemann, Barbara et al. 2025: Final report. Needs assessment for the prevention of gender-specific and domestic violence. Summary, in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf, S. 30f und 47f (accessed on 19.08.2025).

197 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 120

Article 14 – Education

Background

For further information, please refer to the results of **the survey on prevention in schools** in the short version of the final report *“Needs Analysis for Prevention of Gender-Specific and Domestic Violence”*¹⁹⁸. The survey covers all types of schools and all (federal) Länder. Kindergartens, universities, informal educational institutions, sports, cultural and leisure facilities, and the media – see *Article 14(2)* – were not included in the survey.

The results of the survey show that there are hardly any systematic school prevention strategies in line with the Istanbul Convention. Violence against girls and women has so far hardly been understood as gender-based violence in the school context¹⁹⁹.

*“State action plans for implementing the Istanbul Convention in schools often remain abstract or non-binding. The issue of violence against girls and women and its prevention is not explicitly addressed in school legislation or in teacher training and continuing professional development, nor is it generally included in the training of guidance counsellors and school psychologists. At best, the education plans contain frameworks such as ‘human rights’ as potential starting points. Concrete prevention programmes in line with the Istanbul Convention are not being developed by schools, also services offered by external specialist agencies have not yet been systematically established across all school types and year groups and are largely unknown to school authorities. In most cases, they do not have a broad impact due to the limited financial and human resources available to specialist agencies”*²⁰⁰.

Regarding question 10 (a/b/c/d/e)

Please provide a few examples of promising teaching or prevention programmes, materials, or initiatives for use in formal education (from pre-school to higher education):

As most prevention programmes have not been evaluated²⁰¹, it is usually not possible to make any statements about their effectiveness. An inventory of school-based prevention programmes²⁰² identified interesting and promising (partial) approaches in various (federal) Länder and areas, such as further training, orientation frameworks for teaching and for prevention projects. It is hoped that these will be explained in the long version of the project report, which has not been published at the time of finalisation of this report. They could possibly provide answers to *questions 10 a-e*.

198 Kavemann, Barbara et al. 2025: Abschlussbericht. Bedarfsanalyse zur Prävention geschlechtsspezifischer und häuslicher Gewalt. Kurzfassung, in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf (accessed on 19.08.2025).

199 *ibid.*

200 *ibid.*

201 *ibid.*

202 Glammeier, Sandra et al. 2025: Bestandserhebung schulischer Prävention, in: BMBFSFJ Veranstaltung o.A., [online] https://bmbfsfj-veranstaltung.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/2_Bestandserhebung_schulischer_Praevention.pdf (accessed on 08.08.2025).

Recommendations

- » We reiterate the recommendation on *Article 14* from the GREVIO baseline report (paragraph 90, page 32 in the original English version)²⁰³.
- » We refer to the recommendations from the BIK's 2021 alternative report, which remain relevant²⁰⁴.
- » We refer to the results published to date as part of the survey of school prevention²⁰⁵. In this context, it is particularly noteworthy that it is recommended that **school prevention work** be carried out on a transitional basis in cooperation with regional external specialist agencies, as the necessary institutional and professional development processes and school competencies are not yet in place.

We agree with the recommendations made in the conclusion of the presentation of the study results²⁰⁶:

- » *Systematic anchoring of prevention approaches that critically address power and authority dynamics:*
 - *Expansion of prevention work in cooperation with external specialist agencies.*
 - *Maintain diversity of approaches.*
 - *Plan and coordinate regionally, oblige schools, review implementation.*
 - *Establish a database.*
 - *Utilise existing expertise.*
 - *Intervention: Links to the development of protection concepts.*
 - *Explicitly anchor the topic in terms of personnel, e. g. through school equality officers and IC contact persons.*

The publication of the long version of the final report with a comprehensive evaluation and description of the programmes and projects will provide deeper insights at a later date and should be considered by GREVIO.

203 GREVIO 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany, BMBFSFJ 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf> (accessed on 07.08.2025).

204 BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf>, S. 43 (accessed on 30.06.2025).

205 ebd.: Glammeier et al. 2025

206 Glammeier, Sandra et al. 2025: Bestandserhebung schulischer Prävention, in: BMBFSFJ Veranstaltung o. A., [online] https://bmbfsfj-veranstaltung.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/2_Bestandserhebung_schulischer_Praevention.pdf (accessed on 08.08.2025).

Article 15 – Training of professionals

Background

The initial, further and continuing training of professionals in the field of gender-specific violence is hardly anchored in most training regulations of the (federal) Länder and study and examination regulations of the federal ministries. As a result, professionals are often insufficiently prepared to recognise signs of violence and provide effective support to survivors. In addition, there is a lack of awareness of the various barriers and disadvantages faced by particularly vulnerable groups. Therefore, the following content should be included in training courses to enable a gender-specific understanding of violence against women and girls: debunking rape myths, revealing the power dynamics of domestic violence and the strategies used by perpetrators of sexual violence, understanding how children are affected and how they can be supported, preventing secondary victimisation, a trauma-informed approach and a clear intersectional stance. Training courses based on these principles should be effective. The “Needs Analysis for Prevention of Gender-Specific and Domestic Violence” commissioned by the BMFSFJ also emphasises that the quality of prevention of gender-specific and domestic violence in all areas is enhanced by training²⁰⁷.

Justice and police

A quote from Munich from the *girls’ support centre “IMMA”* exemplifies the despair of actors in the field whom we asked: *“An even bigger problem and demand arising from this is that it is not possible to train family court judges. Even the few experienced and committed judges who themselves try to brief their young colleagues, to convey attitudes that convey the perspective and needs of women, mothers and children survivors of violence, say: “Judicial independence is paramount; we cannot introduce training courses, let alone mandate them.”*

Particularly in the extremely important area of **judiciary**, continuing education requirements for judges are mistakenly regarded as an infringement on judicial independence and neutrality²⁰⁸, even though the Scientific Service of the German Bundestag explicitly states in an opinion on the constitutionality of continuing education requirements for judges that judicial independence is not affected by such requirements. In its coalition agreement of 12 March 2018, the Federal Government advocated further training for judges, especially in family courts, and sought to establish reliable regulations in consultation with the Länder (line 6250 ff.). This required compulsoriness has not been implemented. Based on feedback from civil society across the country, it is estimated that without mandatory human rights-based training, the implementation of the standards of the Istanbul Convention in the judiciary will remain impossible²⁰⁹.

Judges in criminal law and public prosecutors in particular lack specific initial and further training on gender-specific violence. As a result, the dimensions of domestic violence are often not sufficiently taken into account in decisions, and the survivor is burdened once again by myths and prejudices. This problem is also evident in the area of trafficking in human beings and exploitation.

207 Kavemann, Barbara et al. 2025: Abschlussbericht. Final report. Needs assessment for the prevention of gender-specific and domestic violence. Summary, in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf, S.45 (accessed on 19.08.2025).

208 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 152.

209 ibid.

There is a lack of comprehensive specialised awareness-raising and professional training within the judiciary, with the result that structures of violence and dependency are often misjudged or inadequately classified under criminal law (*for judges in family matters, see Article 31*). The voluntary nature of further training also has an impact on decisions made by child welfare services on child protection in the context of sexual and domestic violence, particularly in cases involving visitation rights. There is often a lack of background knowledge on forms of violence and the effects of violence on mothers and children.

Although the number of training courses for **police officers** rose from 75 (2020) to 95 (2021) to 104 (2022) during the period under review, these courses mostly offer only basic knowledge and are insufficient to fully grasp the complex backgrounds of survivors²¹⁰. Furthermore, a short training course does not guarantee that the knowledge acquired will be applied adequately later on. The requirement for regular refresher courses has not been met²¹¹. Only 20% of the training courses conducted by the police were mandatory, meaning that this requirement of GREVIO has also not been met²¹². Particularly the needs of women with learning difficulties or hearing loss/deafness are not adequately addressed in these training courses.

Emergency housing assistance

Due to limited financial and human resources, the majority of staff in emergency housing assistance receive no or insufficient training (e.g. on trauma-sensitive support and violence protection concepts).

Psychosocial sector, child and youth welfare office

There has been a significant decline in further and continuing training and education in the field of supporting children affected by domestic and sexual violence. Fathers' rights activists are entering the training "market" of child and youth welfare offices, legal representatives and courts in order to spread PAS (Parental Alienation Syndrome) and other myths²¹³. This poses a major threat to the quality of training and standards of intervention. Experience shows that their views and misogynistic attitudes (mother is to blame, mother influences, mother prevents contact, etc.) lead to very sceptical attitudes in the child and youth welfare office regarding contact and custody, especially among legal representatives. This underlines the need for reliable standards in initial, further and continuing training and education on these issues and for women's/girls' institutions to be informed about the effects, dynamics of violence and strategies used by perpetrators and fathers' rights activists.

Similarly, there is a lack of standards underpinned by protocols and guidelines for teaching knowledge about gender-based violence in the initial *training* of nursery school teachers and in social work.

School

In the area of schools, the focus over the last three years has been on implementing mandatory protection concepts. In the modules, which are accompanied by violence protection projects with var-

²¹⁰ *ibid.*, S. 148

²¹¹ Europarat 2011: Übereinkommen des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt und erläuternder Bericht, Council of Europe Treaty Series, No. 210, Istanbul 2011, Ziff. 99.

²¹² DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 148.

²¹³ Meisner, Matthias 2024: Familienrecht: Wie der Staat bei Richterfortbildungen versagt. in: Volksverpetzer 19.12.2024, [online] <https://www.volksverpetzer.de/aktuelles/staat-familienrecht-fortbildungen/> (accessed on 29.07.2025).

ying degrees of intensity, gender-specific violence is regularly addressed within modules on codes of conduct, risk analysis and guidelines for action, but is not dealt with in sufficient depth. Seven (federal) Länder have now enshrined protection concepts in their school laws, while others merely recommend them. This opens up links to other aspects of gender-specific violence, which, however, are often neglected in everyday school life due to the lack of mandatory follow-up.

Asylum and migration

The deficit in **the area of asylum** should also be highlighted. At the consultation meeting on 14 November 2023 to draw up a strategy of the Federal Government for preventing and combating violence against women and domestic violence, attended by around 90 participants from civil society, academia, the federal Länder, municipalities and federal ministries, the need for the following qualifications was noted: Intersectional initial training and further education for all professions involved in asylum procedures (e.g. interpreters, authorities, judiciary) and education on protection against violence. These are not reflected in the Federal Government's strategy paper. In the area of asylum and migration, support is often inadequate because information on protection and rights is not well linked. Women with language barriers have difficulty seeking help, which can lead to further problems. Therefore, comprehensive further training in intercultural skills is needed, e.g. on when professional language mediation is essential.

At the same time, there was a significant increase in participation in training courses for the BAMF's special representatives, who are responsible for interviewing particularly vulnerable persons, between 2020 and 2022 (2020: 35, 2021: 134, 2022: 257)²¹⁴. However, these were also voluntary.

Media

In the initial training and further education of media professionals, especially in the field of journalism, the topic of violence against women has so far been incorporated into few training institutions, curricula and further education programmes. There are also no industry-wide voluntary commitments or similar measures that could serve as a basis for a commitment to further training.

The government is not fulfilling its obligation under *Article 14 of the Convention to provide appropriate training and further education services on the prevention and detection of such violence, on gender equality, on the needs and rights of victims, and on ways to prevent secondary victimisation for members of professional groups* (in this case media professionals, especially journalists) *who deal with victims or perpetrators of all acts of violence covered by this Convention*. While there are isolated training opportunities on (trauma-)sensitive reporting with a focus on survivors of gender-specific violence, many media professionals lack these skills.

Publicly funded measures on the role and responsibility of the media, which could at least indirectly support the training and further education of media professionals on the topic of gender-specific violence, are rare. As part of projects funded by the BMFSFJ, the bff developed "*Tips for the media on reporting on gender-specific violence and dealing with survivors*"²¹⁵ and the Association of Female Journalists (Journalistinnenbund) developed a "*Guide to illustrating media reports on violence against women*", which focused on the impact of images used in media reports²¹⁶. However, in both cases, measures to actively distribute the guides, e.g. as part of training courses for media professionals, were not part of the projects, and there is no information on the extent to which they are sought out and used by media professionals. *The "Alliance Against Sexism"* is currently working on

214 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 316.

215 <https://www.frauen-gegen-gewalt.de/de/ueber-uns/presse/informationen-fuer-die-presse.html>

216 Genderleicht & Bildermächtig: Gewalt gegen Frauen. Leitfäden für bessere Bilder, in: ebd. 06.12.2025, [online] <https://www.genderleicht.de/leitfaden-gewalt-gegen-frauen-wir-brauchen-bessere-bilder/#leitfadengewalt> (accessed on 10.08.2025).

a guide for media and other communications professionals (e.g. in PR agencies or communications departments) on the topic of “*Communicating about gender-specific violence without sexism*” (due in autumn 2025). This guide highlights the need for integration into initial training and further education, even though, for the time being, no concrete measures are planned in this regard. It is also unclear to what extent the information on the website of the Independent Federal Commissioner for Child Sexual Abuse Issues (UBSKM) on the topic of “*Reporting in a victim-sensitive manner – but how?*” is used in education and training²¹⁷.

Other public administrations and authorities

Mandatory specific initial training and further education on gender-specific violence and trauma-sensitive treatment of survivors is also lacking in the training and professional practice of administrative officials and administrative assistants. For example, as employees in social security offices, they make decisions on social compensation law or have contact with survivors of gender-specific violence in Jobcentres²¹⁸ and other authorities.

Healthcare

The statements made in the first Istanbul Convention Alliance alternative report on initial, further and continuing training and education of healthcare professionals in the context of domestic and sexual violence remain valid^{219,220}.

A new development at federal level is the inclusion of the topic of domestic and sexual violence in the (Model) Continuing Training Regulations for psychotherapists²²¹. This development is to be welcomed, as less than half of survivors who have access to therapy can discuss traumatic experiences there. In addition, in a survey of psychotherapists in Germany, 57% stated that they had heard little or nothing about violence against women or gender-based violence during their training. 87% of respondents would like to see further training on the subject²²². Furthermore, in 2020, content on domestic and sexual violence was included in bachelor's degree programmes in midwifery nationwide²²³. This content has not yet been included in the nationwide framework curriculum for nursing professionals, but there are calls for it to be (update of the framework training plans in 2023)²²⁴. Since 2019, the University of Ulm has been offering free, interdisciplinary e-learning for all professionals nationwide who work with survivors of domestic violence and their children²²⁵. The aim is to improve interdisciplinary cooperation by promoting knowledge of each other's services, a “common language” and shared professional and ethical perspectives.

217 Independent Commissioner for the Protection of Children and Young People from Sexual Abuse, n.d.: Sensitive reporting on victims, in: ebd. o. A., [online] <https://beauftragte-missbrauch.de/presse/betroffenensensible-berichterstattung/uebersicht-betroffenensensible-berichterstattung> (accessed on 30.06.2025).

218 Jobcentres are government agencies that provide financial support, support people in reintegrating them into the labor market and provide support for housing costs. They are run by the Federal Employment Agency

219 BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf>, S. 47f (accessed on 30.06.2025).

220 Bundespsychotherapeutenkammer 2024: Muster-Weiterbildungsordnung Psychotherapeut*innen, in: ebd. o. A., [online] https://api.bptk.de/uploads/Muster_Weiterbildungsordnung_Psychotherapeut_innen_der_B_Pt_K_d6427e628e.pdf (accessed on 16.05.2025).

221 Vogel, Anna et al. 2021: Routineversorgung für Jugendliche mit Posttraumatischer Belastungsstörung nach Missbrauchserfahrungen in Deutschland, in: Kindheit und Entwicklung, Jg. 30, Nr. 3, S. 183–191.

222 Kirchner, Elisabeth 2022: Gemeinsam gegen Gewalt an Frauen, in: Psychotherapie Aktuell, Jg. 2022, Nr. 1, S. 28–32.

223 Studien- und Prüfungsverordnung für Hebammen (HebStPrV) vom 8. Januar 2020, BGBl. I S. 39, zuletzt geändert durch Art. 5 der Verordnung vom 21. November 2024, BGBl. 2024 I Nr. 360.

224 Berufsinstitut für Berufsbildung :Rahmenausbildungspläne der Fachkommission nach § 53 PflBG, 1. Aktualisierung, in: ebd. o. A., [online] <https://www.bibb.de/dienst/publikationen/de/20123> (accessed on 05.2025).

225 Universitätsklinikum Ulm 2022: Schutz und Hilfe bei häuslicher Gewalt, ebd. o. A., [online] <https://haeuslichegewalt.elearning-gewaltschutz.de/> (accessed on 20.05.2025).

At the (federal) Länder level, the topic has been included in the Specialty Training Regulations of the Berlin Medical Association²²⁶ for all medical specialties since 2021. Since 2022, there has been a requirement in the Continuing Education Regulations of the Berlin Association of Psychotherapists for psychotherapists (across all fields)²²⁷. Information on implementation is not yet available.

At the (federal) Länder level, Bremen has designed a compulsory module on the Istanbul Convention for nursing training, which is to be completed annually by 1,300 trainee nurses in Bremen from autumn 2025 onwards²²⁸. In the federal state of Hesse, a research project is running until 2026 to systematically take stock of initial, further and continuing education programmes for healthcare professionals on domestic violence and sexual violence²²⁹.

Since 2023, the University of Münster and GESINE Intervention (NRW) have been working together on the EU project “VIPROM”, which aims to enable students of health professions and practising healthcare providers to provide sensitive healthcare to survivors²³⁰. Materials for various professions (health, social services, justice, police) were developed in the EU projects VIPROM, IMPROVE and IMPRODOVA for the implementation of the training courses. They are available in several languages on a joint European Training Platform²³¹. The VIPROM training courses are held in cooperation with regional specialists and include a train-the-trainer programme and a handbook²³². Initial case studies have already been carried out as part of the project: there is a clear need for the curriculum to be enshrined in law and included in the IMPP (Institute for Medical and Pharmaceutical Examination Questions) catalogue²³³. Long-term structural integration and funding of the projects are not yet guaranteed.

Regarding question 11

Please complete tables I and II included in the Appendix in order to provide a comprehensive overview of the professional groups that receive initial and in-service training on the different forms of violence against women and domestic violence. Please specify the frequency and scope of the training and whether it is compulsory.

See tables in the annex.

226 Ärztekammer Berlin 2021: Weiterbildungsordnung der Ärztekammer Berlin vom 22. September 2021 in 2. Änderung vom 13. November 2024, in: ebd. o. A., [online] <https://www.aekb.de/aerzt-innen/weiterbildung/weiterbildungsordnung> (accessed on 16.05.2025).

227 Psychotherapeutenkammer Berlin 2022: Weiterbildungsordnung für die Psychotherapeutinnen und Psychotherapeuten der Psychotherapeutenkammer Berlin (WBO P) in letzter Änderung vom 14. März 2023, in: ebd. o. A., [online] https://www.psychotherapeutenkammer-berlin.de/system/files/document/WBO_P_Textfassung_14.03.23-mitInhaltsverzeichnis.pdf (accessed on 20.05.2025).

228 Die Senatorin für Gesundheit, Frauen und Verbraucherschutz 2024: Neues Modul zur Istanbul-Konvention im Bremer Curriculum, in: ebd. o. A., [online] <https://www.gesundheit.bremen.de/gesundheitswesen/pflege-46108> (accessed on 19.05.2025).

229 Hahn, Daphne o.J.: Forschungsprojekt GeWaGt – Gesundheitsversorgung für Frauen nach häuslicher und sexualisierter Gewalt im Land Hessen: Stand der Aus-, Fort- und Weiterbildung der primärversorgenden Gesundheitsberufe, in: Hochschule Fulda o. A., [online] <https://www.hs-fulda.de/gesundheitswissenschaften/forschung/forschungsschwerpunkte/gesundheitschutz-bei-interpersoneller-gewalt/gewagt> (accessed on 16.05.2025).

230 IMPRODOVA o.J.: Trainingsmodule für den Gesundheitssektor, in: ebd. o. A., [online] <https://training.improdova.eu/de/trainingsmodule-fur-den-gesundheitssektor/> (accessed on 26.05.2025).

231 siehe dazu die Startseite der EUROPEAN Training Platform, [online] <https://training.improdova.eu/en/>.

232 Viprom 2024: Begleitendes Handbuch für den VIPROM Trainer-the-Trainer Kurs – Deutschland, in: ebd. o. A., [online] https://viprom-cerv.eu/wp-content/uploads/2024/07/TTT-Handbook_deutsche_Uebersetzung.pdf (accessed on 26.05.2025).

233 Viprom 2024: Deliverable 2.2: Case Study Report on Key Factors for Successful Organisational Change, in: ebd. o. A., [online] https://viprom-cerv.eu/wp-content/uploads/2024/12/VIPROM_Deliverable_2.2_Website_Version.pdf (accessed on 26.05.2025).

Regarding question 12

Please specify if the expertise of women's rights organisations or specialist support services is integrated in the design and/or implementation of the training.

The **expertise of women's and girls' rights organisations and specialist support services** is only incorporated into the design and/or implementation of training courses on an ad hoc basis. This was the result of an ad hoc survey of various associations (unpublished, not exhaustive). For this reason, only individual responses were entered in the tables (*question 11*). In the health sector, the *S.I.G.N.A.L. Coordination Centre* in Berlin was able to provide a more comprehensive picture.

Overall, there is a positive perception nationwide that the respective Länder action plans and associations for the implementation of IC have placed greater focus on training. However, implementation generally takes place in the psychosocial sector. The results of the *consultation event on 14 November 2023* were not followed by any reliable measures in the Ministry's violence protection strategy²³⁴. Only training courses in the field of the armed forces and homelessness services are mentioned. The obligation to provide further training and education could not be implemented in any occupational field. In other countries, this has proven to be a prerequisite for a fundamental change in attitude that enables appropriate prevention and intervention. When designing and implementing training plans, the expertise of civil society organisations is not sufficiently sought and incorporated into the concepts.

There is also a lack of awareness-raising and training for administrative staff, case managers and judges in social courts who deal with *social compensation law (SER)*. Although *SER* was reformed, came into force at the beginning of 2024 as *SGB XIV*, and isolated training courses were held with the involvement of women's rights organisations and employees of specialist counselling and support centres, e.g. in 2023 at the Trier Academy for Judges and in 2024 for administrative staff (nationwide event), these are few and far between and not mandatory. Feedback from support organisations indicates that most survivors of gender-specific violence still do not have access to social compensation benefits. The requirements and hurdles are high, and the procedures are long and burdensome. Survivors encounter a lack of understanding and narratives and legal practices that are victim-blaming in government agencies and social courts.

There is no systematic data available on whether specialist NGOs (women's rights organisations) are involved in the design and/or implementation of training courses in **the health sector**. In some (federal) Länder and regions, there are collaborations between NGOs, hospitals and other actors to implement training courses, e.g. *GESINE (North Rhine-Westphalia)*, *Frauennotruf Frankfurt (Hesse)*, *Paula e. V. (Cologne)*, *Bellis (Saxony)*.

In Berlin, the Senate Department responsible for health has commissioned the *Coordination Centre of S.I.G.N.A.L. e. V.* to design and implement training courses for (prospective) health professionals. This is the only funded project in Germany for systematic processing and coordination in this field. The training courses are conducted by S.I.G.N.A.L. trainers. As social workers or health professionals, they have extensive knowledge of the subject and experience in their daily work with survivors, which they also use to contribute to the further development of the training courses.

Recommendations

We recommend the following to the Federal Government and the Länder

- » all initial, further and continuing training and education measures (*AFWM*) for professionals in relevant occupational groups should address gender stereotypes and rape myths (also being

²³⁴ BMFSFJ 2025: Gewaltschutzstrategie nach der Istanbul-Konvention, in: ebd. 06.03.2025, [online] <https://www.bmfsfj.de/resource/blob/252132/8275196915292f8ff4cb39ad7f158731/gewaltschutzstrategie-der-bundesregierung-data.pdf>, S. 17 (accessed on 04.07.2025).

critical of racism) and meet the needs and rights of survivors (taking into account all vulnerable groups) in criminal proceedings. In accordance with *Article 15(2)*, they should be (co-)designed and implemented by specialist counselling and support centres or NGOs.

- » the implementation of comprehensive, mandatory diversity- and gender-sensitive *AFWM* for the police, public prosecutors, the judiciary, health services and psychosocial counselling. This also applies to related fields of work such as Jobcentres, immigration authorities and child and youth welfare services.
- » introducing mandatory diversity and gender-sensitive training for judges, legal representatives and family court-appointed experts following changes in the law.
- » To firmly anchor the topic in the model training, further education and continuing education regulations with examination relevance.
- » establish minimum standards for the respective professional group as basic knowledge during training and in education or further training courses, e.g. with regard to health professionals, based on existing good practice and the WHO curriculum. For other professional groups, see the recommendations for “Minimalstandards für die Aus- und Weiterbildung” developed by the Swiss Government in the context of the implementation of the Istanbul Convention (<https://www.ebg.admin.ch/de/minimalstandards-aus-weiterbildung>)
- » the provision of adequate resources for regular refresher and in-depth training courses and their monitoring and evaluation. See also (specific) recommendations on initial, further and continuing training and education for certain professional groups in *Art. 14, Art. 26, Art. 31, Art. 36, Art. 37, Art. 43, Art. 46, Art. 50, Art. 51, Art. 52/53 and Art. 55*.
- » to ensure adequate and comprehensive further training on the subject of violence and health in all health and social services.
- » to conduct a scientifically based nationwide inventory of existing training courses for health professionals and evaluate the implementation and impact of incorporating the topic into medical education and continuing education curricula.
- » to systematically support and disseminate existing, proven training concepts, particularly in co-operation with the anti-violence sector.
- » to provide permanent and secure funding for NGO work on training concepts (creation, further development and implementation).
- » the provision of financial resources, in particular fees for training institutions, to enable experts from the specialist support system to (co-)deliver the training courses.
- » to ensure that the topic of domestic violence and its impact on children, as well as sexual violence, is reliably and compulsory anchored in training courses offered for child and youth welfare offices.
- » in order to prevent secondary traumatising during both intervention and questioning, the relevant authorities must ensure that systematic, mandatory training is provided for police forces.
- » the implementation of state-wide concepts in the respective (federal) Länder to regulate the training of public prosecutors, civil, social and criminal judges in the area of gender-specific violence. Administrative judges are also relevant in the area of asylum law.
- » the development of quality standards incorporating the norms of the Istanbul Convention for legal representatives, as they play a central role in civil proceedings.
- » all experts acting under the Social Compensation Act should be required to undergo training on PTSD and the consequences of sexual and domestic violence.
- » reference is made here to the recommendations from the 2021 Alternative Report, as most of them have not been fulfilled.

Article 16 – Preventive intervention and treatment programmes

Background

Article 16 obliges the Parties to implement the necessary measures to establish and support programmes for perpetrators aimed at preventing violence and changing violent behaviour patterns. Programmes for “perpetrators of domestic violence” (*paragraph 1*) and “sex offenders” (*paragraph 2*) must focus on human rights, safety and protection for women and girls affected by violence.

Despite positive developments, the shortcomings identified in the last alternative report by the Istanbul Convention Alliance and criticised by GREVIO still persist. Although the overall number of perpetrator work programmes has increased, many regions do not have sufficient service providers. Sustainable public funding for a nationwide provision of perpetrator work in accordance with the *BAG TāHG* standard as requested by GREVIO has not been achieved (*see questions 13 and 14*). Accessible and multilingual services are available only in isolated cases and perpetrator work in prison takes place only sporadically. The recognised standard for work with perpetrators of domestic violence by *BAG TāHG* addresses men in heterosexual relationships²³⁵. Currently there are no supra-regional counselling concepts for perpetrator work with other client groups, who for example, may themselves be affected by structural discrimination²³⁶.

Due to insufficient data, we are currently unable to comment on whether the provision of specialised programmes for sex offenders has improved throughout Germany²³⁷.

Regarding question 13

Please provide information on measures taken to increase the number of available preventive intervention and treatment programmes for perpetrators of domestic and sexual violence both for voluntary and mandatory attendance.

In recent years, there has been done little changes to increase the number of perpetrator work services and to ensure comprehensive provision of standardised perpetrator work by the Federal Government and the (federal) Länder. Major differences between and within the (federal) Länder continue to exist regarding to funding, as well in terms availability of services that meet the *BAG TāHG* standard²³⁸. Particularly in rural areas there are serious gaps in provision²³⁹ of services.

235 BAG TāHG 2023: Arbeit mit Tätern in Fällen häuslicher Gewalt, Berlin: BMBFSFJ, 09.2023, [online] <https://www.bmbfsfj.bund.de/bmbfsfj/service/publikationen/arbeit-mit-taetern-in-faellen-haeuslicher-gewalt-80734> (accessed on 07.08.2025).

236 Eine Informationsbroschüre zur Arbeit mit intellektuell beeinträchtigten Tätern wurde 2023 von der BAG TāHG veröffentlicht.

237 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 167.

238 Ebd., S. 158.

239 Kavemann, Barbara et al. 2025: Abschlussbericht. Bedarfsanalyse zur Prävention geschlechtsspezifischer und häuslicher Gewalt. Kurzfassung, in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf, S. 32 (accessed on 19.08.2025); DIMR 2024: ebd., S. 160.

In most cases, funding is provided by the (federal) Länder through temporary project funding, which often has to be reapplied annually²⁴⁰. In Baden-Württemberg, perpetrator work is funded only at regional level, not federal level²⁴¹. Throughout Germany funding is usually insufficient, so that other sources of income for perpetrator work institutions such as fines²⁴², participation fees, municipal funds and donations, among other things are necessary to provide standardized perpetrator work. Responsibility of state departments for funding perpetrator work varies and is inconsistent even within (federal) level, e.g. in Berlin²⁴³. In many places, the funds provided are not sufficient to fully implement the *BAG TäterHG* standard. In 2022, less than one full-time equivalent of staff per institution was available in eight (federal) Länder²⁴⁴. Furthermore, there is often a lack of structural integration of perpetrator work into regional intervention structures.

The *GewHG* lists perpetrator work as a preventive measure to be taken²⁴⁵. It is unclear whether or how funds provided by the federal government will be used by the (federal) Länder to expand perpetrator work.

Regarding question 14 (a/b/c/d)

Please provide information on the measures taken to:

a. increase the number of men and boys attending perpetrator programmes for domestic and sexual violence;

The *Perpetrator Responsibility Act* has been in force since 1 March 2013. It permits courts to oblige perpetrators of violence to participate in a perpetrator programme, but is used only to varying degrees. This kind of cooperation depends heavily on local circumstances and judges responsible. Thus, judicial orders to participate in perpetrator programmes are, compared to other routes of access, infrequent²⁴⁶. The awareness-raising and dissemination of knowledge about domestic violence and perpetrator work among the relevant law enforcement authorities and judges, as called for by GREVIO, is still not being implemented.

The coalition agreement between the CDU/CSU and SPD announced the creation of a uniform federal legal basis “for mandatory anti-violence training for perpetrators”²⁴⁷. In August 2025, the *BMJ* presented a draft bill containing corresponding legislative amendments. The possibility of ordering perpetrator work by family courts should become a law by amending the *GewSchG*²⁴⁸. Perpetrator work should also be enshrined in the *BGB* as an alternative to supervised contact with the

240 Ebd., S. 162.

241 Ebd., S. 157.

242 Fines that result from criminal proceedings can be directed to nonprofit organizations.

243 BAG TäterHG 2025: Zur Finanzierung von Täterarbeit in Berlin im Hinblick auf die Budgetplanung für die Jahre 2026/2027, in: ebd. 14.07.2025, <https://www.bag-taeterarbeit.de/zur-finanzierung-von-taeterarbeit-in-berlin-im-hinblick-auf-die-budgetplanung-fuer-die-jahre-2026-2027/> (accessed on 30.07.2025).

244 DIMR 2024: ebd., S. 161.

245 In § 1 Abs. GewHG vom 24. Februar 2025, *BGBI. 2025 I Nr. 57*. heißt es: „Zur Aufgabenerfüllung sollen insbesondere folgende Maßnahmen ergriffen werden: [...] Prävention, einschließlich Maßnahmen, die sich an gewalttätig handelnde Personen richten [...]“.

246 Kavemann, Barbara et al. 2025: Abschlussbericht. Bedarfsanalyse zur Prävention geschlechtsspezifischer und häuslicher Gewalt. Kurzfassung, in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf, S. 43 (accessed on 19.08.2025); BAG TäterHG 2025: Täterarbeit-Statistik 2024, Berlin (Zum Zeitpunkt der Texterstellung noch unveröffentlicht.)

247 CDU/CSU & SPD 2025: Koalitionsvertrag zwischen CDU, CSU und SPD, 21. Wahlperiode, in: Koalitionsvertrag 2025 o. A., [online] https://www.koalitionsvertrag2025.de/sites/www.koalitionsvertrag2025.de/files/koav_2025.pdf, S. 91 (accessed on 06.08.2025).

248 BMJV 2025: Referentenentwurf des Bundesministeriums der Justiz und für Verbraucherschutz. Entwurf eines Gesetzes zur Einführung der elektronischen Aufenthaltsüberwachung und der Täterarbeit im Gewaltschutzgesetz, in: ebd. 22.08.2025, [online] Entwurf eines Gesetzes zur Einführung der elektronischen Aufenthaltsüberwachung und der Täterarbeit im Gewaltschutzgesetz (accessed on 27.08.2025).

child and be a fundamental condition for granting contact. It is crucial that the programmes meet the requirements of the IC and the demands of GREVIO.

Since 2020, the *BMFSFJ* has been funding a project by *BAG TäHG* to implement a proactive approach to perpetrator work. The proactive approach can serve to connect violent individuals to a perpetrator work facility in a timely and low-threshold manner. To this end, the police forward contact details of the accused person to a (recognized) counselling service. However, data protection concerns often prevent this practice from actually being implemented²⁴⁹. A solution to this problem and a way of obliging violent individuals to attend a perpetrator programme immediately after the violent incident would be to amend the *GewSchG* accordingly. At some (federal) state level, legal bases have been created that may provide for the introduction of a proactive approach to perpetrator work, for example in Bremen (*Section 55 (5) BremPolG*) and Schleswig-Holstein (*Section 201a (6) LVerwG SH*). A corresponding amendment is planned in Berlin (*Section 45 ASOG*). In Lower Saxony the approach is already being in practice.

b. ensure that the perpetrator programmes apply standards of best practice; and c. ensure the safety of victims and co-operation with specialist support services for victims;

For perpetrator work to fulfil its preventive function in line with the IC, programmes must meet certain requirements. In Germany, these are laid down in the *BAG TäHG* standard, which is recognised as a minimal standard for perpetrator work to ensure victim protection. It includes a gender-sensitive approach under the requirement of multi-institutional cooperation and collaboration with specialist counselling and intervention services. Within the programme according to *BAG TäHG* standard and besides aiming at ending violence: dealing with gender roles and structural aspects of violence as integral parts of the programme, as well as acknowledging full acceptance of responsibility for violent acts and learning non-violent conflict resolution skills are defined as core objectives. Long-term intervention of at least six months is recommended to achieve sustainable behavioural change²⁵⁰ and in order to have a preventive effect.

The standard forms the basis for the work of *BAG TäHG* member institutions. However, not all perpetrator counselling centres in Germany are members of *BAG TäHG*. And not even all member institutions of the umbrella organisation can guarantee full implementation of the standard due to the funding gaps described above. Increased funding is essential for this.

Draft legislation and allocation practices show that there is often insufficient distinction between programmes that meet the IC requirements for perpetrator work and other intervention measures (e.g. general anti-violence training). Perpetrator intervention facilities experience that the necessary commitment of several months is often considered disproportionate or inappropriate by referring authorities. In practice, therefore, courts continue to frequently refer perpetrators to programmes comprising only a few hours. This contradicts the preventive objectives of the programmes. Therefore, a uniform procedural practice at federal level to standardise public prosecutor and court referrals to offender programmes in line with the IC is needed.

Inadequate funding and the gaps mentioned above are detrimental to the protection of survivors of violence. Cooperation is often not considered when allocating funding and therefore cannot always be institutionalised or expanded. There are significant local differences in terms of integration into local intervention structures.

In some (federal) Länder, funding is linked to the implementation of the *BAG TäHG* standard and accordingly set out within the funding guidelines²⁵¹. For example, since 2020, the Bavarian 3-step

249 *BAG TäHG 2023: Proaktiver Ansatz in der Täterarbeit. Aktueller Stand zur Umsetzung des proaktiven Ansatzes in Fällen von häuslicher Gewalt in Deutschland*, Berlin: ebd., [online] https://www.bag-taeterarbeit.de/wp-content/uploads/2023/04/BAG-Bericht_zum_proaktiven_Ansatz_in_der_Taeterarbeit_Einzelseiten_2023.pdf, S. 24 (accessed on 29.07.2025).

250 *BAG TäHG 2023: Arbeit mit Tätern in Fällen häuslicher Gewalt*, Berlin: BMBFSFJ, 09.2023, [online] <https://www.bmbfsfj.bund.de/bmbfsfj/service/publikationen/arbeit-mit-taetern-in-faellen-haeuslicher-gewalt-80734>, S. 12 (accessed on 07.08.2025).

251 *DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht*, Berlin: ebd., S. 160.

plan “*Bavaria against violence*” has included the establishment and promotion of perpetrator work services. Facilities have been set up and established in all Bavarian administrative districts. The funding guidelines for the implementation of perpetrator work require the certification of facilities in accordance with the standard. All Bavarian perpetrator work facilities are now certified and thus guarantee high-quality implementation of the programmes. The aim should be to create funding guidelines for perpetrator work in all (federal) Länder that require compliance with the standard, strive for certification according to the *BAG TãHG* standard for perpetrator work facilities and specialist centres, and are financed accordingly.

There are currently no uniform federal standards for working with sex offenders²⁵².

d. ensure that the outcomes of the programmes are monitored and evaluated.

Scientific research on perpetrator work and its results remains rudimentary in Germany and has considerable room for improvement²⁵³. On international level, there are various (meta) studies that confirm its effectiveness. However, these cannot always be directly applied to the German context²⁵⁴. Furthermore, the definition of effectiveness and the methodological approach are very heterogeneous in these studies. In a few cases, individual institutions in Germany have been scientifically evaluated. A scientific evaluation of Bavarian institutions is currently being carried out.

Since 2020, the *BMFSFJ* has been funding a project by the *BAG TãHG* to **establish nationwide statistics on perpetrator work**. These are published for the first time in 2025. Among other things, the statistics record whether a programme has been successfully completed and investigate the reasons for early dropouts from the perpetrator programme. A monitoring system of all perpetrator programmes by independent bodies and according to uniform methodological approaches is currently still lacking.

Recommendations

We recommend the following to the Federal Government and the Länder

- » provide sufficient financial resources for the comprehensive implementation of qualified perpetrator work in accordance with the requirements of the IC.
- » introduce uniform federal standards for judicial orders to participate in offender programmes.
- » assure the quality of perpetrator work through the creation of IC-compliant funding guidelines and certification of perpetrator work facilities.
- » promote needs-based differentiation in the range of services offered by perpetrator work facilities (barrier-free and multilingual services, perpetrator work in prisons, etc.).
- » create uniform federal legal bases for mandatory perpetrator work, including in the context of child custody and contact proceedings and taking into account the necessary resources.
- » implement the standardised application of risk assessment tools and involve perpetrator work professionals in case conferences.

²⁵² ebd., S. 156.

²⁵³ Kavemann, Barbara et al. 2025: Abschlussbericht. Bedarfsanalyse zur Prävention geschlechtsspezifischer und häuslicher Gewalt. Kurzfassung, in: BMBFSFJ 05.2025, [online] https://bmbfsfj-veranstaltungen.bafza.de/fileadmin/BMBFSFJ/Redakteure/Veranstaltungsdateien/Team_4/3517-Fachtagung_zur_Gewaltpraevention/BMBFSFJ_Kurzfassung_Bedarfsanalyse_PraevGHG_Barrierefrei.pdf, S.11 (accessed on 19.08.2025).

²⁵⁴ for example B. Karakurt, Günnür et al. 2022: Treatments for Female Victims of Intimate Partner Violence: Systematic Review and Meta Analysis, in: *Frontiers in Psychology*, Jg. 13.

- » embed the proactive approach in all state police laws and the further institutionalisation of co-operation alliances in the intervention structures of the states.
- » develop standards in working with sex offenders.
- » conduct research on prevention measures and their effectiveness, with a particular focus on gender-specific violence.
- » raise awareness and train professionals in judiciary and police in perpetrator work.

PROTECTION AND SUPPORT

Article 18 – General obligations

The challenges have remained largely unchanged, so we refer to our last alternative report: **there is no stringently enforced gender-sensitive approach to protection against violence** (see Article 7) and no uniform and coordinated approach to the prevention or intervention of violence nationwide. Much of the inter-agency cooperation is initiated by specialist support services themselves.

Regarding question 15 (a/b/c/d/e)

Please provide information on any multi-agency co-operation mechanisms, structures or measures in place designed to protect and support victims of any of the forms of gender-based violence against women covered by the Istanbul Convention (e.g., interdisciplinary working groups, case-management systems, cross-sectoral protocols/ guidelines...).

Not all women, girls and trans*, inter* and non-binary (TIN) persons have access to protection and support. There is still no comprehensive net of specialist counselling and support centres (e.g. providing support for adult women affected by violence, intervention after police intervention, support during or after sexual violence in childhood and adolescence) to provide timely support. In addition, there is no accessible and multilingual network of support services, neither in specialist nor in general counselling and support centres. There is a lack of a gender-sensitive approach that focuses on women affected by violence in terms of health services, evidence collection, trauma support and adequate psychotherapeutic services.

Please describe:

a. *the state agencies involved in their functioning (law-enforcement agencies, judiciary, public prosecutor, local authorities, healthcare services, social services, educational institutions etc.)*

There is still **no comprehensive structure for the protection of high-risk cases in case conferences**. In addition to Rhineland-Palatinate and Schleswig-Holstein, Berlin introduced this instrument in 2025. Now there is the possibility of planning the protection of women and their children who are at risk of femicide in so-called “multi-institutional” case conferences. These collaborations were established as part of the implementation of the *Berlin state action plan*²⁵⁵. At such conferences, relevant authorities and specialist support services are brought together to discuss the protection of the survivor of violence and her children. The woman concerned may also be present. For information on collaborations and points of intersection between specialist counselling and support centres, see Article 22, Question 25.

At **the local level**, it is important to support initiatives by actors (such as working groups or networking structures of Equal Opportunities Officers) that connect local authorities such as Jobcentres, police, immigration authorities and specialist support services in order to improve cooperation.

²⁵⁵ Abgeordnetenhaus Berlin Drucks. 19/1248, S. 66.

- b. whether they involve specialist support services provided by civil society organisations, especially women's rights organisations;*

When **removing perpetrators from shared homes**, the Berlin police can, with the consent of the survivor, forward their data by fax to the specialist support service *BIG Intervention*. This service takes **a proactive approach** and immediately contacts the woman affected by violence by telephone. However, the measure is limited to police operations in cases of domestic violence and does not apply to all forms of violence covered by the Istanbul Convention²⁵⁶.

- c. how they adopt a gender-sensitive approach to violence against women, including the prioritisation of the safety of women and girl victims, their empowerment and a victim-centred approach;*

A similar **proactive approach** is being set up on the initiative of S.I.G.N.A.L. e.V. **in cooperation with Accident and Emergency services**. These services are to be sensitised to gender-specific violence and, with the consent of the survivor, will be allowed to report the incident to a specialist intervention centre in order to connect directly with the survivor. The pilot project, which started in 2016, has been opened to all central emergency rooms (*ZNA*) in Berlin since 2023, but is not yet in widespread use. All specialist counselling and intervention centres for domestic violence in Berlin are involved. The *Senate Department for Equality* is funding the project and it is being coordinated by *S.I.G.N.A.L. Coordination Centre* (funded by the *Senate Department for Health*). The approach is now also to be tested in obstetrics²⁵⁷.

- d. the financial and human resources dedicated to their implementation;*

Specialist support services for survivors confirm that there are no comprehensive financial or human resources for the development or implementation of interdisciplinary cooperation for this type of work.

- e. any available information on the evaluation of their outcome or impact.*

No information is available.

Regarding question 17

Please explain whether all or some of the services of protection and support offered for victims of the different forms of violence against women are provided on the basis of a one-stop-shop approach.

There are no known specialist support services that implement the **one-stop shop concept**. Since August 2024, the first '*Violence against Women contact point*' of the Federal Police has been in operation at Berlin's Ostbahnhof train station. Another is to be opened in Cologne. There, survivors can find short-term accommodation and may be referred to specialist support services. However, the aim of the contact point is for survivors to file a report at the same time, which means that the service cannot be used anonymously. For women with an unclear residence status, protection offered by the police is equally unsuitable. In principle, one-stop shops also carry the risk of making it easier for perpetrators to locate survivors. Nevertheless, it is desirable for authorities to cooperate better and to reduce bureaucratic hurdles and link more suitable offices, resulting in shorter distances and less effort for survivors.

²⁵⁶ Kooperationsverbund: Hilfe bei häuslicher Gewalt. Fachberatungs- und Interventionsstellen bei häuslicher Gewalt in Berlin, [online]: https://www.big-berlin.info/sites/default/files/downloads/539_BIG-Hotline_Koop-verbund.pdf (accessed on 01.09.2025).

²⁵⁷ S.I.G.N.A.L. e.V. o.J.: Intervention im Gesundheitsbereich. ZNA in Zusammenarbeit mit Beratungsstellen – Pro-Aktives Angebot, in: ebd. o.A., [online] <https://www.signal-intervention.de/zna-zusammenarbeit-mit-beratungsstellen-pro-aktives-angebot> (accessed on 26.08.2025).

Recommendations

We recommend the following to the Federal Government and Länder

- » provide nationwide financial support for qualified assistance for all women affected by violence and their children through uniform, cross-state standards with the participation of professional associations and specialist counselling centres.
- » establish standards and guidelines for cooperation between authorities and specialist support services in order to ensure equal protection mechanisms throughout Germany and in all areas.
- » establish cross-agency cooperation mechanisms and structures for protection and support in *all* forms of violence against women and gender-specific violence. Professional associations and specialist support services should be involved in the development of these structures, and the additional work should be supported with financial and human resources.

Article 20 – General support services

Background

The importance of **general support services** in helping survivors continues to be underestimated. The areas mentioned in *Article 20* are covered by support services that have neither sufficient time and financial resources nor adequate structures to provide appropriate support in cases of gender-specific violence. This applies in particular to women and girls with specific needs, such as disabilities, those in housing emergencies, those with migration and refugee experience, and LGBTIQ* persons²⁵⁸.

As a result, it is usually left to chance whether survivors encounter sensitised professionals. This can have dangerous consequences, particularly in matters of protection and safety, if, for example, the addresses of women at risk, which are protected by confidentiality restrictions, are not being concealed.

Studies and practice reports show that the type and scope of services for survivors in **health-care** vary and are largely dependent on the commitment of individuals or institutions²⁵⁹. Cross-sectoral cooperation between healthcare, specialist agencies and other bodies involved in intervention and prevention is largely non-existent or only exists rudimentarily. There is a lack of reliable local/regional care and referral pathways and cooperation. In addition, reflection opportunities such as collegial case discussions or supervision are not common practice, which can make dealing with survivors even more difficult. Inadequate funding for medical services, such as in-depth anamnesis interviews, court-admissible documentation, interdisciplinary case discussions and language and cultural mediation, represents a significant obstacle to the establishment of appropriate services²⁶⁰.

Emergency housing assistance

In many places, homelessness services currently act as a “last resort” for homeless, drug-using and mentally ill women and girls who are victims of violence, providing them with care and accommodation. It performs the tasks of a specialist support system. In addition, the facilities offer women a low-threshold initial point of contact, clearing and referral to the specialist support system. Women (and their children) are accepted into women’s shelters in (women-specific) support services:

258 Abgeordnetenhaus Berlin Drucks. 19/1248.

259 Haneck, Stefanie & Hahn, Daphne 2022: Gesundheitsversorgung für Frauen nach häuslicher und sexualisierter Gewalt am Beispiel des Landes Hessen, in: Prävention und Gesundheitsförderung, Jg. 18 , S. 447–453; Kaps, Petra et al. 2024: Versorgungssituation für von häuslicher und sexualisierter Gewalt betroffene Frauen* und Mädchen* in Berlin, ZEP 30.05.2024, [online] https://zep-partner.de/wp-content/uploads/2024/09/2024_ZEP_Versorgungsstudie_Gewaltschutz_Berlin_20240530_final.pdf (accessed on 15.05.2025);

Blättner, Beate & Grewe, Henny Annette 2019: Verfahrensweise bei der ärztlichen Versorgung Minderjähriger nach sexueller Gewalt ohne Einbezug der Eltern, in: Unabhängiger Beauftragter für Fragen des sexuellen Kindesmissbrauchs 15.06.2019, [online] https://beauftragte-missbrauch.de/fileadmin/user_upload/Materialien/Publikationen/Expertisen_und_Studien/Verfahrensweise_bei_der_aerztlichen_Versorgung_Minderjaehriger_nach_sexueller_Gewalt_ohne_Einbezug_der_Eltern.pdf (accessed on 15.05.2025).

260 Fischer, Lisa 2020: Akutversorgung nach sexualisierter Gewalt. Zur Umsetzung von Artikel 25 der Istanbul-Konvention in Deutschland, in: DIMR 11.2020, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Akutversorgung_nach_sexualisierter_Gewalt.pdf (accessed on 15.05.2025).

- » after their stay in a women's shelter due to lack of accommodation,
- » if they are banned from the shelter as a result of "rule violations" or
- » if there is no space available in a women's shelter.

This accommodation is usually only a temporary solution. Municipal regulatory accommodation and homelessness services do not offer anonymous addresses, and there are too few women-specific facilities nationwide.

There is a lack of facility-based violence protection concepts due to the absence of a legal obligation. Professionals often have little knowledge of trauma-sensitive support and gender-specific violence. The lack of emergency protection poses a considerable risk and health problems for women with multiple problems.

Women who live in women's shelters longer than necessary due to a lack of housing are also considered homeless according to various recognised definitions²⁶¹. The length of stay for women (with children) in women's shelters has increased due to the lack of affordable housing²⁶². In some cities, cooperations between initiatives who support survivors of violence and housing associations have been founded to make it easier for women who have experienced violence to access the regular housing market, e.g. *asap e. V. – Wohnungsvermittlung in Berlin (apartment agency in Berlin)* or the *Frauen_Wohnen* project in *Schleswig-Holstein*, which has been funded by the State Ministry for Equality since 2018²⁶³. In Berlin, for example, women affected by violence also have easier access to municipal housing stock and social housing through "*Geschütztes Marktsegment*" (*protected market segment*) for people who are threatened by or affected by homelessness²⁶⁴. Given that affordable housing is essential for survivors to be able to lead a self-determined, violence-free life, far too little attention is still being paid to the issue of finding housing, contrary to GREVIO's recommendation 147. This problem is exacerbated by the massive increase in rents in urban areas. For information on the child and youth welfare office, see questions 31 and 51.

Regarding question 18

Please provide information on programmes and measures aimed at ensuring, through general services, the recovery of victims of violence, including in the health and social areas, financial assistance, education, training and assistance in finding employment and affordable and permanent housing.

Specific questions on public health can be found from question 19 onwards. At the **federal level**, see the comments on the Protection against Violence Strategy in Article 7.

At the **state level**, all (federal) Länder have contact points for the documentation of injuries resulting from domestic violence that can be used in court and for the documentation and collection of evidence after sexual violence (see also Art. 25). However, only three (federal) Länder have specific programmes and measures to improve intervention in domestic violence for the health care system:

- » North Rhine-Westphalia: GESINE Intervention with its *GESINE NetzwerkGesundheit.EN* (GESINE Health Network), currently funded as part of the EU project VIPROM, currently with no perspective at further state funding.

261 BAG Wohnungslosenhilfe e. V. 2025: Wohnungsnotfalldefinition, in: ebd. o. A., [online] https://www.bagw.de/fileadmin/bagw/media/Doc/POS/POS_10_BAGW_Wohnungsnotfalldefinition.pdf (accessed on 28.07.25)

262 Frauenhauskoordinierung 2024: Nationwide women's shelter statistics 2023, in: ebd. 09.2024, [online] https://www.frauenhauskoordinierung.de/fileadmin/redakteure/Publikationen/Statistik/2024-10-08_Langfassung_Frauenhausstatistik_2023_final.pdf, S. 9 (accessed on 18.08.2024).

263 Der Paritätische Schleswig-Holstein o.J.: Frauen_Wohnen, in: ebd. o. A., [online] https://www.paritaet-sh.org/projekte/frauen_wohnen.html (accessed on 31.07.2025).

264 Berlin o.J.: Wohnungssuchende, in: ebd. o. A., [online] <https://www.berlin.de/lageso/soziales/geschuetztes-marktsegment/antragstellende/> (accessed on 31.07.2025).

- » Saxony: Bellis e. V. Victim protection and violence prevention.
- » Berlin: S.I.G.N.A.L. e. V. with the projects 1) *Coordination and Intervention Centre*, 2) *Berlin Round Table Office – Healthcare in cases of domestic and sexual violence (RTB)* and 3) *Berlin Trauma Network*. The projects are funded by the Berlin Senate Department responsible for health. The RTB aims to gradually implement the evidence-based WHO guidelines for healthcare and the health-related provisions of the Istanbul Convention. It is based at the Senate Department responsible for health and is chaired by the Senator for Health. Members of the RTB include organisations that help shape healthcare and health policy (chambers, professional associations, senate administrations), as well as organisations from related fields such as science, child protection, police and anti-violence work.

We consider Berlin's systematic, long-term, financially supported approach, which involves various actors and administrations, to be **a promising practice in the area of "programmes and measures"**. Since 2010, Berlin has been funding the coordination and improvement of intervention in the health care system in cases of domestic and sexual violence, and since 2018, two further services in the field. The projects work with structured concepts that are coordinated with the Senate Department for Health, with annual planning and evaluation. The Senator responsible for health chairs the RTB, thereby ensuring the committed participation of organisations that make decisions in the health sector in Berlin. The RTB's approach (*establishing a dedicated committee for healthcare, activating decision-makers*) has proven successful and is also attracting attention beyond Berlin. Berlin has included 39 health-related measures in its state action plan for the implementation of the IC and published groundbreaking documents (*standards for medical care after sexual violence, discussion paper on data collection, etc.*) that can also be used nationwide²⁶⁵. Below, we present examples of the results and impact of the commitment of the Berlin Senate Department for Health and Government and the actors in Berlin's healthcare system, as well as the promotion of the S.I.G.N.A.L. projects (approaches can be used nationwide):

- » **Creation of guidelines at state level:** 1. Since 2016, standard requirements for emergency care departments have been included in the hospital plan. They need to have concepts in place for the adequate care of survivors²⁶⁶. 2. The topic of domestic violence has been firmly established in the Berlin Medical Association's Specialty Training Regulations for all specialties since 2023 and must be taught by doctors authorised to provide continuing education²⁶⁷. 3. The state action plan for the implementation of the Istanbul Convention contains 39 measures focusing on healthcare.
- » **Creation/expansion of services:** 1. Three Berlin hospitals have established a trauma therapy (day-care as well as inpatient) service for women affected by violence. 2. The *Coordination and Intervention Centre* helps hospitals to establish reliable and standardised 24-hour care for survivors of domestic and sexual violence (*model violence protection team*). Hospitals receive specific training and ongoing support. Currently, 10 of 38 Berlin hospitals (24%) have a violence protection team. Eight other clinics are working with the *Coordination Centre* to improve intervention in cases of violence. 3. Currently, seven of 38 (18%) central emergency rooms (*Zentrale Notaufnahmen – ZNA*) offer proactive counselling services to survivors of domestic violence in cooperation with specialist counselling and support centres. Survivors

265 Fryszler, Lina et al. 2025: Standard der medizinischen Versorgung nach sexualisierter Gewalt, in: RTB 02.2025, [online] https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2025-03/R28BEQ-X_0.PDF (accessed on 09.05.2025); RTB et al. 2022: Diskussionspapier. (Routine-)Datenerhebung in der Berliner Gesundheitsversorgung zu häuslicher und sexualisierter Gewalt, in: ebd. 11.2022, [online] <https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2023-03/RTB%20Diskussionspapier%20Web.pdf> (accessed on 23.07.2025).

266 Berlin 2020: Krankenhausplan des Landes Berlin 2020, in: ebd. o.A., [online] https://www.berlin.de/sen/gesundheitswesen/medizinische-versorgung/stationaere-versorgung/krankenhausplan/krankenhausplan_2020.pdf?ts=1700741115, S. 92 (accessed on 09.05.2025).

267 Ärztekammer Berlin 2021: Weiterbildungsordnung der Ärztekammer Berlin vom 22. September 2021 in 2. Änderung vom 13. November 2024, in: ebd. o.A., [online] <https://www.aekb.de/aerztinnen/weiterbildung/weiterbildungsordnung> (accessed on 09.05.2025).

who come to the ZNA are offered the opportunity to be contacted by a specialist counsellor within three days to receive (psychosocial) support. The service is rated positively by survivors and hospital staff, with one in three survivors taking advantage of the counselling service²⁶⁸. 4. Survivors receive support in their search for trained therapists by the therapist database of the *Traumanetz Berlin*.

- » **Creating networks:** The “*Traumanetz Berlin*” network connects actors from various care sectors across Berlin who work with women affected by violence and (complex) trauma and their children.
- » **Giving survivors a voice:** A *survivor council* has been established within the *Traumanetz Berlin* to ensure that the perspectives of survivors are consistently incorporated into the further development of services. The council focuses on the mental health of women who have experienced gender-specific violence and trauma. It addresses the diverse and often overlooked (psychological) consequences throughout the course of a woman's life and sensitises (health) professionals to gender- and trauma-sensitive working methods. In addition, it strengthens the visibility of survivors as experts in specialist political contexts and actively contributes to incorporating their experiences and perspectives into improving the care situation and bringing about sustainable social, political and professional change²⁶⁹.
- » **Raising awareness:** Since 2021, the RTB has been holding annual action days “*Stop violence! Strengthen health*”. These promote professional and public awareness of the importance of healthcare and possible courses of action²⁷⁰.
- » **Creating confidence in action:** The RTB has issued protocols/guidelines for key areas of health-care provision, and surveys are used to evaluate awareness of these recommendations and the need for improvement.
- » **Establishing and implementing training programmes:** Every year, the *Coordination and Intervention Centre* trains over 1,400 healthcare professionals (see Art. 15) using the RTB's protocols/guidelines and the WHO guidelines.

Regarding question 19

Have specific measures been taken to ensure that public health services (hospitals, health centres, other) respond to the safety and medical needs of women and girls victims of all forms of violence covered by the Istanbul Convention on the basis of national/regional standardised protocols?

With regard to the requirement on *the prevention of and assistance with abuse and violence* that has been in place since 2020 in the Quality Management Guideline (*Qualitätsmanagement Richtlinie – QM-RL*) of the Joint Federal Committee on Health (*Gemeinsamer Bundesausschuss – G-BA*), GREVIO's conclusion remains valid: There is no systematic implementation of the requirements and there is a lack of intersectional cooperation between healthcare institutions and specialist agencies, as well as a lack of reliable local/regional care and referral pathways. The 2024 quality report of the National Association of Statutory Health Insurance Physicians (*Kassenärztliche Bundesvereini-*

268 Stoltmann, Catrin & Harlos, Sabine 2023: Pro Active Consulting – Relief through cooperation in: S.I.G.N.A.L. e.V. o.A., [online] <https://www.signal-intervention.de/sites/default/files/2023-10/Pro%20Aktive%20Beratung.pdf> (accessed on 09.05.2025).

269 Traumanetz Berlin/S.I.G.N.A.L. e.V. 2024: Raise awareness, demand change, fight for rights—give those affected a voice! Self-image of the Traumanetz Berlin 2024 Council of Those Affected, [online] <https://traumanetz.signal-intervention.de/sites/traumanetz/files/2024-12/2024.12.19.%20Selbstbild%20des%20Betroffenenrates.pdf> (accessed on 09.05.2025).

270 RTB o.J.: Aktionstage, in: ebd. o.A., [online] <https://rtb-gesundheit.de/aktionstage> (accessed on 09.05.2025).

gung – KVB) on quality management in doctors surgeries does not address this issue²⁷¹. In the 2021 KVB report, answering the question on prevention of and assistance with abuse and violence was voluntary²⁷².

There are no medical (national, evidence-based) *AWMF guidelines (Arbeitsgemeinschaft der Wissenschaftlichen Medizinischen Fachgesellschaften e.V.)*²⁷³ that address the specific needs of women and girls affected by violence and specify standards of care. However, many (federal) Länder have documents that provide guidance on care after domestic and sexual violence²⁷⁴. In addition, the evidence-based guidelines of the WHO and the clinical handbook are available in translated form²⁷⁵. An S1 guideline on care after sexual violence is currently being developed^{276,277} (see Article 25).

At the state level, protocols/guidelines in the following areas of healthcare have been developed within the framework of the RTB in Berlin: emergency services, central emergency rooms, general medicine, obstetrics, dentistry, pharmacies, survivors with children, and pregnancy (conflict) counselling centres²⁷⁸. They are based on the evidence-based guidelines of the WHO²⁷⁹. The protocols are intended to enable medical staff to deal confidently with survivors of domestic and sexual violence. They are available free of charge throughout Germany.

In March 2025, the RTB published the “Standard of Medical Care after Sexual Violence”²⁸⁰ for the **care of victims of sexual violence**. This Standard combines all necessary care steps and includes a flow chart and explanations. It also serves as a basis for addressing funding gaps and improving care structures. The Standard has been co-signed by numerous professional associations and other relevant organisations. It was developed in and for Berlin, but can also be used nationwide.

In Berlin, interdisciplinary care pathways and information sheets are available for outpatient and (partially) inpatient trauma therapy care and the area of protection against violence²⁸¹. The materials were created as part of the *Traumanetz Berlin*. The aim is to improve care at the contact

271 Kassenärztliche Bundesvereinigung 2024: Qualitätsbericht Ausgabe 2024, in: ebd. o.A., [online] <https://www.kbv.de/documents/infothek/zahlen-und-fakten/qualitaetsbericht/kbv-qualitaetsbericht-2024.pdf> (accessed on 12.05.2025).

272 Kassenärztliche Bundesvereinigung 2012: Umsetzungsstand des einrichtungsinternen Qualitätsmanagements in der vertragsärztlichen und vertragspsychotherapeutischen Versorgung, in: Gemeinsamer Bundesausschuss o.A., [online] https://www.g-ba.de/downloads/17-98-5372/2022-11-17_Bericht-2021-KBV-KZBV.pdf (accessed on 12.05.2025).

273 Working Group of Scientific Medical Societies, in: ebd. o.A., [online] <https://www.awmf.org/leitlinien> (accessed on 18.08.2025).

274 S.I.G.N.A.L. e.V. 2020: Guidelines for healthcare intervention in cases of domestic and sexual violence in: ebd. 06.2020, [online] https://www.signal-intervention.de/sites/default/files/2020-06/2020_06_10%20Uebersicht_Leitfaeden_Gesundheit_final_0.pdf (accessed on 09.05.2025).

275 WHO/S.I.G.N.A.L. e.V. 2013: Responding to intimate partner violence and sexual violence against women in dt. Übersetzung: Umgang mit Gewalt in Partnerschaften und mit sexueller Gewalt gegen Frauen Leitlinien der WHO für Gesundheitsversorgung und Gesundheitspolitik, in: Signal e.V. o.A., [online] https://signal-intervention.de/sites/default/files/2023-01/RTB-WHO-Leitlinien%2822%29_web-1.pdf (accessed on 09.05.2025).

276 Fryszer, Lina et al. 2025: Runder Tisch Berlin publiziert „Standard der medizinischen Versorgung nach sexualisierter Gewalt“. In: Der Frauenarzt, Jg. 2025, Nr. 8.

277 AWMF 2024: Anmeldung einer S1 Leitlinie zur Betreuung und Versorgung von weiblichen mutmaßlich Stuprum-Betroffenen, in: ebd. o.A., [online] <https://register.awmf.org/de/leitlinien/detail/015-097#anmeldung> (accessed on 09.05.2025).

278 siehe dazu alle Handlungsempfehlungen des RTB, [online] <https://rtb-gesundheit.de/praxismaterialien> (accessed on 09.05.2025).

279 WHO/S.I.G.N.A.L. e.V. 2013: Responding to intimate partner violence and sexual violence against women in dt. Übersetzung: Umgang mit Gewalt in Partnerschaften und mit sexueller Gewalt gegen Frauen Leitlinien der WHO für Gesundheitsversorgung und Gesundheitspolitik, in: Signal e.V. o.A., [online] https://signal-intervention.de/sites/default/files/2023-01/RTB-WHO-Leitlinien%2822%29_web-1.pdf (accessed on 09.05.2025).

280 Fryszer, Lina et al. 2025: Standard der medizinischen Versorgung nach sexualisierter Gewalt, in: RTB 02.2025, [online] https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2025-03/R28BEQ-X_0.PDF (accessed on 09.05.2025).

281 Traumanetz Berlin/S.I.G.N.A.L. e.V. o.J.: Care pathway between violence protection and trauma therapy, in: S.I.G.N.A.L. e.V. o.A., [online] <https://traumanetz.signal-intervention.de/sites/traumanetz/files/2023-07/Versorgungspfad%20zwischen%20Gewaltschutzbereich%20und%20Traumatherapie.pdf> (accessed on 15.05.2025); Traumanetz Berlin/S.I.G.N.A.L. e.V. o.J.: Informationsblatt zur (teil-)stationären traumatherapeutischen Behandlung, in: S.I.G.N.A.L. e.V. o.A., [online] <https://traumanetz.signal-intervention.de/sites/traumanetz/files/2024-04/TnB%20Infoblaetter%202-3%20web.pdf> (accessed on 09.05.2025).

points between the areas mentioned, to make it trauma-informed and to facilitate transitions for survivors. This should enable care professionals to gain confidence in their actions and develop trauma-informed knowledge and a greater sense of responsibility for the affected group and related care structures.

Various documentation proformas are available nationwide for the legally admissible documentation of injuries resulting from domestic violence, e.g. Hessen/*Frauennotruf Frankfurt*²⁸², Ärztekammer Hamburg²⁸³, Ärztekammer Niedersachsen²⁸⁴, Berlin/*S.I.G.N.A.L. e. V. Dokumentationsbogen*²⁸⁵. In addition, recommendations on documentation and securing evidence are available, e.g. *German Society for Legal Medicine*²⁸⁶, *Institute for Legal Medicine Düsseldorf*²⁸⁷, *iGOBSIS – Instructions for examining victims of violence*²⁸⁸ and *S.I.G.N.A.L. e. V.*²⁸⁹.

Regarding question 20 (a/b/c/d/e/f)

Do such protocols detail the procedure to:

The following information refers to the protocols/guidelines developed within the framework of the *RTB* for the federal state of Berlin²⁹⁰. In our view, the *RTB*'s approach and its results represent **promising practice** that should be expanded.

1. Identification of victims through screening;

All protocols/guidelines include suggested wording and advice on how medical professionals can approach the survivor and how signs of domestic violence can be recognised and addressed.

2. Provide treatment for all the medical needs of victims in a supportive manner;;

The protocols/guidelines indicate that the needs of survivors should be ascertained and that survivors should decide on the next steps themselves.

282 Frauennotruf Frankfurt 2010: Dokumentationsbogen und Formulierungshilfe, in: ebd. [online] <https://www.frauennotruf-frankfurt.de/fachwissen/aerztliche-dokumentation> (accessed on 09.05.2025); Hessisches Ministerium für Arbeit, Familie und Gesundheit 2010: Zahnärztliche Dokumentation bei interpersoneller Gewalt, in: Bundeszahnärztekammer 07.2010, [online] https://www.bzaek.de/fileadmin/PDFs/za/Praev/H%C3%A4usliche_Gewalt/Dokumentationsbogen.pdf (accessed on 09.05.2025).

283 Ärztekammer Hamburg o.J.: Häusliche Gewalt – Dokumentationsbogen, in: ebd. 10.2010, [online] https://www.aerztekammer-hamburg.org/files/aerztekammer_hamburg/wissenswertes/gewalt/dokumentationsbogen_leitfaden_h_gewalt_okt2010.pdf (accessed on 09.05.2025).

284 Arbeitskreis Häusliche Gewalt bei der Ärztekammer Niedersachsen o.J.: Dokumentationsbogen häusliche Gewalt, in: ebd. o. A., [online] https://www.ms.niedersachsen.de/download/52682/Dokumentationsbogen_Haeusliche_Gewalt.pdf (accessed on 09.05.2025).

285 Interdisziplinären Fachgruppe „Gerichtsverwertbare Dokumentation“ der Koordinierungsstelle des S.I.G.N.A.L. e.V. 2023: S.I.G.N.A.L. Dokumentationsbogen bei häuslicher Gewalt, in: S.I.G.N.A.L. e.V. o. A., [online] https://www.signal-intervention.de/sites/default/files/2024-01/2023_11_24%20Dokubogen-A4_2023_web_fin.pdf (accessed on 09.05.2025).

286 Banaschak Sibylle et al. 2014: Forensisch-medizinische Untersuchung von Gewaltopfern, in: Rechtsmedizin, Jg. 24, S. 405–411.

287 Gahr, Britta & Ritz-Timme, Stefanie 2017: Empfehlungen für Standards zur Gewaltopferuntersuchung. Verletzungsdokumentation und Spurensicherung in Fällen sexualisierter Gewalt bei Frauen und jugendlichen Mädchen, in: Landtag NRW 16.03.2017, [online] <https://www.landtag.nrw.de/Dokumentenservice/portal/WWW/dokumentenarchiv/Dokument/MMV16-4864.pdf;jsessionid=82DB459F472A1E07E56E283EC0C5689F> (accessed on 15.05.2025).

288 iGOBSIS o.J.: Homepage von iGOBSIS, in: ebd. o. A., [online] <https://gobsis.de/anleitungen/> (accessed on 15.05.2025).

289 S.I.G.N.A.L. e.V. et al. 2018: Gerichtsfeste Dokumentation und Spurensicherung nach häuslicher und sexueller Gewalt. Empfehlungen für Arztpraxen und Krankenhäuser, in: ebd. 03.2018, [online] https://www.signal-intervention.de/sites/default/files/2020-04/Infothek_Empfehlungen_Doku_2018_1.pdf (accessed on 09.05.2025).

290 See all recommendations for action from the RTB., [online] <https://rtb-gesundheit.de/praxismaterialien> (accessed on 09.05.2025).

3. Collect forensic evidence and documentation;

The protocols/guidelines refer to the issue and its importance and state that survivors should regularly be offered documentation and, if necessary, evidence collection as part of their initial care.

4. Ensure that a clear message of support is conveyed to the victim.

All protocols clearly point out that staff's clear stance against violence plays an important role in the conversation.

5. Refer to the appropriate specialist support services that form part of a multi-agency co-operation structure;

All protocols/guidelines include lists of addresses with specialist help for survivors. Berlin's anti-violence projects are represented at the *RTB* and are involved in drawing up the protocols.

6. Identify children who may have been exposed to domestic violence or other forms of gender-based violence against women and girls and require further support.

Recommendations for the care of survivors with children are available to supplement the other protocols/guidelines. They provide practical assistance, including guidance on assessing possible threats to the child's well-being²⁹¹.

Regarding question 21

Please provide information on the procedures in place for the documentation and collection by actors of the public health sector of forensic evidence in relation to victims of domestic violence, victims of sexual violence, including rape, and victims of female genital mutilation.

Domestic and sexual violence

The financing of forensic evidence collection by health insurance funds is regulated in §27/§132k SGB V²⁹². The regulation basically covers sexual violence and abuse, sexual assault and sexual coercion, as well as maltreatment. There is no uniform nationwide procedure for implementing the regulation. Accordingly, the form, quality, quantity and financing of the services vary.

There is, however, consensus on the use of forms (documentation proformas) and evidence collection kits, as well as on the need for further training for all professional groups involved²⁹³.

291 Hendrike Stein et al. 2023: Gesundheitsversorgung bei häuslicher Gewalt. Ergänzende Empfehlungen zur Versorgung von Betroffenen mit Kind(ern), in: S.I.G.N.A.L. e. V. 03.2023, [online] https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2023-07/Empfehl_hG-Betr%2BKind_web.pdf (accessed on 09.05.2025).

292 In Section 27(1) of Book V of the Social Code (SGB V), the legislator has stipulated that health insurance funds shall finance the confidential collection of evidence and documentation "of damage to health that may be the result of maltreatment, sexual abuse, sexual assault, sexual coercion, or rape." The law came into force on March 1, 2020, with further details on the contract terms regulated by Section 132k SGB V. This introduces a legal right to documentation and evidence collection that can be used in court for persons with statutory health insurance. The costs incurred are to be covered by the health insurance funds. The costs for training the professionals involved and for the evidence collection kits are not covered by this.

293 RTB 2021: Professional recommendations from the interdisciplinary working group "Health insurance-funded confidential documentation and evidence preservation" on the implementation of legal requirements § 27/§ 132k SGB V in Berlin, in: ebd. 01.2021, [online] <https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2022-02/KaVe-DoS%20Empfehlungen.pdf> (accessed on 09.05.2025).

Survivors of domestic violence can usually turn to *forensic medical examination centres* to have their injuries documented. However, these are often not located close to where they live and some have limited opening hours/service. There is no nationwide overview for survivors of which and how many clinics or doctors' surgeries offer documentation of injuries that can be used in court. The *German Society for Forensic Medicine provides an overview of forensic medicine contact points*²⁹⁴. In Berlin (state level), the *RTB*, in cooperation with the *S.I.G.N.A.L. Coordination Centre*, offers an *overview of Berlin clinics* that offer injury documentation²⁹⁵. Some (federal) Länder have developed comprehensive procedures and implementation models for court-admissible documentation and evidence collection, e.g. *iGOBSIS* (funded by the state of North Rhine-Westphalia)²⁹⁶ and *ProBeweis* in Lower Saxony²⁹⁷ (funded by the state). There is no nationwide regulation for uninsured persons (see also Art. 25).

FGM/C

There is no uniform and specific information or services available for the documentation and preservation of evidence **after FGM/C**. The lack of data on how many girls and women are affected and at risk in Germany is problematic. A survey in Berlin found a prevalence of FGM/C of 1.8% among recently arrived asylum-seeking women²⁹⁸, but it is likely that not all cases were recorded. Medical and psychosocial treatment services are available for FGM/C survivors, e.g. at the *Desert Flower Centre*²⁹⁹ in Berlin and a specialist *consultation service at the Technical University of Munich Hospital*. Survivors often need medical documentation as evidence when applying for residence status and stating FGM/C as the reason for fleeing their country. However, the *Professional Association of Gynaecologists* reports that FGM/C that has already been suffered is not recognised as a reason for asylum, which is unacceptable. To improve assessment, diagnosis and treatment recommendations, *AG Fide e. V.* offers a virtual "FGM board" (exchange, consultation for doctors with experts and colleagues). *AG Fide e. V.* is also developing a teaching curriculum on counselling and dealing with women affected by FGM³⁰⁰. According to experts, there is a need for further training among health-care professionals so that all forms of mutilation can be recognised. The topic was included in the Model Training Regulation for doctors in 2022, but not for the relevant field of Social Medicine. There is a need for improvement here. Two *Association of Scientific Medical Societies* (AWMF) guidelines address the issue and recommendations have been issued by the German Medical Association³⁰¹. The lack of qualifications among many doctors results in experiences that are sometimes irritating or disturbing for women survivors. Some doctors were shocked when treating FGM/C survivors and asked the patients for explanations and information about the practice. Others do not address the issue – either because they cannot recognise FGM/C or because they are unsure how to deal with it.

294 Deutsche Gesellschaft für Rechtsmedizin o.J.: Klinische Rechtsmedizin – Untersuchungsstellen, in: ebd. o. A., [online] <https://www.dgrm.de/arbeitsgemeinschaften/klinische-rechtsmedizin/untersuchungsstellen> (accessed on 09.05.2025).

295 RTB o.J.: Hilfe für Betroffene, in: ebd. o. A., [online] <https://rtb-gesundheit.de/hilfe-fuer-betroffene> (accessed on 09.05.2025).

296 iGOBSIS o.J.: Homepage von iGOBSIS, in: ebd. o. A., [online] <https://gobsis.de/> (accessed on 09.05.2025).

297 ProBeweis o.J.: Professionelle Beweissicherung für die Betroffenen von Gewalt, in: ebd. o. A., [online] <https://probeweis.mhh.de/> (accessed on 09.05.2025).

298 Kusi, Evelyn et al. 2025: Correspondence Genital Mutilation/Cutting in Female Asylum-Seekers. Findings of a Survey in Berlin, 2018–2022, in: *Deutsches Ärzteblatt International*, Jg. 122, S. 168–169.

299 see Desert Flower Centre Waldfriede, [online] <https://www.dfc-waldfriede.de/>.

300 see homepage of Fide e. V. with a list of activities and services, [online], <https://ag-fide.org/fgm-board-female-genital-mutilation/> (accessed on 09.05.2025).

301 Bundesärztekammer 2016: Empfehlungen zum Umgang mit Patientinnen nach weiblicher Genitalverstümmelung, in: ebd. 04.2016, [online] https://www.bundesaerztekammer.de/fileadmin/user_upload/_old-files/downloads/pdf-Ordner/Empfehlungen/2016-04_Empfehlungen-zum-Umgang-mit-Patientinnen-nach-weiblicher-Genital-verstuemmelung.pdf (accessed on 28.08.2025).

Regarding question 22

Are all women victims of violence, irrespective of any of the grounds listed in Article 4 paragraph 3 of the Istanbul Convention, in particular asylum-seeking women, refugee women, migrant women, women from national or ethnic minorities, women with irregular residence status, women with disabilities and LGBTI women, able to benefit on an equal footing from existing healthcare services? Please describe any measure taken to reduce legal or practical barriers to their accessing regular healthcare services.

In principle, health services are available to people with private and statutory health insurance. In Germany, health insurance is mandatory for everyone. However, according to experts³⁰² and scientific studies³⁰³, it is estimated that more than one million people in Germany have limited or no health insurance. Those particularly affected are people without secure residence status, EU citizens, Romani women, insured persons with contribution debts, and people experiencing homelessness.

Barriers to access for **women with disabilities** exist particularly in the area of doctors surgeries (**outpatient care**), as these are generally not barrier-free/structurally accessible (despite a regulation in *SGB V § 2a and Article 25 CRPD*). Individual (federal) Länder are implementing special solutions, such as the gynaecological care of women with disabilities at the *Family Planning Centre Balance* in Berlin (funded by the Senate Department for Health)³⁰⁴. There are only five such special outpatient clinics nationwide³⁰⁵. For survivors with disabilities under legal guardianship, access to care after experiencing violence is even more difficult: often, the consent of the guardian is a prerequisite for access to care. This barrier is exacerbated when the violence is perpetrated by the legal guardian.

Access for **young people** who are capable of giving consent to have injuries documented confidentially and evidence collected independently of their parents approval remains uncertain. Legal clarification and further measures have not yet been taken.

The so-called **Return Improvement Act** (*Rückführungsverbesserungsgesetz*) of February 21st 2024 resulted in an amendment to the Asylum Seekers Benefits Act, which worsens the situation of survivors of gender-specific violence. The period for the provision of minimal basic benefits was extended from 18 to 36 months (*Section 2 (2) sentence 1 Asylum Seekers Benefits Act*), meaning that benefit recipients are excluded from regular healthcare for three years³⁰⁶. According to *Section 4* of the *Asylum Seekers Benefits Act*, survivors are only entitled to treatment for acute illnesses and pain, as well as care during pregnancy and childbirth. Decisions on further treatments, for example in the case of mental illness, are often made by non-medical staff in social welfare offices. This restriction of access to healthcare for survivors contravenes *Article 4(3)* of the Istanbul Convention and *GREVIO Recommendation 151*³⁰⁷. For information on refugee women in collective accommodation, see *question 23*.

Migrant **Romnja** are also often unable to use existing health services on an equal footing. There are many reasons for this: multiple discrimination in hospitals and surgeries, a lack of services in easy-to-read language, and a historically grown mistrust of institutions of the dominant society. As a result, Romnja do not use health services or are hesitant to do so. In order to remove legal and

302 Kurz, Charlotte 2022: Menschen ohne Krankenversicherung: Ein oft übersehenes Problem, in: Deutsches Ärzteblatt Jg. 2022, Nr. 41.

303 Dickmann, Anke 2024: The Health and Medical Care of People Without Regular Health Insurance – An Exploratory Cross-Sectional Study. in: Deutsches Ärzteblatt Jg. 2024, Nr. 25.

304 Familienplanungszentrum Balance o.J.: Effektive Gesundheitsversorgung – niedrigschwellig und barrierearm, in: ebd. o.A., [online] <https://www.fpz-berlin.de/Gynaekologische-und-Hebammenangebote-884769.html> (accessed on 15.05.2025).

305 Weibernetz e.V. o.J.: Gynäkologische Versorgung: Nicht für alle selbstverständlich, in: ebd. o.A., [online] <https://www.weibernetz.de/gynv/gynaekologische-versorgung-nicht-fuer-alle-selbstverstaendlich.html> (accessed on 01.07.2025).

306 GREVIO 2022: First report of the Committee of Experts (GREVIO) on the implementation of the Council of Europe Convention of May 11, 2011 (Istanbul Convention) in Germany, in: BMBFSJF 07.10.2022, [online] <https://www.bmbfsfj.bund.de/resource/blob/202386/3699c9bad150e4c4ff78ef54665a85c2/grevio-evaluierungsbericht-istanbul-konvention-2022-data.pdf>, S. 26 (accessed on 28.07.2025).

307 *ibid.*

practical barriers – including to regular health services – the state-funded project “*Bachtale Romnja*” was launched in Frankfurt am Main, for example. There, Romnja themselves work as professionals: they advise women from the community, accompany them to appointments and empower them to claim their rights to healthcare and confidently take advantage of existing services.

In the low-threshold medical services provided by **homelessness services** (such as street clinics and medical-nursing social work), up to 70% of patients have no health insurance, especially EU citizens³⁰⁸. They are denied access to needs-based medical care in the standard system. In addition, there are people with suspended insurance claims due to contribution debts, who are only entitled to limited acute care services. The establishment of clearing houses throughout Germany to clarify health insurance coverage is a positive development, but these are not spread nationwide and have limited resources. There are other barriers to accessing general health services such as shame or lack of awareness of illness. Low-threshold medical services such as street clinics often provide basic care, but in many cases they are not regularly funded and are often dependent on donations and the work of volunteer medical and nursing professionals. Further treatment by specialists such as gynaecologists or psychotherapists is often not guaranteed. Access to (inpatient) hospital care for people experiencing homelessness is also often difficult due to increasing cost pressures. When treatment is provided, people experiencing homelessness without health insurance are increasingly being discharged to low-threshold medical practices run by emergency housing assistance, to emergency shelters or even onto the streets³⁰⁹. It is therefore to be feared that women affected by violence who have no or only limited health insurance are not reached by the health system and/or do not receive the care they need. The exact extent of this is unknown.

Regarding question 23

Please provide information on the measures in place to facilitate the identification and care of victims of violence against women in institutions for persons with disabilities and for the elderly as well as for those in closed reception facilities for asylum-seekers and to respond to their safety and protection needs.

In order to improve protection against violence in **institutions for people with disabilities**, outpatient and inpatient facilities have been required to have violence protection concepts in place since 2021 in accordance with *Section 37a of SGB IX*. However, there is a lack of minimum standards for content and sanctions for non-compliance, as well as facility-independent complaints offices and external monitoring and evaluation structures for incidents of violence and their investigation in integration assistance facilities. A study from 2024 confirms the lack of effective implementation of these concepts in many facilities³¹⁰. The BMAS is currently working with civil society to develop a “*Guide to Violence Protection in Facilities*”. It remains to be seen how binding this guide will be for the federal government, the states and municipalities.

The situation regarding **closed facilities for asylum seekers** is also inconsistent throughout the facilities. According to *Section 44(2a) of the Asylum Act*, the *Länder* are required to take appropriate measures to ensure the protection of women and vulnerable persons when accommodating asylum seekers. A nationwide initiative by non-governmental organisations in cooperation with the BMBFSFJ has developed uniform guidelines for the creation, imple-

308 SIDA – Soforthilfe und Information durch ambulante Versorgung e.V. 2024: Tätigkeits- und Wirkungsbericht des Projekts “Pflegerische Betreuung suchterkrankter Obdachloser im Innenstadtbereich durch aufsuchende krank-
enpflegerische Arbeit”, in: ebd. o.A., [online] https://daten.verwaltungsportal.de/dateien/news/9/8/8/4/2/1/Projektbericht_SIDAMobil_2023-24.pdf (accessed on 28.08.2025).

309 Bundesarbeitsgemeinschaft Wohnungslosenhilfe 2025: Niedrigschwellige medizinische Versorgungsangebote für wohnungslose Menschen im Gesundheitssystem etablieren und finanzieren, in: ebd. o.A., [online] https://www.bagw.de/fileadmin/bagw/media/Doc/POS/POS_25_BAGW_Gesundheit_Niedrigschwellige_medizinische_Versorgungsangebote.pdf (accessed on 31.07.2025).

310 Schröttle, Monika et al. 2024: Gewalt und Gewaltschutz in Einrichtungen der Behindertenhilfe, in: BMFSFJ 05.07.2025, [online] <https://www.bmfsfj.de/bmfsfj/service/publikationen/gewalt-und-gewaltschutz-in-einrichtungen-der-behindertenhilfe-241798> (accessed on 15.05.2025).

mentation and monitoring of accommodation-specific protection concepts³¹¹. However, these minimum standards are not mandatory; many *Länder* have their own violence protection concepts for refugee accommodation, some of which are mandatory for the operators. In addition, there are differences between publicly and privately run accommodation facilities. In practice, it has been observed that (male) security personnel in some facilities cause feelings of insecurity among residents – some of whom are traumatised – particularly when rooms cannot be locked, and that women do not receive sufficient information on violence protection. There is often a fear that reporting violence and assaults – by facility staff or partners/family members – could have negative consequences for the asylum procedure³¹². Access to medical care or trauma counselling is also often restricted or delayed. Uncertain residence status reduces the likelihood of actual use, even in cases where treatment is formally possible. Available health counselling services (e.g. *guidebook on health or asylum seekers*) exist, but their implementation remains patchy and varies from region to region³¹³. There are cultural and gender-specific barriers to accessing psychosocial care for refugees: shame, stigmatisation and unclear access possibilities prevent women affected by violence from reaching out for help. Language barriers are a common hurdle – in cases of violence, this is exacerbated by the fact that children or close relatives, who would otherwise translate, are not an option (also due to their own involvement). It would be desirable to have lower-threshold access to language mediators without mandatory certification requirements for referral (see question 24).

Regarding question 24

Please provide information on how the authorities ensure that different groups of women and girls, inter alia women with disabilities, Roma women and other women belonging to national or ethnic minorities, migrant women and intersex persons are fully informed, understand and freely give their consent to procedures such as sterilisation and abortion.

For all medical procedures, a prior documented consultation in accordance with Sections 630d and 630e of the *German Civil Code (BGB)* is legally required. The information proformas used – often by medical liability insurance companies – are available in various languages³¹⁴. Language mediation is possible during the consultation, but due to insufficient funding, it is not available nationwide and does not meet uniform quality standards.

In 2023, Section 1830 of the *German Civil Code* was introduced into guardianship law to tighten the requirements for sterilisation of people who are unable to give consent. So far, there is no data on how this is affecting practice. However, in June 2025, the Federal Ministry of Justice and Consumer Protection (BMJV) announced a research project entitled “*Evaluation of the sterilisation regulations in guardianship law under old and new law*”³¹⁵. According to a study on “*violence and protection against violence in institutions*” (2024), 11% of **women with disabilities** in institutions are sterilised, half of them having consented by themselves, the other half having been influenced by outsiders (e.g. doctors or carers)³¹⁶.

311 BMBFSFJ 2021: Mindeststandards zum Schutz von geflüchteten Menschen in Flüchtlingsunterkünften, in: ebd. [online] <https://www.bmbfsfj.bund.de/resource/blob/117472/bc24218511eaa3327fda2f2e8890bb79/mindeststandards-zum-schutz-von-gefluechteten-menschen-in-fluechtlingsunterkuenften-data.pdf> (accessed on 22.08.2025)

312 DaMigra Interview vom 12.08.2025

313 LandesPsychotherapeutenKammer Rheinland-Pfalz 2023: Discrimination in healthcare is widespread in: ebd. 09.11.2023, [online] <https://www.lpk-rlp.de/detail/diskriminierung-im-gesundheitswesen-weit-verbreitet.html> (accessed on 10.08.2025).

314 Interview DaMigra with ProFamilia Berlin, 12.08.2025.

315 BMJV o.J.: Ausschreibung für das Forschungsvorhaben “Evaluierung der Sterilisationsregelung im Betreuungsrecht nach altem und neuen Recht”, in: e-Vergabe o.A., [online] <https://www.evergabe-online.de/tenderdocuments.html?4&id=778007> (accessed on 01.07.2025).

316 Schröttle, Monika et al. 2024: Sexuelle Belästigung, Gewalt und Gewaltschutz in Werkstätten für behinderte Menschen (WfbM) – Langfassung, in: BMBFSFJ 06.2025, [online] <https://www.bmbfsfj.de/resource/blob/241788/cf->

Abortions are generally criminalised under *Section 218* of the German Criminal Code and are only exempt from punishment in certain exceptional cases. This restricts the right to sexual self-determination and has an impact on the care situation of people with unwanted pregnancies, which has been deteriorating for years, as the results of the ELSA study show³¹⁷. As a result, especially people with unwanted pregnancies in vulnerable situations encounter access barriers to safe abortion. This makes it difficult or even impossible for them to have the procedure carried out. Such barriers can be uncertainty about the legal situation, long distances to clinics and counselling centres, and insufficient coverage of costs by statutory health insurance funds. The authorities are therefore currently unable to ensure that the above-mentioned groups are fully informed about abortions and have access to safe termination. There is an urgent need to expand and sustainably finance pregnancy counselling centres to ensure stress- and trauma-sensitive, barrier-free, low-threshold, comprehensive, multilingual and free counselling services.

Experience from the counselling practice of one organisation shows that peer counselling for **intersex people** and their relatives often lacks the financial resources for professional language mediation. Those seeking advice must therefore either pay for language mediation themselves or try to organise it through other agencies. Language mediation is essential, especially when dealing with authorities or visiting doctors, but it is neither affordable for many survivors nor sufficiently covered by social services or volunteers. As a result of these gaps, children, relatives or community members often take on the task of translation, which can be particularly stressful for children. There is also a risk that information will be omitted, mistranslated or not passed on due to shame – especially if the interpreter has prejudices against intersexuality or has been socialised in queerphobic contexts. For refugee families with intersex children, access to counselling and education is often not guaranteed. Queer- and gender-sensitive protection concepts are required in accommodation facilities, as well as trained staff who can identify intersex children, build trust and provide appropriate support to families. However, access to support also depends on how the family deals with intersexuality and their willingness to accept appropriate services.

In practice, it has been shown that dialogue with self-advocacy organisations is often not actively sought by lawmakers and institutions. Requests, demands and the professional expertise of these organisations often go unheeded³¹⁸.

Recommendations

We recommend the following to the Federal Government

- » to ensure full and adequate funding for all health care services for survivors of violence (regardless of status), while guaranteeing protection and safety.
- » to call on the National Association of Statutory Health Insurance Funds (GKV) to underpin the QM-RL (Part A § 4, para. 2) on abuse and violence with working materials and assistance for dealing with survivors of domestic and sexual violence, to use recognised existing materials for this purpose and to review their implementation.

d3a02eb1aeeda15ccbd08238160d5/sexuelle-belaestigung-gewalt-und-gewaltschutz-in-werkstaetten-fuer-behinderte-menschen-langfassung-data.pdf, S. 59 (accessed on 08.07.2025).

317 Hochschule Fulda et al. 2025: Erfahrungen und Lebenslagen ungewollt Schwangerer. Angebote der Beratung und Versorgung (ELSA) in BMG [online] <https://www.bundesgesundheitsministerium.de/service/publikationen/details/elsa.html> (accessed on 08.09.2025)

318 DaMigra e.V. 2025: Interview von DaMigra e.V. mit einer anonym bleibenden Organisation aus der Praxis, 31.07.2025.

- » establish a nationwide network and exchange for intervention in cases of domestic and sexual violence (exchange of good practices, further development of recommendations and services) and remove barriers to access.
- » encourage professional associations to develop evidence-based guidelines (S-2k or higher) for care after domestic violence and sexual violence, incorporating existing standards/recommendations and practical experience.
- » introduce a nationwide regulation for uninsured persons.
- » promote the expansion and funding of pregnancy counselling centres to ensure stress- and trauma-sensitive, barrier-free, low-threshold, comprehensive, multilingual and free counselling services.

We recommend the following to the Länder

- » implement the health-related provisions of the Istanbul Convention, e.g. by setting up round tables (similar to Berlin), under the leadership/involvement of the Ministry of Health and in close cooperation with NGOs.
- » include the issue in state hospital plans/laws and public health service laws.
- » establish interventions for domestic violence and sexual violence in healthcare facilities.
- » recognise and financially support the special importance of general support services.
- » promote the exchange of experience on needs-based care for women (and their children) affected by violence in emergency housing situations through cooperation between emergency housing assistance and women's shelters.
- » include general support services in all initial analyses of needs-based support systems in the context of the Violence Assistance Act.
- » establish and promote violence protection concepts as a mandatory minimum standard in regulatory accommodation and homelessness services.

We recommend the following to the municipalities

- » promote cooperation between health and social services and specialist agencies or support services, e.g. within the framework of round tables.
- » provide housing quotas for women (with children) in housing emergencies with links to municipal support structures.
- » promote violence protection (including the development of violence protection concepts and structural changes) for regulatory accommodation and homelessness services.
- » promote low-threshold medical projects such as street clinics and outreach medical and nursing social work, as well as clearing houses, in order to provide care for uninsured women affected by violence and accompany them into the regular medical system.
- » establish special gynaecological outpatient clinics or gynaecological consultation hours for the treatment and care of women with disabilities until a comprehensive barrier-free infrastructure is available at registered doctors' practices.
- » provide accessible (e.g. sign language, simple language) educational materials and multilingual information.

Article 22 – Specialist support services

Background

Article 22 obliges States Parties to provide specialist support services for women affected by violence and their children. Many of the structural problems identified in the 2021 alternative report still persist³¹⁹. Challenges include the provision of these support services, particularly with regard to funding, accessibility and nationwide availability.

Rising case numbers and increasingly complex support needs are compounded by a growing shortage of skilled workers, insufficient human and financial resources, and a lack of job security. Only 7.3% of specialist counselling and intervention centres are secured by permanent institutional funding³²⁰. Access to services by survivors is made more difficult by barriers such as a lack of accessibility, a lack of services for women who use drugs and women with mental health issues, and a lack of secure language mediation. Furthermore, specialist counselling and support centres must increasingly adapt to providing support for digital violence. To better reach younger target groups, a strong presence on social media is also necessary. Both require additional resources and training for professionals.

Regarding question 25 (a/b/c/d/e/f/g/h)

Please describe the type of specialist support services dedicated to women victims of the forms of gender-based violence covered by the Istanbul Convention (e.g., stalking, sexual harassment and domestic violence, including their digital dimension, female genital mutilation, forced marriage, forced sterilisation, forced abortion), including those specialist support services providing:

- a.** *Shelters and/or other forms of safe accommodation*
- b.** *medical support*
- c.** *short- and long-term psychological counselling ,*
- d.** *trauma care*
- e.** *Legal counselling*
- f.** *outreach services*
- g.** *Telephone helpline*
- h.** *other forms of support (e.g. socio-economic empowerment programmes, online assistance platforms etc.)*

Germany's network of women's shelters and specialist counselling and support centres concerning all the above-mentioned forms of violence does not meet the demand. Specialist services are often concentrated in larger cities, while they are lacking in many regions, especially in rural areas. As a result, survivors may not be able to find a suitable counselling centre in their catchment area and

³¹⁹ BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf> (accessed on 30.06.2025).

³²⁰ DIMR 2024: Fact sheet: Monitoring violence against women Factsheet in: ebd. 12.2024, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Fact_Sheet/Factsheet_Monitor_GeschlechtsspezGewalt_Zur_Umsetzung_der_Istanbul-Konvention_in_Deutschland.pdf, S.2 (accessed on 18.08.2025).

therefore do not have access to specialist support close to home (see above and Alternative Report 2021 as well as *Monitor Violence against Women*³²¹).

The **Violence Assistance Act** creates, for the first time, a nationwide legal right to protection and counselling for women affected by violence and their children (from 2032) and obliges the (federal) Länder to ensure a comprehensive, needs-based, low-threshold, accessible, and non-discriminatory network of protection facilities and counselling centres by 2032 (see also *question 1*). Under the Act, specialist counselling and support centres, as well as women's shelters are entitled to public funding in order to fulfil this legal mandate. However, trans*, inter* and non-binary persons are not explicitly included, which, from the perspective of the Istanbul Convention Alliance, contradicts the obligation to implement the Istanbul Convention without discrimination. These groups have little access to suitable protection facilities, as specific services only exist in Berlin and Munich, while they are completely lacking in the rest of the country. This creates serious gaps in protection for queer survivors of gender-specific violence³²².

Protection for women experiencing homelessness remains insufficient, with significant gaps across the country³²³. Although municipalities are obliged to provide rough sleepers with accommodation in emergency shelters, these facilities are predominantly mixed-gender and do not offer specific violence protection concepts or trauma-sensitive care³²⁴. As GREVIO emphasises, such shelters pose increased risks for women affected by violence – especially those with children – and cannot replace specialist protection facilities. Priority must therefore be given to expanding and strengthening specialist shelters and women-specific support services. Municipal approaches such as the City of Munich's framework concept for protection against violence³²⁵ are to be commended.

Specialist counselling and support centres offer counselling for women affected by violence (and in some cases for trans*, inter* and non-binary persons affected by violence), as well as for relatives and professionals – supplemented by prevention, training, public relations and networking (see bff 2019³²⁶ and bff 2024³²⁷). Some specialist counselling and support centres offer counselling and support for traumatised women³²⁸, but generally do not provide psychotherapeutic treatment. Since 2021, *SGB XIV* provides a legal right to immediate psychological assistance in trauma outpatient clinics, most of which are affiliated with psychiatric hospitals³²⁹. However the required professional qualifications are not comprehensively ensured, and support is limited to 15 appointments. While referral to registered psychotherapists is foreseen, there remains a shortage of specialised outpatient and inpatient services. Waiting times often extend over several months – and in cases of complex trauma, even years. Consequently, finding a suitable therapy place is frequently unsuccessful.

Specialist counselling and support centres provide information on legal options and assist with applications, but are not authorised to offer individual legal advice. This is reserved for lawyers; many counselling centres cooperate accordingly. Comprehensive, low-threshold and free access to

321 BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf> (accessed on 30.06.2025); DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd, S. 225f.

322 Tierney, William & Ward, James Dean 2017: Coming-out and leaving Home: A Policy and Research Agenda for LGBT Homeless Students. in: Educational Researcher, Jg. 46, Heft 9, S. 498–507.

323 DIMR 2025: Notunterkünfte für wohnungslose Menschen, in: ebd. 08.2025, [online] <https://www.institut-fuer-menschenrechte.de/im-fokus/notunterkuenfte-fuer-wohnungslose-menschen> (accessed on 28.08.2025).

324 ibim.

325 Sozialreferat München o.J.: Gewaltschutzkonzept für die Unterkünfte des Wohnungslosen- und Flüchtlingsbereiches der Landeshauptstadt München, in: RatsInformationssystem München o. A., [online] <https://risi.muenchen.de/risi/dokument/v/6482933> (accessed on 31.07.2025).

326 Bundesverband Frauenberatungsstellen und Frauennotrufe 2019: Die Fachberatungsstellen. Aktiv gegen Gewalt gegen Frauen und Mädchen. Stark für die Gesellschaft – gegen Gewalt, 2. Auflage, Berlin: ebd..

327 bff Bundesverband Frauenberatungsstellen und Frauennotrufe 2024: Qualitätsstandards für Fachberatungsstellen im bff, 3. überarbeitete Auflage, Berlin: ebd..

328 Brensell, Ariane & Hartmann, Anna 2017: Kontextualisiertes Traumverständnis in der Arbeit gegen Gewalt an Frauen, in: Familiendynamik, Jg. 42, Heft 1, S. 28–39.

329 Projekt Hilft o.J.: Schnelle Hilfe in Traumaambulanzen. Kategorie: Erwachsene, in: ebd. o. A., [online] <https://projekt-hilft.de/liste/kategorie/erwachsene> (accessed on 23.06.2025).

initial legal advice for all victims of violence is not yet guaranteed. State legal aid or financial support from non-governmental organisations is only available in isolated cases.

For medical care, please refer to the explanations in *Articles 20 and 25*. Specialist counselling and support centres are often a central point of contact for women who have been raped and co-operate closely with hospitals that are required to provide medical care and confidential evidence collection.

The *Violence Against Women Helpline (Hilfetelefon "Gewalt gegen Frauen")* is available around the clock for initial telephone counselling and referral to regional specialist counselling and support centres. Language mediation in 18 languages can be provided at short notice. The 2020 evaluation of the helpline³³⁰ found that the helpline is an important component of the system, but that it fulfils its legally prescribed function of referring to local services only to a limited extent due to insufficient resources.

Regarding question 26

Which type of specialist support service includes child psychologists or other professionals specialised in supporting children who have been exposed to domestic violence, including violence perpetrated by one parent against the other?

To date, it has been the exception rather than the rule for specialist counselling and support centres dealing with gender-specific violence to offer separate services for children of affected women or to employ specially qualified staff to work with those children. Some centres do offer services for children who have been exposed to domestic violence³³¹, but these are mostly project-based and, due to a lack of reliable public funding, rely on foundation grants. One exception is the state funding guideline in Mecklenburg-Western Pomerania, which since 2008 has provided for affiliated child and youth counselling in intervention centres against domestic violence and stalking – currently implemented in five facilities in the state³³².

In many women's shelters, there are more children than women, and in some cases, specialist professionals provide educational support for the children. A project by Frauenhauskoordinierung e. V. has created a portal for professionals that provides ideas, practical examples and methods to support professionals who work with children and young people who have been exposed to intimate partner violence³³³. This project was developed as part of the IKEA-sponsored project *"Temporary home – children and young people in women's shelters. Development of a modular support service"*.

The provision of **care situation** for children and young people affected by violence is inadequate. Psychological or psychotherapeutic professionals are usually provided by outpatient child and adolescent psychotherapists (medical treatment according to *SGB V*) and professionals in educational counselling centres and counselling centres for children and young people affected by violence (child and youth welfare according to *SGB VIII*). General educational counselling centres lack specific expertise on domestic and gender-specific violence. Specialist counselling centres for children and young people affected by violence are understaffed and underfunded, and suitable outpatient and inpatient therapy services are neither widely available nor accessible in a timely manner – waiting times are often long. The *Violence Assistance Act* aims to improve the support of women affected by violence and their children, but does not contain any provisions for children

330 BMBFSFJ 2020: Evaluation des Hilfetelefons Gewalt gegen Frauen, Berlin: ebd.

331 Administrative regulation of the Ministry of Justice, Equality, and Consumer Protection vom 4. Oktober 2022 – III FG – VV Meckl.-Vorp. Gl.-Nr. 630–424, in: Regierung MV 17.10.2022, [online] https://www.regierung-mv.de/static/Regierungsportal/Justizministerium/Inhalte/Rechtliches/AmtsBl.M-V/AmtsBl_42_22.pdf (accessed on 23.06.2025).

332 Sea Intervention Center Rostock, [online] <https://stark-machen.de/angebote>; Verwaltungsvorschrift des Ministeriums für Justiz, Gleichstellung und Verbraucherschutz vom 4. Oktober 2022 – III FG – VV Meckl.-Vorp. Gl.-Nr. 630–424, in: Regierung MV 17.10.2022, [online] https://www.regierung-mv.de/static/Regierungsportal/Justizministerium/Inhalte/Rechtliches/AmtsBl.M-V/AmtsBl_42_22.pdf (accessed on 23.06.2025).

333 See the collection of materials from *Growing Up Safely*, [online] <https://sicher-aufwachsen.org/> (accessed on 23.06.2025)

and young people (under 18) affected by violence. *Child and youth welfare services (SGB VIII)* are responsible for this area. There are also considerable gaps in the provision of specialist counselling and support centres for minors affected by sexual violence, despite the Federal Criminal Police Office's classification of this as domestic violence since 2022³³⁴. There is an urgent need to strengthen the support system for these target groups and to improve prevention, networking, training and public awareness.

The legal right to immediate psychological assistance in trauma outpatient clinics, which has been enshrined in *SGB XIV (Social Compensation)* since 2021, also applies to children and young people who are affected by sexual violence and physical violence as well as severe forms of psychological violence³³⁵. However, comprehensive, quality-assured care has not yet been achieved and the service is limited to a maximum of 18 appointments.

Regarding question 27

Are there specialised support services that address the specific needs of migrant women and girls or members of national or ethnic minorities who have been victims of violence against women, including women and girls seeking asylum and those who have been granted refugee status or international protection status?

There are very few counselling services tailored to the specific needs of refugee or migrant women and girls who are survivors of violence against women and domestic violence. In Berlin³³⁶, for example, there is a mobile counselling team for refugee women, trans*, inter* and non-binary persons who have been or are currently affected by violence, and in Cologne³³⁷ there is also a specialist counselling and support centre. Specialist counselling and support centres also support and advise refugee women survivors, but they often lack the financial resources for interpretation and translation services. Only 66.35% of the registered specialist counselling and intervention centres offer interpreting services³³⁸. Cooperation with specialist lawyers is also a necessity to provide support during asylum proceedings. In some cases, outreach counselling is offered in reception and accommodation facilities. However, successful model projects for outreach counselling were discontinued when funding was cut. This shortage affects outreach counselling in general, especially in rural areas. There is a particular need for outreach counselling in services for people with disabilities. Such services are only available in isolated cases and without secure funding.

There are some good examples from practice: *agisra* and *UTAMARA*³³⁹. These facilities offer **culturally sensitive and native-language counselling services and low-threshold formats**, such as language courses, themed women's cafés, creative activities and swimming lessons, in order to establish personal contact with the women. It is precisely these low-threshold approaches that build trust. The majority of counselling cases at UTAMARA arise from these services. They lower the inhibition for making contact, as survivors do not have to call an unknown telephone number or seek direct help from complete strangers, for example. However, a practical example from UTAMARA highlights some of the structural problems faced by migrant and refugee women: a woman arrived at UTAMARA's emergency shelter from a refugee accommodation centre, pregnant and with a small

334 BKA 2024: Federal Criminal Police Office: Federal Situation Report "Gender-Specific Crimes Against Women 2023" 2023, in: ebd. 19.11.2024, [online] <https://www.bka.de/SharedDocs/Downloads/DE/Publikationen/JahresberichteUndLagebilder/StraftatenGegenFrauen/StraftatengegenFrauenBLB2023.html> (accessed on 28.07.2025).

335 Projekt Hilft o.J.: Schnelle Hilfe in Traumaambulanzen. Kategorie: Kinder und Jugendliche, in: ebd. o.A., [online] <https://projekt-hilft.de/liste/kategorie/kinder-und-jugendliche> (accessed on 23.06.2025).

336 See Mobile Beratung Lara e.V., [online] <https://lara-berlin.de/mobile-beratung-fuer-gefluechtete-frauen> (accessed on 28.08.2025).

337 See Website from Agisra, [online] <https://agisra.org/> (accessed on 28.08.2025).

338 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 218–219.

339 DaMigra e.V. 2025: Interview of DaMigra e.V. with UTAMARA e.V., 30.07.2025.

child. As an asylum seeker, her residence permit had expired, she had applied for an extension, but it had not yet been processed and she had no health insurance cover. The necessary gynaecological examinations and consultations regarding a possible termination of pregnancy could only be arranged with great effort and the involvement of various authorities (child and youth welfare office, social welfare office, etc.). For UTAMARA as a non-governmental counselling centre this case was particularly difficult and time-consuming due to the lack of clarity regarding responsibility (even within the various authorities). Without UTAMARA, the client – and many other refugee women – would probably not have been able to navigate the German bureaucracy.

Recommendations

We recommend

- » ensuring that women and girls in reception centres have access to appropriate support services.
- » ensuring that all support services are accessible and free of discrimination, including for migrant and refugee survivors and ethnic minority survivors such as Sintizze and Romnja. Targeted training, multilingual services and the expansion of mobile counselling services are required.
- » ensuring that the federal state to ensure that specific shelters and specialist counselling centres for trans*, inter*, non-binary and queer people are created nationwide. Access must not depend on an acute risk situation; threats such as forced marriage to “correct” a person’s sexual orientation or gender identity must also be recognised as criteria for admission.
- » to continuously improve the quality of services and ensure minimum standards nationwide. The quality standards of professional associations, in particular the *Federal Association of Women’s Counselling and Rape Crisis Centres (bff)* and the *Women’s Shelter Coordination*, should serve as a guide. The shortage of skilled workers must be actively counteracted.
- » promoting interdisciplinary cooperation: Increased cooperation between specialist support services, the police, the judiciary and other relevant actors must be institutionalised in order to maximise the effectiveness of the support services.
- » advancing the digitalisation of counselling services. In addition, targeted training on digital violence is needed.
- » expanding services for children and young people who experience sexualised and domestic violence or witness violence between their parents. This requires the unbureaucratic integration of funding sources and recognition procedures in accordance with the Violence Assistance Act and Child and Youth Welfare (SGB VIII), especially for specialist counselling and support centres that target both adults and minors.

Article 25 – Support to victims of sexual violence

Background

Article 25 requires the establishment of a sufficient number of easily accessible rape crisis centres for rape victims or sexual violence referral centres for survivors of sexual violence so that they can be offered medical and forensic examinations, trauma support and counselling.

In Germany, there are medical and *forensic* emergency services as well as support centres, such as specialist counselling and support centres for survivors of sexual violence and trauma clinics (*in accordance with Social Compensation Act, SGB XIV*). These services are neither sufficient in number nor comprehensive in coverage, nor are they easily accessible to all affected groups. Medical and forensic emergency assistance services vary from one federal state to another, and there is no standardised nationwide procedure. They are often not available in one place or from a single source. Some medical care services are not securely funded, meaning that either the costs are borne by those affected or the services are not provided. Decisions on the scope and type of services are made in the individual (federal) Länder or regions by providers and other organisations involved, such as ministries/senate administrations and health insurance companies. No needs assessment is available. Survivors report long waiting times and, in some cases, rejections, as well as a lack of knowledge among medical staff and a lack of premises that protect privacy in hospitals.

Comprehensive sexual violence referral centres offering services for psychosocial counselling, trauma support and forensic and medical care do not exist in Germany. The following statements refer almost exclusively to medical and forensic emergency assistance centres for victims of sexual violence (*for detailed information on psychosocial and trauma assistance centres for rape victims in the form of specialist counselling and support centres and trauma outpatient clinics, see Article 22*).

People affected by organised sexual violence are among the most vulnerable survivors of gender-specific violence. Their specific needs are often not met by the support system. For example, the intensive support they require, which often lasts for years, frequently exceeds the capacities of specialist counselling and support centres and existing support systems (e.g. youth welfare services, assisted living, police, justice system) reach their limits, especially when survivors are still in the process of leaving and may remain in contact with perpetrators. Women's shelters often do not accept such survivors because the security risk is considered too high. There is a lack of specialist shelters for people who have fled organised structures of violence.

Regarding question 28 (a/b/c) Please indicate if any of the below services are available in your territory:

1. *sexual violence referral centres (e. g. specialist support services offering immediate medical care, forensic examination and crisis intervention to victims of sexual violence);*

Yes, sexual violence referral centres exist in all federal Länder, providing immediate medical assistance and/or forensic examinations. Crisis intervention is provided in a non-standardised manner (by in-house psychiatrists/psychosomatic specialists; by staff from external counselling centres or “only” by referral to possible external contact points). All federal state now have sexual violence referral centres for victims of sexual violence that are integrated into regular care. Such services are usually located in accident and emergency departments in hospitals, where, in addition to immediate medical assistance, forensic measures can also be carried out and are available 24/7. In some federal states, such services are also available in outpatient medical practices, e. g. in Bavaria

and North Rhine-Westphalia. In addition, many institutes for forensic medicine and the violence protection outpatient clinics that exist in some federal states provide forensic examinations for victims of sexual violence, but refer them to regular healthcare providers for immediate medical assistance and to external contact points for crisis intervention. As described above, not all of these services are available nationwide and there are not enough of them.

- 2.** *Rape crisis centres (e.g. specialist support services offering long-term counselling, therapy and support to victims of sexual violence regardless of whether the sexual violence occurred recently or in the past);*

Yes, there are trauma outpatient clinics under social compensation law (see Art. 22).

Yes, there are specialist counselling and support centres for victims of sexual violence (counselling, support; some specialist counselling and support centres can offer a limited range of therapeutic interventions – this aspect is underfunded and the number of sessions is usually very limited). The number and range of services offered by specialist counselling and support centres do not meet demand (see also Articles 8 and 22).

- 3.** *Any other specialised services offering short-term and/or long-term medical, forensic and psycho-social support to victims of sexual violence.*

No.

Regarding question 29

Please provide information on the number of such services and the number of women and girls supported annually.

There is no nationwide data on **sexual violence referral centres** and on how many medical and forensic emergency services currently exist³⁴⁰. A list of contact points for *confidential, i.e. non-police-reporting, evidence collection* in the (federal) Länder is provided by the bff, among others³⁴¹. A 2022 study on forensic medical services for victims of violence concludes that forensic care after sexual violence varies nationwide in terms of funding, structures, quality and range of services, and that in particular services which are offered irrespectable of whether crime has been reported are not available nationwide³⁴². Of the 16 projects from 14 (federal) Länder examined in this study, 14 offer services for adult victims of sexual violence. Three other projects under non-forensic management (women's emergency hotlines, working group on sexual offences) were not included in the study. The majority of the projects are funded by public funds, although the amount of funding varies greatly. Eleven projects are temporary or pilot projects. In 13 projects, examinations are carried out not only at the project's own location, but also in partner hospitals in order to ensure better accessibility for victims.

In the larger federal states, **cooperation structures and care networks** have been established which, as far as evidence collection and documentation are concerned, are organised and coordinated by forensic medicine institutes. In North Rhine-Westphalia, doctors can be trained to use the *iGOBSIS* app (*intelligent violence victim evidence collection and information system*) and use it to support documentation and evidence collection after sexual violence³⁴³. The iGOBSIS website lists

³⁴⁰ Fischer, Lisa 2020: Acute care after sexual violence. Implementing Article 25 of the Istanbul Convention in Germany in: DIMR 11.2020, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Akutversorgung_nach_sexualisierter_Gewalt.pdf (accessed on 15.05.2025).

³⁴¹ Frauen gegen Gewalt o.J.: Confidential evidence collection without reporting. in: ebd. o. A., [online] <https://www.frauen-gegen-gewalt.de/de/vertrauliche-spurensicherung.html> (accessed on 14.05.2025).

³⁴² Walz, Cleo et al. 2022: Rechtsmedizinische Modelle der Versorgung von gewaltbetroffenen Personen in Deutschland, in: Rechtsmedizin, Jg. 32, S. 249–255.

³⁴³ iGOBSIS o.J.: Hintergrund und Ziele, in: ebd. o. A., [online] <https://gobsis.de/projekt/> (accessed on 05.05.2025).

over 100 participating hospitals and practices³⁴⁴. Thirty-eight hospitals from four (federal) Länder (Hesse, Rhineland-Palatinate, Baden-Württemberg and Saxony) are also part of the “*Medical Emergency Assistance after Rape*” care network, which was launched in 2013 by the Frankfurt Women’s Emergency Hotline³⁴⁵. The focus here is on providing medical care to female survivors, and forensic services are also available without the need to report the incident to the police. In Lower Saxony, around 35 hospitals have joined forces in the *ProBeweis* network to offer confidential evidence collection services³⁴⁶. In Brandenburg, twelve hospitals are involved in providing emergency medical assistance and confidential evidence collection³⁴⁷.

There are no figures available on how many women and girls are supported by the existing contact points each year³⁴⁸. Data on case numbers can be found for individual regions for limited periods of time. At the Institute of Legal Medicine in Düsseldorf, around 350 evidence collections with and without police reports were carried out each year between 2018 and 2022³⁴⁹. For Berlin, figures are available for evidence collection from survivors of sexual violence for the year 2018 – including 61 cases of confidential evidence collection after rape³⁵⁰. However, confidential documentation and evidence collection only covers the forensic part of emergency assistance for survivors.

The other part of emergency assistance includes immediate medical assistance – this includes “somatic, psychological and psychosocial aspects in the sense of basic psychosomatic care”³⁵¹. Regular data on immediate medical assistance in cases of sexual violence is not available. There are many reasons for this, e.g. there is no billing code in health insurance for adult survivors of sexual violence.

There is neither a nationwide nor a state-specific monitoring system that could collect data on the use of medical and forensic care by victims of sexual violence. The DIMR’s monitoring report on the implementation of the IC does not include measures in the health sector³⁵².

Regarding rape crisis centres: Immediate, short-term and long-term trauma support, including psychological counselling, is predominantly provided by specialist counselling and support centres (see also Article 22). According to the DIMR monitoring report, there are 335 specialist counselling and support centres nationwide that provide counselling on sexual violence³⁵³, while according to the *bff* aid database, there are 412 specialist counselling and support centres nationwide³⁵⁴. However, particularly in rural areas many of these are very small counselling centres, which are responsible for the entire continuum of gender-specific violence and, although they are available to survivors of sexual violence, they are unable to provide the specialist services of a rape crisis centre due to a lack

344 iGOBSIS o.J.: Teilnehmende Kliniken und Praxen, in: ebd. o. A., [online] <https://gobsis.de/projekt/teilnehmende/> (accessed on 28.08.2025).

345 Frankfurt Women’s Emergency Hotline Counseling Center, no date: 10 years of emergency medical care after rape, in: ebd. o. A., [online] <https://www.frauennotruf-frankfurt.de/projekte-aktionen/medizinische-soforthilfe-nach-vergewaltigung/10-jahre-medizinische-soforthilfe-nach-vergewaltigung> (accessed on 14.05.2025).

346 Medizinische Hochschule Hannover o.J.: Netzwerk ProBeweis: Die Partnerkliniken vom Netzwerk ProBeweis, in: ProBeweis.mhh o. A., [online] <https://probeweis.mhh.de/partnerkliniken> (accessed on 14.05.2025).

347 Ministerium für Gesundheit und Soziales Brandenburg o.J.: Medizinische Soforthilfe und vertrauliche Spurensicherung, in: ebd. o. A., [online] <https://mgs.brandenburg.de/mgs/de/themen/frauen-und-gleichstellung/frauen-vor-gewalt-schuetzen/hilfe-nach-vergewaltigung/#>

348 Fischer, Lisa 2020: Akutversorgung nach sexualisierter Gewalt. Zur Umsetzung von Artikel 25 der Istanbul-Konvention in Deutschland, in: DIMR 11.2020, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Akutversorgung_nach_sexualisierter_Gewalt.pdf (accessed on 15.05.2025).

349 Schaffer, Christine et al. 2024: Vertrauliche Spurensicherung braucht kurze Wege. Nutzung von Angeboten im Raum Düsseldorf vor Umsetzung der Neuregelungen der §§ 27 (1) und 132k des Sozialgesetzbuches (SGB) V, in: Rechtsmedizin, Jg. 34, S. 37–44.

350 Kaps, Petra et al. 2024: Versorgungssituation für von häuslicher und sexualisierter Gewalt betroffene Frauen* und Mädchen* in Berlin, in: ZEP Partner 30.05.2024, [online] https://zep-partner.de/wp-content/uploads/2024/09/2024_ZEP_Versorgungsstudie_Gewaltschutz_Berlin_20240530_final.pdf, S. 52 (accessed on 14.05.2025).

351 Fryszer, Lina et al. 2025: Standard der medizinischen Versorgung nach sexualisierter Gewalt, in: RTB o. A., [online] <https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2025-03/R28BEQ-X.PDF>, S. 5 (accessed on 14.05.2025).

352 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin.

353 ibid., S. 225

354 ibid., S. 226

of resources. For long-term trauma therapy, survivors need to be referred to registered therapists or clinics. Care, especially for survivors with complex trauma, is extremely poor; there are not enough services available, and waiting times for specialist trauma therapy often exceed one year.

There is no detailed data available on how many people are supported by sexual violence counselling centres. Detailed information on specialist counselling and support centres and trauma out-patient clinics can be found in Art. 22.

Regarding question 30

Please indicate the procedures and time frames for collecting and storing forensic evidence in cases of sexual violence (e.g. existence of protocols, use of rape kits) in the relevant services.

The procedures and deadlines for collecting and storing forensic evidence in cases of sexual violence vary across the country. With regard to confidential evidence collection, i.e. independent of any report to the police, those involved in the Frankfurt care network, for example, use a much more detailed documentation proforma and a more comprehensive evidence collection kit than those in Berlin or Brandenburg. The kits differ in terms of their contents, e.g. with regard to whether they contain storage media for photos, which sample tubes and which and how many other materials (cloths, paper bags, swabs, scissors for cutting fingernails, etc.) they contain. In North Rhine-Westphalia, documentation and evidence collection is carried out with the help of the positively evaluated digital app *iGOBSIS*. There is consensus on the use of tried-and-tested forms (documentation proformas) and evidence collection kits³⁵⁵. In some (federal) Länder, doctors working in the participating accident and emergency departments can consult forensic doctors, while in others this is not possible.

The time limits for collecting DNA evidence after the offence are also inconsistent across the country: while some locations collect evidence up to 5 days after the offence, others set a limit of 72 hours after the offence³⁵⁶. According to international studies, depending on the nature of the offence, a time limit of 48 hours (oral/digital), 72 hours (anal) and up to 7 days (vaginal) is recommended³⁵⁷.

The duration of storage of the collected evidence also varies from region to region, ranging from one year in the Frankfurt healthcare network to 10 years in Brandenburg and up to 20 years from the age of majority of the survivors in Schleswig-Holstein³⁵⁸. In most cases, the storage period is significantly shorter than the statutory limitation periods for rape (20 years or, in the case of minors, 20 years from the victim's 30th birthday). This means that, depending on where they live, survivors have different amounts of time to submit collected evidence to a preliminary investigation. There are no valid figures available on how much time survivors need after the offence to decide whether or not to report it to the police. In addition to the time required, other aspects such as access to information and further support and counselling are also relevant to the decision for or against reporting the offence to the police.

355 Fischer, Lisa 2020: Acute care after sexual violence. Implementing Article 25 of the Istanbul Convention in Germany in: DIMR 11.2020, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Akutversorgung_nach_sexualisierter_Gewalt.pdf (accessed on 15.05.2025).

356 Fryszer, Lina et al. 2025: Standard der medizinischen Versorgung nach sexualisierter Gewalt, in: RTB o. A., [online] <https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2025-03/R28BEQ-X.PDF>, S. 5 (accessed on 14.05.2025).

357 *ibid.*

358 Walz, Cleo et al. 2022: Rechtsmedizinische Modelle der Versorgung von gewaltbetroffenen Personen in Deutschland, in: Rechtsmedizin, Jg. 32, S. 249–255.

Regarding question 31

Please describe any applicable access criteria for use of these services (e. g. affiliation with a national health insurance, residence status, prior reporting of the case to the police, other).

Confidential evidence collection paid for by health insurance funds in accordance with *Section 27 in conjunction with Section 132k of the German Social Code, Book V (SGB V)* regulates funding of forensic services for persons with statutory health insurance³⁵⁹. In order to implement the regulation, the (federal) Länder are required to conclude contracts with service providers and health insurance funds. This has currently been done in eight (federal) Länder (as of 8/2025). In some other (federal) Länder, financing is currently provided from state funds (e. g. Brandenburg, Saarland and Hamburg). An overview of the access criteria for the individual services is not available.

With regard to health insurance-funded confidential evidence collection and documentation in accordance with *Section 27 of the German Social Code, Book V (SGB V)*, there are regulatory gaps, particularly for uninsured persons, privately insured persons and persons entitled to assistance³⁶⁰. These gaps do not usually exist in projects that are funded by state funds. In Hesse, in parallel to confidential evidence collection financed by health insurance funds, access is available for the aforementioned groups of people, with services in these cases being financed by state funds³⁶¹.

Due to a lack of information amongst professionals, access for people with disabilities and minors does not currently comply with legal requirements, particularly with regard to the involvement of a legal guardian. In particular with regard to survivors with cognitive impairments specific information is needed on the existing legal requirements in guardianship law and on the implementation of the right to self-determination in the interests of people affected by violence³⁶². Persons with insecure residence status who receive benefits under the *Asylum Seekers Benefits Act (AsylbLG)* are generally excluded from statutory health insurance for 36 months (in exceptional cases 18 months) and have limited access to health services, although the type of services to which they are entitled is not clearly defined by law³⁶³.

In regions where confidential evidence collection services are not available, access to forensic services is only possible by travelling long distances or if a police report is filed.

Not all medical services following sexual violence are safe or adequately funded. For example, not all costs for laboratory tests to rule out sexually transmitted infections are covered by health insurance as standard, as these are not necessary for planning medical treatment. Therefore, survivors sometimes have to pay for the service themselves or it cannot be provided.

359 In Section 27(1) of Book V of the Social Code (SGB V), the legislator has stipulated that health insurance funds must finance the confidential collection of evidence and documentation "of damage to health that may be the result of maltreatment, sexual abuse, sexual assault, sexual coercion, or rape." The law came into force on March 1, 2020, with further details on the contract terms regulated by Section 132k SGB V. This introduces a legal right to documentation and evidence collection that can be used in court for persons with statutory health insurance. The costs incurred are to be covered by the health insurance funds. The costs for training the professionals involved and for the evidence collection kits are not covered by this provision.

360 GFMK 2023: Beschlüsse und Entschlüsse 33. Konferenz der Gleichstellungs- und Frauenministerinnen und -minister, -senatorinnen und -senatoren der Länder- Schließung von Regelungslücken der GKV-Neuregelung gem. § 27 Abs. 1 SGB V i. V. m. § 132k SGB V, in: GFMK o. A., [online] https://www.gleichstellungsministerkonferenz.de/documents/231116--33-gfmk--stellungnahme-des-bundes_1700132382.pdf, TOP 8.3 (accessed on 14.05.2025).

361 Hessisches Ministerium für Arbeit, Integration, Jugend und Soziales 2025: Vertrauliche Spurensicherung wird in Hessen zur Kassenleistung. in: ebd. 01.07.2025, [online] <https://hessen.de/presse/vertrauliche-spurensicherung-wird-in-hessen-zur-kassenleistung> (accessed on 18.08.2025).

362 Blättner, Beate & Grewe, Henny Annette 2019: Procedure for providing medical care to minors after sexual violence without involving their parents, in: Independent Commissioner for Issues of Child Sexual Abuse in: Unabhängiger Beauftragter für Fragen des sexuellen Kindesmissbrauchs 15.06.2019, [online] https://beauftragte-missbrauch.de/fileadmin/user_upload/Materialien/Publikationen/Expertisen_und_Studien/Verfahrensweise_bei_der_aerztlichen_Versorgung_Minderjaehriger_nach_sexueller_Gewalt_ohne_Einbezug_der_Eltern.pdf (accessed on 14.05.2025).

363 Nationwide Working Group of Psychosocial Centers for Refugees and Victims of Torture, n.d.: What rights do refugees have to health care? in: ebd. o. A., [online] <https://www.baff-zentren.org/faq/welche-rechte-auf-gesundheitsversorgung-haben-gefluechtete/> (accessed on 21.08.2025).

Emergency contraception after rape has been available free of charge to those with statutory health insurance since February 2025; a prescription is required³⁶⁴. It cannot be ruled out that pharmacists may ask the survivor for further details, such as the time of the sexual act, as part of the prescribed information process. Those survivors who are not insured can contact the *public health service (ÖGD)* to obtain emergency contraception free of charge.

A standard of medical care after sexual violence was developed in 2025 as part of the *Berlin Round Table – Healthcare after Domestic and Sexual Violence*³⁶⁵. An Association of Scientific Medical Societies (AWMF) guideline of the lowest standard S1 “*Recommendations for the care and treatment of female survivors of suspected rape*” is currently being drawn up on behalf of the *German Society for Gynecology and Obstetrics*³⁶⁶.

There is still the problem of possible recourse claims by health insurance companies against the perpetrator(s) and, in relation to this, the sending of accident reporting forms to survivors, which can cause renewed psychological stress and – especially in cases of intimate partner violence – puts survivors at risk. The DIMR study presents various options for action to solve this problem, none of which have been tested or implemented to date, although this is urgently needed³⁶⁷.

The German Federal Government has not complied with GREVIO’s recommendation to take legislative and other measures to implement *Article 25* of the Convention. There are neither sufficient numbers nor adequate geographical distribution of emergency centres for survivors of sexual violence that offer the necessary medical and forensic services. Furthermore there is a lack of support centres for rape victims, in particular trauma clinics that provide long-term psychological treatment.

There are no uniform national standards and protocols for the relevant professional groups with regard to emergency medical care and forensic measures.

The law on confidential evidence collection financed by health insurance funds excludes persons without statutory health insurance. No measures have yet been taken at the federal level to ensure access for this group of people.

No measures have been taken to inform relevant professional groups about the applicable legal requirements, which stipulate that competent minors must be granted access to emergency assistance following sexual violence without the consent of their legal guardians.

Recommendations

We recommend the following to the Federal Government

- » ensures comprehensive, adequate and unbureaucratic funding of all medical services following sexual violence so that the survivor does not have to bear any costs themselves, regardless of their insurance status.
- » enables the unbureaucratic provision of emergency contraception for all survivors in order to avoid further travel, additional contact points and unpleasant and potentially retraumatising questions.

364 Gesetz zur Stärkung der Gesundheitsversorgung in der Kommune (GVSG), BGBl. I Nr. 64 vom 28.02.2025.

365 Fryszer, Lina et al. 2025: Standard der medizinischen Versorgung nach sexualisierter Gewalt, in: RTB o. A., [online] <https://rtb-gesundheit.de/sites/rtb-gesundheit/files/2025-03/R28BEQ-X.PDF> (accessed on 14.05.2025).

366 AWMF 2024: S1-Leitlinie Empfehlungen zur Betreuung und Versorgung von weiblichen mutmaßlich Stuprum-Betroffenen. Registernummer 015 – 097, in: ebd. 28.07.2024, [online] <https://register.awmf.org/de/leitlinien/detail/015-097> (accessed on 14.05.2025).

367 Fischer, Lisa 2020: Acute care after sexual violence. Implementing Article 25 of the Istanbul Convention in Germany Akutversorgung nach sexualisierter Gewalt. Zur Umsetzung von Artikel 25 der Istanbul-Konvention in Deutschland, in: DIMR 11.2020, [online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Akutversorgung_nach_sexualisierter_Gewalt.pdf (accessed on 15.05.2025), S. 61 ff.

- » guarantees access to all required care services – medical, forensic, psychosocial and psychological – for all survivors, taking into account intersectional discrimination.
- » organises networking and exchange of experiences between the relevant actors at federal and state level with regard to the establishment and expansion of sustainable decentralised support service structures for survivors of sexual violence.
- » ensures victim protection in the context of acute care after sexual violence by creating legal certainty with regard to the billing options for medical services by health insurance companies, by excluding recourse claims in these cases.

We recommend the following to the Länder

- » further expand and financially support decentralised care networks that provide medical and forensic care and cooperate with the psychosocial support system.

We recommend that municipalities

- » provide adequate psychosocial services close to home and in sufficient numbers and quality.

SUBSTANTIVE LAW

Article 31 – Custody, visitation rights and safety

Background

Custody and visitation rights are governed by family law in Germany. Both legal institutions are treated separately in procedural law; they can be combined, but do not necessarily have to. This means that decisions on visitation rights do not automatically affect custody rights and vice versa. If, for example, domestic violence is established in proceedings concerning the right to determine the child's place of residence (as part of custody), this does not necessarily result in a restriction of visitation rights – and/or the findings from the proceedings are not used in the access proceedings.

Although the child and youth welfare office is informed in cases of violence protection proceedings, this does not usually lead to protective measures for the child or the mother affected by violence.

Regarding question 32 (a/b/c/d/e)

Please indicate whether under national law incidents of violence covered under the scope of the convention must be taken into account in the determination of custody and visitation rights of children. If this is the case, please clarify to what extent these provisions:

- a.** *explicitly list domestic violence as a criterion to be taken into account when deciding on custody and/or visitation rights in the applicable legislation. If so, please clarify whether this criterion is/has been applied in practice in the determination of both custody and visitation rights;*
- b.** *acknowledge the harm that witnessing violence by one parent against the other has on a child;*

The custody and access provisions of the *German Civil Code (BGB)* do not mention violence – including acts of violence within the meaning of the IC – as a criterion for decision-making. None of the provisions of family law currently take such acts of violence into account, even if the child has witnessed domestic violence. A reform planned during the last legislative period failed due to the premature end of the governing coalition. The draft bill provided for a general clause on the child's well-being, which was intended to orient all decisions under child custody law towards the protection of the child – in particular, physical, mental and emotional integrity, protection from assault and violence, and protection from witnessing violence against caregivers³⁶⁸. In addition, visitation rights were to include an explicit provision restricting or excluding access in cases of domestic violence by one parent against the other³⁶⁹.

³⁶⁸ BMJV 2024: Entwurf eines Gesetzes zur Reform des Kindschaftsrechts – Modernisierung von Sorgerecht, Umgangsrecht und Adoptionsrecht, in: ebd. 09.12.2024, [online] [https://www.bmjbv.de/SharedDocs/Downloads/DE/Gesetzgebung/DiskE/DiskE_Kindschaftsrecht.pdf?__blob=publicationFile&v=3, \\$1626](https://www.bmjbv.de/SharedDocs/Downloads/DE/Gesetzgebung/DiskE/DiskE_Kindschaftsrecht.pdf?__blob=publicationFile&v=3, $1626) (accessed on 15.08.2025).

³⁶⁹ *ibid.*

The current coalition agreement announces that domestic violence will be taken into account in family law reforms at the expense of the perpetrator in terms of custody and visitation rights³⁷⁰. The “PETRA” study (entitled “Child welfare and visitation rights”) commissioned by the penultimate Federal Government concludes that “shared custody” proves problematic and has a demonstrable negative impact on children³⁷¹.

Section 2 (6) of the Protection Against Violence Act (GewSchG) stipulates that a threatened person may demand the surrender of a shared home if this is necessary to avoid undue hardship. According to the wording of the law, undue hardship also exists if the welfare of children living in the household is impaired. However, since the child’s well-being is not defined by law and the (co-)affectedness in cases of domestic violence is not mentioned, there is no explicit link here. Conversely, Section 1 (1) sentence 3 GewSchG works in favour of a perpetrator, as it excludes distance regulations, restraining orders (no contact) under Section 1 (2) sentence 3 GewSchG in cases of “legitimate interests”. A father’s desire for contact with his children constitutes a case of legitimate interest in local court decisions, so that the right of access contributes to restraining orders (no contact) not being imposed.

Although GREVIO attests that the German constitution and the Istanbul Convention provide sufficient guidance for decisions on domestic violence within the meaning of Article 31 of the IC, German courts find it difficult to apply the law, at least in the first instance. There are now higher court decisions that refer specifically to the IC, but these have not yet been implemented across the board by the lower courts³⁷². There is still no systematic recording of relevant family court decisions that would allow structural changes to be identified. There is no free and uncomplicated access to case law, as decisions are not systematically published and in some cases can only be accessed via paid access.

c. ensure that custody with the non-violent parent is preferred over foster-care;

There is no standard regulating the preference for the non-violent parent over placement in a foster family.

d. foresee the screening of civil proceedings related to the determination of custody or visitation rights for a history of domestic violence among the parties;

There is no standard that requires parties involved in child custody cases to be asked about previous incidents of domestic violence. To our knowledge, such a practice has not yet been established in court. In some cases, when there are indications of partner violence, it is pointed out “that the past should be left alone and that, in the interests of the child’s right to both parents, the focus should now be on the future”³⁷³. The draft amendment to family procedural law, which also fell victim to the break-up of the coalition, had provided for a special duty of investigation³⁷⁴.

370 CDU/CSU & SPD 2025: Koalitionsvertrag zwischen CDU, CSU und SPD, 21. Wahlperiode, in: Koalitionsvertrag 2025 o. A., [online] https://www.koalitionsvertrag2025.de/sites/www.koalitionsvertrag2025.de/files/koav_2025.pdf, S. 66 (accessed on 06.08.2025).

371 Rücker, Stefan et al. 2023: Befunde der Studie ‘Kindeswohl und Umgangsrecht’ – Wohlergehen von Kindern in Trennungsfamilien, in: Projekt PETRA 28.07.2023, [online] <https://projekt-petra.de/files/contaoLive/Materialien/Studien/230811%20final%20Gesamt%20Brosch%C3%BCre%20Kindeswohl%20und%20Umgangsrecht.pdf>, S. 116f (accessed on 06.08.2025).

372 Saarländisches OLG Saarbrücken, Beschl. v. 4.12.2024 – 6 UF 64/24, zum Umgangs Ausschluss bei häuslicher Gewalt; OLG Nürnberg, Beschl. v. 16.5.2024 – 11 UF 329/24, 1858; OLG Saarbrücken, Beschl. v. 17.04.2024 – 6 UF 22/24, zur Bedeutung häuslicher Gewalt im Sorgereverfahren.

373 „Es gibt vielfältige Hinweise darauf, dass im Rahmen familienrechtlicher Interventionen statt einer Sachverhaltsaufklärung mit Mitteln wie Druck, Drohungen, Entwürdigung und Missachtung „Elternvereinbarungen“ erzwungen werden.“ in Hammer, Wolfgang 2022: Familienrecht in Deutschland – Eine Bestandsaufnahme, in: Frauenhauskoordinierung 12.04.2022, [online] https://www.frauenhauskoordinierung.de/fileadmin/redakteure/Publikationen/Stellungnahmen/2022-04-12_Hammer_studieUmgang.pdf, S. 39 (accessed on 06.08.2022).

374 BMJV 2024: Referentenentwurf des Bundesministeriums der Justiz, Entwurf eines Gesetzes zur Verbesserung des Schutzes von gewaltbetroffenen Personen im familiengerichtlichen Verfahren, zur Stärkung des Verfahrensbeistands und zur Anpassung sonstiger Verfahrensvorschriften, in: ebd. 19.07.2024, [online] <https://www.bmjbv>.

- e. *foresee that judges conduct risk assessments or request the disclosure of risk assessments drawn up by law-enforcement agencies or other competent stakeholders for victims of domestic violence, with a view to taking them into account and determining the best interest of the child in the context of custody and visitation decisions.*

There are currently no explicit regulations for judicial risk assessments. Although the federal states indicate in the *Monitor Violence Against Women* of the National Rapporteur Mechanism on gender-based violence that risk management is in place, key actors such as the courts state that they are not involved³⁷⁵. Practitioners working in the field of protection against violence against women report that they are not aware of any comprehensive risk assessment. The law passed by the Bundestag in early 2025 to strengthen structures against sexual violence against children and young people contains nothing on this subject³⁷⁶. The same applies to the *Violence Assistance Act*³⁷⁷.

As a result, family courts make decisions to the detriment of the parent affected by violence on the grounds of doubting their parenting ability or attachment tolerance, without thoroughly investigating the allegations of partner violence.

Regarding question 33 (a/b/c)

Please describe the measures in place to ensure that judges, court-appointed experts and other legal professionals:

- a. *have sufficient knowledge of the law and understanding of the dynamics of intimate partner violence, including the psychological impact of witnessing violence on the child;*
- b. *duly take into account victims' grievances in cases of domestic violence and hear children victims/witnesses, where applicable, in the determination of custody and visitation rights;*
- c. *are informed of the unfoundedness of notions of "parental alienation"² or analogous concepts that are used to overshadow the violence and control exerted by perpetrators of domestic violence over women and their children.*

There are no measures in place to ensure that the designated professional groups have sufficient legal knowledge and act with the necessary sensitivity to intimate partner violence (see also Article 15). Gender-based violence is not compulsory/included in the curriculum of the respective degree programmes. The current, less effective quality assurance measures for the individual groups of persons can be characterised as follows:

- aa. Since 1 January 2022, Section 23b(3) of the **Courts Constitution Act** (*GVG – Gerichtsverfassungsgesetz*) has contained a clause stipulating that judges may not deal with family matters in their first year of employment. After this period, judges dealing with family matters "should" have demonstrable knowledge in the areas of family law, in particular child custody law, family procedural law and the parts of child and youth welfare law necessary for proceedings in family matters, as well as demonstrable basic knowledge of psychology, in particular child development psychology, and communication with children. However, a judge whose knowledge in

de/SharedDocs/Downloads/DE/Gesetzgebung/RefE/RefE_FamFG_Aend.pdf?__blob=publicationFile&v=2 (accessed on 06.08.2025).

375 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 279.

376 Gesetz zur Stärkung der Strukturen gegen sexuelle Gewalt an Kindern und Jugendlichen vom 08.04.2025, BGBl. 2025 I Nr. 107.

377 Gesetz für ein verlässliches Hilfesystem bei geschlechtsspezifischer und häuslicher Gewalt (GewHG) vom 24. Februar 2025, BGBl. 2025 I Nr. 57.

these areas is not verifiable may also be assigned the duties of a family judge if the acquisition of such knowledge can be expected “in the near future”. These requirements may be waived in the case of on-call duties. Since a distribution of cases among the courts that does not meet these requirements cannot be challenged by the parties involved or raised as an objection in proceedings, this amendment to the *Courts Constitution Act* has little more effect than a declaration of intent. This regulation is therefore not sufficiently monitored or (in the event of non-compliance) sanctioned.

It is therefore not certain that family court judges have the necessary knowledge when dealing with specific cases; in the worst case scenario, judges who are new to family matters may have no knowledge of the topics mentioned. In 2021, the *Act to Combat Sexual Violence against Children* (Gesetz zur Bekämpfung sexualisierter Gewalt gegen Kinder) introduced changes to the *Courts Constitution Act* and family procedural law regarding the qualifications and suitability of family court judges and legal representatives³⁷⁸. However, there is no adequate review process, and some training institutes teach outdated concepts such as Parental Alienation Syndrome (PAS)³⁷⁹. (see *Article 15*)

bb. According to *Section 163 (1) FamFG*, expert opinions in custody or access proceedings “should” be provided by experts who have professional qualifications in psychology, psychotherapy, child and adolescent psychiatry, psychiatry, medicine, education or social pedagogy; if the expert has a professional qualification in education or social pedagogy, the acquisition of sufficient diagnostic and analytical knowledge must be demonstrated by means of a recognised additional qualification. The non-reliable “*minimum requirements for the quality of expert opinions in family law*” merely contain the concept of conflictuality and make no reference to domestic violence³⁸⁰. Here, too, the wording chosen is significantly weaker than a guarantee. It does not require, for example, knowledge of the dynamics of violence in couple relationships or the unfounded nature of the concept of PAS. However, the lack of usability of an expert opinion from an expert who lacks this qualification represents a (partly effective) lever for the implementation of the requirement or its rejection.

cc. According to *Section 158a (1) sentence 1 FamFG*, court-appointed legal representatives should have basic knowledge in the areas of family law, in particular child law, procedural law in child matters and child and youth welfare law, as well as knowledge of developmental psychology and child-friendly communication techniques. Court-appointed legal representatives must undergo regular training, at least every two years. However, the content of the knowledge required by the IC is not explicitly included in the list of duties. The *Professional Association of Legal Representatives, Supplementary Guardians and Professional Guardians for Children and Young People* (BVEB – Berufsverband der Verfahrensbeistände, Ergänzungspfleger und Berufsvormünder für Kinder und Jugendliche e. V. (BVEB)) has set its own quality standards³⁸¹. However, these do not include any qualification requirements relating to gender-based violence in the family environment and are not binding.

Furthermore, it is the responsibility of the judges appointed in each case to monitor compliance with the qualification requirements. There is no reliable information on the extent to which this monitoring takes place – and whether a lack of qualifications leads to non-appointment or revocation of the specific court-appointed legal representative (see *also Art. 15*).

378 Gesetz zur Bekämpfung sexualisierter Gewalt gegen Kinder vom 16. Juni 2021, BGBl. I 2021 S. 1810.

379 Report Mainz 2024: Report Mainz vom 04.06.2024, in: ARD 04.06.2024, [online] [380 BMJV 2019: Mindestanforderungen an die Qualität von Sachverständigengutachten im Kindschaftsrecht, in: ebd. 01.09.2019, \[online\] \[https://www.bmjbv.de/SharedDocs/Downloads/DE/Themen/Nav_Themen/MindestanforderungenSachverstaendigengutachtenKindschaftsrecht.html\]\(https://www.bmjbv.de/SharedDocs/Downloads/DE/Themen/Nav_Themen/MindestanforderungenSachverstaendigengutachtenKindschaftsrecht.html \(accessed on 06.08.2025\).\) \(accessed on 06.08.2025\).](https://www.ardmediathek.de/video/%20report-mainz/report-mainz-vom-04-06-2024/das-erste/Y3JpZDovL3N3ci5kZS9hZXgvdWwN-jAlMzQ, ab Minute 10:25 (accessed on 17.08.2025).</p>
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381 BVEB e. V. 2022: Standards Verfahrensbeistandtschaft, in: ebd. 29.04.2022, [online] [https://www.bveb-ev.de/customers/bveb_ev/Dateien/KatjaSeck_Standards_Broschuere_DIGITAL.pdf](https://www.bveb-ev.de/customers/bveb_ev/Dateien/KatjaSeck_Standards_Broschuere_DIGITAL.pdf (accessed on 15.08.2025).) (accessed on 15.08.2025).

- c. informed about the unfounded nature of the term “parental alienation”² and similar terms that serve to conceal the violence and control exercised by perpetrators of domestic violence over women and their children.

There are no measures in place to provide educated information about the narrative of so-called “parental alienation syndrome” or PAS. On the contrary, there are various training and further education courses for professionals, lawyers and other relevant professional groups which, despite the lack of evidence and the ban on the use of this syndrome, continue to spread and justify the topic³⁸². In its ruling of 17 November 2023, the *Federal Constitutional Court* clarified that PAS is considered scientifically disproved and is not a sufficient basis for a decision based on the best interests of the child³⁸³. This decision is to be welcomed. Nevertheless, the court is maintaining the threatening scenario against the complainant, the children’s mother (repeated violations of the contact arrangement can be taken into account when assessing the best interests of the child ; psychological assessment cannot be enforced, but it can certainly be brought about)³⁸⁴.

Regarding question 34

Please provide details on the procedures in place to ensure that the competent court for family-related issues co-operate/communicate with other relevant bodies/professionals, including, but not limited to, criminal courts, law-enforcement agencies, health and education authorities and specialist women’s support services when taking decisions on custody and visitation or when offering family law mediation. Please specify whether the law provides a legal framework for any of the procedures in place.

There is no established procedure for communication between family courts and the designated professional groups. In family court proceedings, the principle of official investigation applies in accordance with *Section 26 FamFG*, according to which the court must investigate all facts relevant to the decision. Ultimately, however, it is up to the judge in charge to decide which investigations are carried out and how, and from which authority information is requested. To our knowledge, cooperation between family judges and other agencies therefore varies greatly and depends heavily on the individual judge, their experience, awareness and network. According to the *Monitor Violence Against Women* by the National Rapporteur Mechanism on gender-based violence, there are “no nationwide uniform guidelines, protocols or manuals on how the court should investigate the facts of a case”³⁸⁵. In practice, a diffident application of guidelines is noted, and in particular the lack of involvement of violence protection agencies. Positive examples such as the *Guidelines of the Family Court Munich – Munich model (Leitfaden des Familiengerichts München – Münchener Modell)*³⁸⁶ or the new *Guidelines for Berlin Family Courts (Leitfaden für Familiengerichte – Berliner Modell)*, which represent a practical, multidisciplinary approach to protecting women and children from gender-specific violence, or the *Guidelines for Custody and Access Proceedings in Cases of Domestic Violence* from Rhineland-Palatinate (*Arbeitshilfe für familiengerichtliche Verfahren, die den Aufenthalt des Kindes, Umgangsrecht, die Herausgabe des Kindes- oder Sorgerechtsverfahren gem. §155a IV FamFG betreffen*), are not used across the board.

382 Meisner, Matthias 2025: Aufschrei ohne Folgen: Gewalt an Frauen und Kindern. in: Blätter für deutsche und internationale Politik, Heft 1, S. 25–28, [online] <https://www.blaetter.de/ausgabe/2025/januar/aufschrei-ohne-folgen-gewalt-an-frauen-und-kindern> (abgerufen am 13.08.2025)

383 BVerfG, Beschluss vom 17.11.2023 – 1 BvR 1076/23, Rn. 34.

384 Heinke, Sabine 2024: Pflicht zur umfassenden Sachverhaltsaufklärung und die Grenzen der Wohlverhaltenspflicht im Umgangsstreit, in: Streit – Feministische Rechtszeitschrift, Heft 1, S. 31f.

385 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 247.

386 Justiz Bayern 2022: Sonderleitfaden zum Münchener Modell, in: ebd. o.A., [online] https://www.justiz.bayern.de/media/images/behoerden-und-gerichte/amtsgerichte/muenchen/familiensachen/2022.05.06_sonderleitfaden_zum_m%C3%BCchner_modell.pdf (abgerufen: 01.09.2025).

The law requires **child and youth welfare offices** to ensure cooperation with relevant agencies/professional groups:

According to *Section 17 (3) SGB VIII*, child and youth welfare offices are informed by the family court when divorce proceedings involving minors are pending, so that the counselling services provided for in *Section 17 (2) SGB VIII* (counselling in cases of separation and divorce, in particular with regard to the exercise of parental care and responsibility) can be offered.

Furthermore, the *FamFG* contains the following provisions, which are intended to ensure the involvement of the child and youth welfare office:

According to *Section 162 FamFG*, the child and youth welfare office must be consulted in proceedings concerning the child and notified of appointments. For child protection proceedings pursuant to *Section 1666 BGB*, a formal obligation to participate is also standardised: pursuant to *Section 162 (2) FamFG*, the court is obliged to send documents to the child and youth welfare office, which also gives the child and youth welfare office the status of a party entitled to appeal.

According to *Section 205 FamFG*, child and youth welfare offices must be heard in matrimonial matters if children live in the spouses' household. This provision is particularly relevant in cases of domestic violence that have led to housing allocation proceedings between spouses living separately pursuant to *Section 1361b (2) BGB*. In practice, this provision is not followed due to overburdened child and youth welfare offices, which do not have the resources to issue statements or participate in court proceedings. The corresponding provision for proceedings under the *Protection Against Violence Act (Section 213 FamFG)*, also applicable to unmarried couples) is likewise not implemented.

Child custody law is based on the principle of amicable settlement of custody and visitation rights, *Section 156 (1) FamFG*. One instrument for achieving this goal is the proactive requirement of mediation. In contrast to child custody law, an exception for settlements and mediation has been created for the *GewSchG* in *Sections 36 and 36a FamFG*. There is no comparable provision in child custody cases involving domestic violence (see *question 39*). In practice, this means that settlements continue to be pushed for and mediation is recommended. The cost regulations and the presumption rule (*Section 1626 (3) BGB*) and the good conduct clause (*Section 1684 (2) sentence 2 BGB*)³⁸⁷ reinforce the corresponding de facto compulsion.

In principle, there is an obligation to notify the family courts if parents commit criminal offences which, from the perspective of the law enforcement authorities, give rise to indications of a threat to the child's well-being³⁸⁸. After notification to the family courts, these courts exercise their discretion to initiate custody proceedings to safeguard the child's well-being; the substantive legal basis for this is *Section 1666 BGB* in conjunction with *Section 1666a BGB*.

In cases of domestic violence, cooperation between law enforcement agencies, criminal and family courts, and the child and youth welfare office has not yet proven to be as efficient as would be necessary for effective protection against violence. Nor is the timing of criminal and family court proceedings systematically synchronised. In the worst case, the family court refers to the (inadmissible) presumption of innocence in criminal law and the pending outcome of the criminal proceedings, or draws the erroneous conclusion from the lack of a criminal conviction that the threat to the child's well-being is also overcome.

Regarding question 35

Please provide detailed information on the procedures in place (including, if applicable, the relevant personnel used, the specific infrastructure available), in the exercise of custody and visitation rights, to:

- a. *eliminate the risk for the abused parent to be subjected to further violence;*

³⁸⁷ Franke, Lena 2023: Häusliche Gewalt im Umgangs- und Sorgerecht. Berlin: DIMR, S. 48 ff.

³⁸⁸ Bekanntmachung der Neufassung der Anordnung über Mitteilungen in Strafsachen (MiStra) vom 13. Juli 2022, BA nZ AT 20.07.2022 B1.

b. eliminate the risk for the child to witness or experience violence;

There is no procedure in national law that ensures that the parent affected by violence is protected from further violence through the exercise of custody and visitation rights by the parent who perpetrates the violence. Nor are children currently systematically protected from becoming witnesses and/or survivors of further violence.

In child custody proceedings, the so-called priority and acceleration requirement applies in accordance with *Section 155 FamFG*. This ensures that in custody, access and child protection proceedings, a hearing takes place no later than one month after the proceedings have been initiated (*Section 155 (2) FamFG*). Priority over other proceedings is ensured by the fact that the hearing can only be postponed for compelling reasons. For this reason, all parties to the proceedings must demonstrate compelling reasons for requesting a postponement.

This is intended to ensure that the substantive provisions of the *BGB*, which focus on the child's well-being, are implemented swiftly. Court measures in cases of threat to the child's well-being are regulated by *Section 1666 BGB*. *Section 1666 (3) No. 3* provides for the possibility of prohibiting the use of the family home, while *Section 1666 (3) No. 4* provides for the possibility of issuing restraining orders (no contact). According to *Section 1666 (4) BGB*, measures may also be taken against third parties. This applies to third parties who pose a threat; the court may impose appropriate measures even without a parental application (*Section 24 (1) FamFG*). No empirical data is collected on whether these measures are effective in practice against violent parents – for example, as a basis for social training courses. Reports from victims of violence document that the measures are sometimes used as a means of sanctioning mothers who are victims of violence and who allegedly “do not cooperate, alienate the child or endanger the child's well-being in the women's shelter”³⁸⁹.

According to the legislator, the principle of priority and acceleration must not be applied schematically. Especially when (potential) incidents of violence require the examination of measures of protection, the shortening of the duration of proceedings must not occur at the expense of the child's well-being. Even in expedited proceedings, the ordering of contact is subject to a prior assessment by the family court that the child is not endangered or harmed in its welfare by the contact (*Section 1684 (4) sentences 1 and 2 BGB*). In such cases, it is therefore necessary to regularly investigate the violent incident and the possible consequences for the child. Furthermore, in implementation of *Article 31 of the Convention on the Rights of the Child*, it must be clarified whether threats to the child and the parent affected by violence continue to exist. However, the extent to which these principles are observed and implemented in individual cases is again at the discretion of the respective judge.

c. ensure that the responsible personnel are trained and that the facilities are suited to enable safe supervised visitation.

Visitation supervision can be provided by youth welfare services or non-governmental youth welfare organisations (*freie Träger*) [2] [3] [4]. There are **no legal standards** regarding qualifications or procedures for the appointed visitation supervisors (*Section 1684 (4) sentences 3 and 4 of the German Civil Code (BGB)*).

As part of the research project “*Development of intervention approaches in divorce proceedings – supervised and accompanied visitation (§ 1684 (4) BGB)*” commissioned by the Federal Ministry for Family Affairs, German professional standards for accompanied visitation were presented in 2007³⁹⁰. These standards were intended to provide guidance to youth welfare services, family court judges involved in access proceedings and specialist family law solicitors on how to implement accompanied access for children in divorce proceedings in accordance with uniform quality criteria. However, they are not binding. A new edition is planned for 2026.

389 Meisner, Matthias 2025: How violence against women and children is trivialized, in: Katapult 16.07.2025, [online] <https://katapult-magazin.de/de/artikel/wie-gewalt-an-frauen-und-kindern-bagatellisiert-wird> (accessed on 06.08.2025).

390 Fthenakis, Wassilios et al. 2007: Deutsche Standards zum Begleiteten Umgang. München: C. H. Beck.

Certification courses are offered by a wide variety of institutions³⁹¹, but there is no standardised curriculum. Many training institutes also spread misogynistic narratives and continue to promote PAS.³⁹²

There are also no legally defined standards for contact supervisors (§ 1684 (3) *sentence 3 BGB*), i.e. the persons who accompany the handover of the child. Contact supervisors can be certified by various institutions³⁹³. Even untrained private individuals from the social environment can work as contact supervisors, who then enter into situations prone to escalation without any pedagogical or safety-related preparation.

Regarding question 36

Please indicate whether national provisions foresee the withdrawal of parental rights in criminal sentences if the best interest of the child, which may include the safety of the victim, cannot be guaranteed in any other way.

There is no mandatory provision in German law for the withdrawal of custody after certain criminal offences. Even if the child is the victim of criminal offences (bodily harm, violations of the right to sexual self-determination), custody proceedings under *Section 1666 of the German Civil Code (BGB)* must examine whether the (ongoing) threat to the child's well-being necessitates a custody arrangement. There is no explicit mention of physical or sexual violence against children or against a parent of the children.

The same applies to the visitation rights of potential offenders. *Section 1684 of the German Civil Code (BGB)* generally assumes that contact between the child and the parents is in the best interests of the child. This is because, according to *Section 1626(3) of the German Civil Code (BGB)*, contact with both parents is generally in the best interests of the child. A restriction of visitation rights can only be considered if it can be proven that contact with the (violent) parent is detrimental to the child's well-being, *Section 1684 (4) sentence 2 BGB*. The interplay between the assumption that contact should take place in the best interests of the child (*Kindeswohl*) and the high hurdles for excluding contact means that parents/children affected by violence are obliged to prove that violence has occurred in the context of contact arrangements. This burden of proof shows to be counterproductive for survivors in child custody proceedings.

In family court disputes over parental custody, it should be assumed in cases of domestic violence and gender-specific violence that the responsible exercise of joint parental custody is generally not possible. This is particularly the case if:

- » the stress experienced by the parent affected by violence and/or the child continues to have an impact on the structures and dynamics (e.g. fear, trauma, stress symptoms before, during or after contact, control, threats) or if
- » a sufficient reduction in the level of conflict through relationship counselling is unreasonable for one party or is not likely to be successful within a reasonable period of time.

There should be no obligation to reach an agreement or to seek joint counselling. Particularly in cases of domestic violence, a stricter requirement to reach an agreement pursuant to *Section 1627 sentence 2 BGB* is inappropriate.

391 BVEB e.V. 2022: Standards Verfahrenbeistandsschaft, in: ebd. 29.04.2022, [online] https://www.bveb-ev.de/customers/bveb_ev/Dateien/KatjaSeck_Standards_Broschuere_DIGITAL.pdf (accessed on 08.08.2025).

392 Meisner, Matthias 2025: Aufschrei ohne Folgen: Gewalt an Frauen und Kindern. in: Blätter für deutsche und internationale Politik, Heft 1, S. 25–28 [online] <https://www.blaetter.de/ausgabe/2025/januar/aufschrei-ohne-folgen-gewalt-an-frauen-und-kindern> (abgerufen am 13.08.2025)

393 siehe dazu z.B. Weinberger Forum o.J.: Zertifikatslehrgang Umgangspfleger, in: ebd. o. A., [online] <https://www.weinberger-forum.de/kinder-und-jugendhilfe/umgangspfleger-umgangsbegleiter/seminardetails/details/zertifikatslehrgang-umgangspfleger-250350/showSeminar.html> (accessed on 06.08.2025).

Recommendations

The following should be stipulated in a legal regulation

- » the inclusion of a rebuttable presumption for cases of domestic violence – meaning that the law stipulates that contact with a person who has committed domestic violence is generally not considered to be in the child’s best interests.
- » in cases of domestic violence, contact with the violent parent should generally be excluded or restricted. The rights and protection of the child and the parent affected by violence must be taken into account in decisions.
- » cases of domestic violence constitute an exception to the requirement to seek agreement between the parties within the framework of *Section 156 FamFG*. A corresponding explicit addition should be included.
- » in order to avoid undesirable conclusions about the whereabouts of the parent affected by violence and the child, a choice of jurisdiction should also be created within the framework of *Section 152 FamFG* (cf. *Section 211 No. 1 FamFG*).
- » as long as there is a risk of violence against the affected parent and/or the child or a risk of renewed severe psychological stress, no contact (including accompanied contact) should take place.
- » in cases of domestic violence, a declaration of renunciation of violence, the assumption of responsibility and participation in specialist counselling and/or a social training course by the violent parent should be a prerequisite for contact.

AND: The reform of child custody law and procedural law must be advanced swiftly.

Article 48 – Prohibition of mandatory alternative dispute resolution processes or sentencing

Background

Section 46a of the Criminal Code provides for a reduction in sentence in the event of victim-offender mediation or compensation for damages in criminal proceedings. *Section 155a of the Code of Criminal Procedure* regulates victim-offender mediation in such a way that the possibilities for reaching a settlement between the accused and the injured party must be examined at every stage of the proceedings. The provision expressly states that this may not be carried out against the will of the victim.

Since 2017, there has been a law on psychosocial court assistance to victims in criminal proceedings (*Section 406g of the Code of Criminal Procedure*). Costs are covered for offences listed in *Section 397a of the Code of Criminal Procedure*.

Regarding question 37

Please provide information on the measures taken to ensure that mandatory alternative dispute resolution processes are prohibited in criminal proceedings related to cases involving the different forms of violence against women covered by the Istanbul Convention.

Since the last report, no measures have been taken to ensure that mandatory alternative dispute resolution procedures are prohibited in criminal proceedings relating to the various forms of violence against women covered by the Istanbul Convention. However, there are no mandatory alternative dispute resolution procedures in criminal proceedings. Even though it is voluntary in principle, “gentle pressure” is often exerted by those involved (“You won’t have to testify then”; “everything will be over quickly”; “the perpetrator might even be acquitted in the end if we have to go to trial” etc.).

Regarding question 38

Where voluntary alternative dispute resolution processes exist for any criminal offences within the remit of the Istanbul Convention, such as conciliation or mediation, please provide information on the safeguards incorporated to ensure the free and informed consent of the victim to such processes and the measures taken to avoid that direct or indirect pressure is placed on the victim. Please also state whether the offer of alternative dispute resolution processes may result in the discontinuation of criminal investigation and prosecution or other consequences for the victim.

The victim of violence could be supported in the procedural situation described by legal and/or social work assistance. Representation in a civil action or support through psychosocial court assistance to victims (and coverage of the costs thereof) is linked to specific offences. Especially offences that play a major role in domestic and gender-specific violence – such as simple bodily harm and injury to health, insults, threats, stalking (without the consequences specified in *Section 397a (1) No. 3 of the Code of Criminal Procedure*) – and offences involving or committed on social media, as well as cumulative offences, are not eligible for this support. However, these are the type of offences in which proceedings are often discontinued, sometimes with a victim-offender mediation.

The necessary awareness-raising and training for the professional groups involved in the proceedings is insufficient (*see Art. 15*).

Depending on the severity of the underlying offence, the successful implementation of an alternative dispute resolution procedure often leads to a significant reduction in the sentence and a shortening of the court proceedings or, in the case of less serious offences, to the complete discontinuation of the investigation or court proceedings.

Regarding question 39

Please provide information on the measures taken to ensure that alternative dispute resolution processes such as mediation or procedures which can be considered tantamount to the latter are not used in family law proceedings such as divorce proceedings or proceedings related to custody and visitation of children, where there is a history of violence.

Background Civil Law:

Family law contains provisions on alternative dispute resolution procedures. This particularly affects the *Protection Against Violence Act* and child custody matters. The FamFG (**Family Procedure Act**) applies. *Sections 36 and 156 of the FamFG* require that agreements be sought and prescribe mediation proposals (*Section 36a FamFG*). Although cases involving protection against violence are expressly excluded (*Sections 36 (1) sentence 2, 36a (1) sentence 2 FamFG*), settlements are often reached in practice. The criminal liability for violations (*Section 4 GewSchG*) was extended by *Section 214a FamFG* to include violations of a settlement.

In child custody proceedings, settlements, referral to joint counselling or mediation close to the court are the norm. This appeals to the reason of those involved and argues that a settlement can be better lived with than a court-ordered measure. There is also a growing tendency to establish the alternating custody model as the standard (*see also question 34*).

Since 2011, there has been a *BMFSFJ* guidance document on the FamFG that highlights the special features of domestic violence³⁹⁴. Practical experience shows that no reference is made to this. A special guide³⁹⁵ from the Munich Local Court contains positive approaches such as the inclusion of risk management, close support for the person affected by violence and consideration of domestic violence.

A reform of family law that included proposals for special consideration of violence against women and children and generally provided for the exclusion of agreements and mediation in these cases was not implemented in the last legislative period. The proposals put forward in the new coalition agreement are ambiguous. It merely states that domestic violence should be “taken into account” in custody and access proceedings³⁹⁶.

A lack of knowledge about the dynamics of domestic violence and its effects prevents relevant arguments from being heard in proceedings. There is no explicit exemption similar to that which exists for violence protection proceedings.

394 BMBFSFJ 2011: Working aid for proceedings in family matters and in matters of non-contentious jurisdiction (FamFG) in cases of domestic violence, in: ebd. 07.07.2011, [online] <https://www.bmbfsfj.bund.de/bmbfsfj/service/publikationen/arbeitshilfe-zum-verfahren-in-familiensachen-und-in-den-angelegenheiten-der-freiwilligen-gerichtsbarkeit-famfg-bei-vorliegen-haesuslicher-gewalt-80730> (accessed on 08.08.2025).

395 Justice in Bavaria 2022: Justiz Bayern 2022: Sonderleitfaden zum Münchener Modell, in: ebd. o.A., [online] https://www.justiz.bayern.de/media/images/behoerden-und-gerichte/amtsgerichte/muenchen/familiensachen/2022.05.06_sonderleitfaden_zum_m%C3%BCchner_modell.pdf (abgerufen: 01.09.2025).

396 CDU/CSU & SPD 2025: Koalitionsvertrag zwischen CDU, CSU und SPD, 21. Wahlperiode, in: Koalitionsvertrag 2025 o.A., [online] https://www.koalitionsvertrag2025.de/sites/www.koalitionsvertrag2025.de/files/koav_2025.pdf, S. 89, Rn. 2905 (accessed on 06.08.2025).

Recommendations

We recommend

- » that exceptions to procedural rules requiring courts and public prosecutors to work towards reconciliation or agreement between the parties (e. g. victim-offender mediation in criminal law and proposals for agreements and mediation in family law) be included in the *Code of Criminal Procedure* and the *Family Procedure Act* for cases of violence within the meaning of the IC.
- » expanding the catalogue in Section 397a of the Code of Criminal Procedure to include cases of domestic violence—particularly bodily harm under Section 223 of the Criminal Code—for which legal aid may be granted for representation in a joint action or for which the court may appoint legal representation.
- » including explicit provisions for child custody cases involving a history of violence, prohibiting settlements and mediation in the *German Civil Code (BGB)* (family law section) and the *Family Procedure Act (FamFG)*. Attempts at amicable settlement and mediation should be avoided.
- » that family court judges, legal representatives, and youth welfare workers, be made aware of the particular dynamics and power relations in cases of domestic violence.

INVESTIGATION, PROSECUTION, PROCEDURAL LAW AND PROTECTIVE MEASURES

Articles 49 and 50 – General Obligations and Immediate Response, Prevention and Protection

Background

Due to capacity constraints, no organisation was able to address the questions relating to Articles 49 and 50. This does not mean that these issues should not be prioritised. Overall, there is also a lack of information in this area, as it is difficult to obtain and evaluate relevant data. Even the *Monitor Violence Against Women*³⁹⁷ by the National Rapporteur Mechanism on gender-based violence contains little information on this section. The information provided in the first Alternative Report by the Istanbul Convention Alliance is still relevant³⁹⁸, as are the comments in the GREVIO baseline report and the recommendations.

Regarding question 40

Please describe the human, financial and technical resources provided to law enforcement agencies to diligently respond to and investigate all cases of violence against women, including their digital dimension.

The length of criminal proceedings is generally increasing³⁹⁹, so that the situation with regard to gender-specific violence is also deteriorating rather than improving.

Regarding question 41

Which measures have been taken to ensure that the premises of police stations are accessible and suitable for receiving and interviewing victims of violence while ensuring their privacy? Is it possible to report cases of violence against women elsewhere than in police stations, including through digital means?

397 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 145ff.

398 BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf>, S. 155ff (accessed on 30.06.2025).

399 Legal Tribune Online 2022: Richterbund fordert mehr Personal, in: ebd. 19.08.2022, [online] <https://www.lto.de/recht/justiz/j/deutscher-richterbund-personal-justiz-richter-verfahrensdauer-haftentlassungen-statistik> (accessed on 11.08.2022).

In 2024, the previous government set up the first “Violence against Women” contact point for the Federal Police at Berlin’s Ostbahnhof train station⁴⁰⁰ and in May 2025, another one at Cologne Central Station⁴⁰¹. There is no known evaluation of the acceptance of these offices and their effectiveness. Given the extent and supra-regional incidence of gender-specific violence, these services appear to be window dressing. There is no information available on specific personnel resources at the respective general police stations.

Regarding question 42 (a/b)

Please explain whether specialist police/prosecution units exist to investigate and prosecute violence against women and specify:

- a.** *which forms of violence against women they are competent for;*
- b.** *whether such units exist in all police/prosecution districts throughout the country.*

Most public prosecutor’s offices or district attorney’s offices have special departments for “domestic violence” and/or “sexual violence”, even if they are not explicitly named “violence against women”. However, due to the large majority of female survivors, cases that can be connected to the IC are handled there. However, it is critical that the department heads are very rarely trained in this area and that there are frequent changes in responsibilities, so that specialisation rarely occurs. As the *Monitor Violence Against Women* of the National Rapporteur Mechanism on gender-based violence notes (p. 145 ff), there is a lack of comprehensive specific training. The judiciary is still far from establishing specialised courts or public prosecutors’ offices, or from achieving such specialisation⁴⁰². Such offices are being set up in a few locations, but this does not correspond to comprehensive coverage and policy⁴⁰³.

See Articles 15 and 31

Regarding question 43

Please describe any measures taken to ensure swift investigation into and effective prosecution of cases of violence against women and domestic violence such as prioritisation through fast-tracking, benchmarking or other initiatives, without compromising the thoroughness of the investigation.

Here, too, we refer to the unchanged situation as described in the first alternative report.

Regarding question 44

Are any measures taken to encourage women and girls who experience any of the forms of violence against women covered by the Istanbul Convention to report incidents of violence to the authorities? Please provide examples of any measures taken to instill confidence in law-enforcement officials,

400 Bundespolizei 2024: Anlaufstelle “Gewalt gegen Frauen” der Bundespolizei am Berliner Ostbahnhof, in: ebd. 15.08.2024, <https://www.bmi.bund.de/SharedDocs/kurzmeldungen/DE/2024/08/sicherheitstour-anlaufstelle-hg.html> (accessed on 18.08.2025).

401 Bundespolizei 2025: Opferschutz, in: ebd. 04.08.2025, [online] <https://bundespolizei.de/sicher-im-alltag/opferschutz> (accessed on 11.08.2025).

402 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S.145ff.

403 Justiz NRW o.J.: Schutz der Opfer häuslicher Gewalt, in: ebd. o. A., [online] https://www.justiz.nrw.de/BS/opferschutz/besondere_bereiche/haeusliche_gewalt (accessed on 18.08.2025).

including those aimed at addressing any language or procedural difficulties they encounter when lodging complaints, in particular those of migrant women, asylum-seeking women, women with disabilities, women with addiction issues and other women and girls at risk of intersectional discrimination.

Unfortunately, no measures can be mentioned here, as none have been taken.

Regarding question 45

Please indicate whether protocols/standard operating procedures or guidelines for police officers are in place providing guidance on how to receive reports, interview victims, investigate and collect evidence in cases of rape and sexual violence, domestic violence, psychological violence, stalking, sexual harassment (including their online manifestation), forced marriage, female genital mutilation and forced sterilisation/abortion. Please provide information on how the authorities ensure the comprehensive collection of evidence beyond the victim's testimony.

There are no comprehensive or uniform standards and guidelines. The *Monitor Violence Against Women* by the National Rapporteur Mechanism on gender-based violence⁴⁰⁴ points out the lack of such instruments and recommends their introduction. Similar police instructions ("guidelines", "service regulations", "circulars on victim protection") exist in almost all (federal) Länder, but they are not standardised nationwide.

Regarding question 46

Please describe the efforts taken to identify and address all factors that contribute to attrition (the process whereby cases drop out of the criminal justice system) in cases of violence against women and domestic violence.

The measures described can only be observed to a limited extent. Individual acts, each of which may initially be considered low-level, do not lead to an overall assessment.

Public prosecutor's offices do notice when an offender has also committed crimes in other (federal) Länder, at least if the case is handled carefully. The files are then usually merged (if the work is done correctly). There is certainly an interest in keeping and processing several cases (of domestic or sexual violence) in one place. However, this is time-consuming and can lead to overload for the relevant department heads in the public prosecutor's offices and to delays.

Regarding question 47

Please indicate if legislative or other measures have been taken to issue a renewable residence permit to migrant women who have become a victim of any of the forms of violence covered by the Istanbul Convention if the competent authority considers that their stay is necessary for the purpose of their co-operation in investigation or criminal proceedings.

Despite the withdrawal of the reservations to *Article 59(2) and (3) IC* in February 2023, there are still gaps in protection for survivors of domestic violence in precarious residence status. In order to close these gaps, a reform of the Residence Act would be absolutely necessary, providing, among other things, for a renewable residence permit for survivors of domestic violence on the basis of their personal situation and for their cooperation in investigations or criminal proceedings⁴⁰⁵.

404 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 296.

405 Middelhaue, Helene 2023: Aufenthaltstitel für Betroffene häuslicher Gewalt: Umsetzungsempfehlungen zu Artikel 59 Absatz 1–3 Istanbul-Konvention, in: Analyse DIMR Berichterstattungsstelle geschlechtsspezifische Gewalt

See also the comments on migrant and refugee women in 2) and on Articles 56 and 59.

Recommendations

With regard to the recommendations, we refer to those in the first Alternative Report and the GREVIO Report.

[online] https://www.institut-fuer-menschenrechte.de/fileadmin/Redaktion/Publikationen/Analyse_Studie/Analyse_Aufenthaltstitel_fuer_Betroffene_haueslicher_Gewalt.pdf (accessed on 22.08.2025).

Article 51 – Risk assessment and risk management

Background

The challenges of risk assessment and risk management described in the 2021 Alternative Report remain unresolved⁴⁰⁶: Germany has a patchwork of structures for risk management that are largely unstandardised and unstable. There are examples of good regional practice, but no uniform structures and procedures nationwide, and no standardised frameworks for systematic case management. Due to the federal system, the structure is also regulated differently in each (federal) Land, which leads to considerable differences in practice. In addition to standardised risk assessment, this also includes inter-institutional case conferences, which must be established and financed separately.

Furthermore, institutions (e.g. the police or the judiciary) often underestimate the risk of repeated violence and the danger to women affected by violence. There is a lack of **knowledge about high-risk cases** among the police and the judiciary, but also a lack of relevant training and courses of study for other professions (see Art. 15). There is also a lack of practical measures tailored to the specific needs of women and children affected by intersectional discrimination.

There is a lack of reliable cooperation and the financial and human resources required for this: the work of specialist counselling and support centres and women's shelters, as well as perpetrator counselling centres – insofar as they are involved – in the area of systematic risk assessment is not usually funded separately. There is a lack of resources for comprehensive case management and participation in case conferences. The lack of resources for systematic case management and participation in case conferences affects all authorities.

As a police prevention measure in the fight against domestic violence, electronic monitoring (eAÜ) is already in use in some (federal) Länder, but has rarely been applied to date; there is a lack of reliable evidence on its effectiveness⁴⁰⁷ (see also Art. 52, question 52 and question 56 above). There is also a fear that such measures could be used by a justice system that reproduces discrimination to target perpetrators with a migrant background in particular (on electronic monitoring, see also questions 1, 52 and 56).

Regarding question 48 (a/b/c/d/e/f/g/h/i/j)

Please describe any standardised and mandatory risk assessment tools in use by all relevant authorities in all regions for forms of violence against women such as stalking, violence committed in the name of so-called honour and domestic violence and to what extent these tools are being used in practice to assess the lethality risk, the seriousness of the situation and the risk of repeated violence with a view to preventing further violence.

406 BIK 2021: Alternativbericht zur Umsetzung des Übereinkommens des Europarats zur Verhütung und Bekämpfung von Gewalt gegen Frauen und häuslicher Gewalt, ebd. 06.2021, [online] <https://www.buendnis-istanbul-konvention.de/wp-content/uploads/2021/03/Alternativbericht-BIK-2021.pdf>, S. 158ff (accessed on 30.06.2025).

407 Examples include Art. 34 BayPAG; § 15b BbgPolG; § 30 HmbPolDVG; § 31a HessSOG; § 34c NRWPolG; § 38 Saarl-PolDVG; § 61 SächsPVDG; § 36c LSASOG Beispielhaft sind hier Art. 34 BayPAG; § 15b BbgPolG; § 30 HmbPolDVG; § 31a HessSOG; § 34c NRWPolG; § 38 Saarl-PolDVG; § 61 SächsPVDG; § 36c LSASOG in Kinzig, Jörg & Rebmann, Florian 2025: The use of electronic ankle monitors in cases of domestic violence. Der Einsatz der elektronischen Fußfessel bei Partnerschaftsgewalt. in: Zeitschrift für Rechtspolitik, Jg. 58, Heft 2, S. 48–51.

According to the *Monitor Violence Against Women* by the National Rapporteur Mechanism on gender-based violence, 15 (federal) Länder stated that they had concepts or other documents for risk analysis specifically for cases of gender-specific violence. 13 systematically check the perpetrator's access to firearms. However, the collection of state figures on risk assessments remained inconsistent⁴⁰⁸. Although the report collected data on the number of risk assessments carried out at state level, these are not comparable⁴⁰⁹.

Practical experience shows that there is a lack of reliable, standardised use of risk assessment tools. Differing or non-existent procedures at police stations, specialist counselling and support centres, women's shelters and perpetrator counselling centres lead to contradictory assessments. Specialist counselling and support centres carry out systematic risk assessments with survivors under high pressure, as every case can become a high-risk case. Standardised procedures make high risks more visible. The police sometimes carry out risk assessments, but standards are lacking or are not implemented⁴¹⁰.

Two examples: The Berlin police force has internal quality standards (QS) for various risk situations. The *QS for police measures in cases of individual threats and stalking* lists most of the risk factors mentioned above (e.g. threats of further violence or previous offences known to the police)⁴¹¹, but it is not specifically geared towards gender-specific violence; rather, it was developed generally for various risk situations. The *QS for cases of domestic violence* does provide for the preparation of a risk assessment, but without specific guidelines for a systematic and standardised approach⁴¹². It is not clear to what extent the QS is actually used in practice.

The Baden-Württemberg police force has a comprehensive and practice-oriented concept for standardised and coordinated risk assessment and risk management in cases of domestic violence. Other institutions such as child and youth welfare offices or family courts do not generally carry out standardised risk assessments at present⁴¹³.

The following risk assessment tools are frequently used: Danger Assessment, DyRiAS (Dynamic Risk Analysis System), Munich Model, GaTe RAI, ODARA and, in some cases, Lizzy, an AI-based risk assessment tool. However, these tools only assess the risk situation on an ad hoc basis and not on an ongoing basis.

Regarding question 49

Please specify how effective co-operation is ensured between the different statutory authorities and specialist women's support services in making risk assessments and whether the risks identified are managed by law enforcement agencies on the basis of individual safety plans that include also the safety of the victim's children.

Comprehensive, reliable inter-institutional cooperation between government agencies and the support system is not yet guaranteed. There is a lack of clear cooperation structures, both within and between the (federal) Länder, for effective case management, especially for protection in high-

408 DIMR 2024: Kurzfassung. Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland Erster Periodischer Bericht, Berlin: ebd., S.25.

409 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 286.

410 According to an analysis by Zeit-Online in 2025, the listed cases showed how often the perpetrator's dangerousness was known in advance. Raether, Elisabeth et al. 2025: And then he painted a heart on the window with her blood. In Zeit Online 10.04.2025, [online] <https://www.zeit.de/gesellschaft/2025-04/toetungsdelikte-frauen-2024-partner-mord-femizide> (accessed on 11.08.2025).

411 Polizei Berlin 2022: Qualitätsstandard für polizeiliche Maßnahmen bei Individualgefährdungen und Nachstellungen, Abgeordnetenhaus Berlin Drucks. 19 / 17 058, Anlage 2.

412 Der Polizeipräsident Berlin 2015: Qualitätsstandard in Fällen häuslicher Gewalt, Abgeordnetenhaus Berlin Drucks. 19 / 17 058, Anlage 1, S.8.

413 DIMR 2024: Kurzfassung. Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland Erster Periodischer Bericht, Berlin: ebd., S. 281.

risk cases. Uniform procedures are necessary, for example, when survivors have to flee to a women's shelter in another (federal) Land.

Individual (federal) Länder such as Rhineland-Palatinate, Saxony, Saxony-Anhalt and Schleswig-Holstein have designed and implemented specialised risk analyses and/or inter-institutional case management. Berlin has developed a framework concept for risk management and the implementation of multi-institutional case conferences, the concrete design and execution of which are yet to be determined⁴¹⁴. In other (federal) Länder, cities and municipalities are implementing their own concepts. One problem is that specialist counselling and support centres, women's shelters and perpetrator counselling centres are not routinely included in case conferences, for example for data protection reasons.

When dealing with high-risk cases, clearly regulated case management is also useful and necessary within the individual institutions. This means that there are coordinated procedures and processes for dealing with highly vulnerable women (and their children). This is not yet the case.

Data protection issues pose a major challenge: they mean that case conferences can no longer be held. There is a lack of clear, uniform regulations regarding the transfer of sensitive data between governmental and non-governmental institutions. The exchange of information between different agencies, such as support systems, youth welfare services, the police and the judiciary, requires careful consideration of the balance between privacy protection and the necessary cooperation to protect those affected.

One example of best practice is the state-wide risk management system (including case conferences) that Schleswig-Holstein has established and for which funding is currently allocated in the state budget. Specialist counselling and support centres, women's shelters and intervention centres receive €10,000 for case management. In addition, extra positions for case management are being created in every police department.

In cases of joint parenting, the police and child and youth welfare offices usually prioritise protecting the children. There are major gaps in protection for women and their children in cases that are not clearly classified as high-risk or in which the police come to a different risk assessment than, for example, the specialist counselling and support centres. In practice, it has also been shown that survivors are pressured to go to a women's shelter if previous measures of protection fail. The costs of fleeing, which can sometimes take years, are very high, especially for the survivor. Security plans that include measures to restrict perpetrators are therefore also needed.

On a positive note, some police forces are developing specialised units for domestic violence, whose officers are trained to deal with women at high risk. These should be introduced across the board and their sustainability ensured – for example, in view of the high turnover within the police force – as well as the relevance and quality of the training (see also Article 15).

Regarding question 50

Please describe the efforts made to analyse retrospectively all cases of gender-based killings of women, in the context of domestic violence and other forms of violence against women to identify the existence of possible systemic gaps in the institutional response of the authorities with the aim of preventing such acts in the future.

To date, there are still significant gaps in the statistical recording of serious gender-specific violence and homicides, as well as in research on femicide. There is no uniform federal definition of femicide, nor is there a specific criminal offence. In 2023, gender-specific aspects were added to the sentencing guidelines, Section 46 (2) sentence 2 of the German Criminal Code (StGB)⁴¹⁵. Since 2015, the annual special evaluation of the *Police Crime Statistics (Polizeiliche Kriminalstatistik – PKS)* on violence in partnerships has been published, which also contains figures on the killing of women

414 Senatsverwaltung für Arbeit, Soziales, Gleichstellung, Integration, Vielfalt und Antidiskriminierung o.J.: Geschlechtsspezifische Gewalt gegen Frauen, in: ebd. o.A., [online] <https://www.berlin.de/sen/frauen/keine-gewalt/geschlechtsspezifische-gewalt-gegen-frauen/#HRF> (accessed on 12.05.2025).

415 A legislative amendment that came into force on 1 October 2023 expressly included "gender-specific" and "anti-sexual orientation" motives in the (non-exhaustive) catalogue of § 46 (2) sentence 2 StGB with regard to sentencing.

within (former) partnerships^{416]} (see *Article 11*). However, the PKS does not record the motives behind the crimes, nor does it record the killing of women outside of partnerships. Furthermore, the inclusion of intrafamilial violence has reduced the overall proportion of violence against women to around 70%, which has led to a correspondingly distorted public perception.

The *Monitor Violence against Women* attempts to estimate the number of femicides and discusses the problems associated with the data situation⁴¹⁷.

The study **“Police risk analyses of homicides in partnerships and families” (GaTe)**, funded by the Ministry responsible for research (BMBF) from 2022 to 2024, is dedicated to the prevention of intimate partner homicides. It was conducted by the Ravensburg Police Headquarters, the German Police University and the Berlin Psychological University (PHB)⁴¹⁸. The study examines the extent to which threats and signals (“leaking”) as well as risk factors in the run-up to an intimate partner homicide can predict the occurrence of a crime and thus be used to improve the prevention of intimate partner homicides. The resulting risk analysis, the GaTe-RAI, is intended to help professionals recognise and correctly assess threats and announcements of crimes. As the survey of the 16 (federal) Länder conducted as part of the Monitor Violence against Women by the National Rapporteur Mechanism on gender-based violence has shown, most (federal) Länder have concepts or other documents on risk assessment (15 (federal) Länder) and risk management (14 (federal) Länder), but according to feedback from the violence support system, these are not being applied. In some (federal) Länder, the ODARA risk analysis tool is used. However, there is a lack of uniform nationwide standards and accompanying training for the police and the involvement of courts in dealing with high-risk cases⁴¹⁹ (see also *Art. 15*).

A study⁴²⁰ published in 2022 examines the criminal sanctions imposed on men who were convicted of murder or manslaughter under adult criminal law between 2015 and 2017⁴²¹. The study shows that perpetrators in cases of intimate partner homicide are less likely to be convicted of murder than in other homicide cases, primarily due to the assessment of the motive for the crime. Intimate partner homicides are often considered acts of desperation and classified as manslaughter, unlike cases in which power and possession claims are accepted as motives and, consequently, base motives can be assumed. Despite changes in Federal Court of Justice case law⁴²², there are still frequent convictions at lower court level in which despair and hopelessness are cited as the perpetrator’s motivation. In addition, relevant circumstances, such as previous violence, are often disregarded when determining the sentence. The study provides valuable insights into the systemic gaps in the institutional response of the authorities to femicide. Research in this area has so far generally been carried out without government funding, meaning that closing research gaps depends on academics.

The Schleswig-Holstein Women’s Counselling Association (LFSH) is investigating all homicides of women in the state since 2018 as part of a press investigation. In almost three-quarters of all cases, the perpetrator had used physical violence prior to the killing, and in two-thirds of cases, the domestic violence was known to the police⁴²³.

416 BKA o.J.: Partnerschaftsgewalt – Kriminalstatistische Auswertung, in: ebd. o.A., [online] https://www.bka.de/DE/AktuelleInformationen/StatistikenLagebilder/Lagebilder/Partnerschaftsgewalt/partnerschaftsgewalt_node.html (accessed on 11.08.2025).

417 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., ab S. 63, 271 ff.

418 Görgen, Thomas & Horn, Stefanie & Vogt, Catharina 2022: Polizeiliche Gefährdungsanalysen zu Tötungsdelikten in Partnerschaft und Familie, in: Deutsche Hochschule der Polizei o.A., [online] https://www.dhpol.de/departments/departments_III/FG_III.1/projekte/gate.php (accessed on 15.08.2025).

419 DIMR 2024: ebd., S. 275–287.

420 Habermann, Julia 2023: Partnerinnentötungen und deren gerichtliche Sanktionierung: Eine vergleichende Urteilsanalyse zu Partnerinnentötungen als Form des Femizids. Springer VS: Wiesbaden.

421 Schleswig-Holstein is planning such research to investigate homicides.

422 Previously: The fact that the separation was initiated by the victim of the crime may be considered a circumstance that speaks against the baseness of the motive. See Habermann, Julia 2023: Partnerinnentötungen und deren gerichtliche Sanktionierung: Eine vergleichende Urteilsanalyse zu Partnerinnentötungen als Form des Femizids. Springer VS: Wiesbaden, S. 125.

423 Landesverband Frauenberatung Schleswig-Holstein 2022: Teuer sind nur die Folgen von Gewalt, in: ebd. 07.03.2022, [online] <https://lfsh.de/blognews/teuer-sind-nur-die-folgen-von-gewalt> (accessed on 10.09.2025).

Recommendations

We recommend the following to the Federal Government and Länder

- » establish a nationwide, well-funded, systematic risk assessment and inter-institutional case management system. Specialist counselling and support centres, women's shelters and perpetrator counselling centres must be involved in the design and implementation of this system. Women affected by violence should also be involved in the risk assessment or risk analysis process, in particular through increased proactive engagement by authorities with these women
- » establish special responsibilities for violence in partnerships and high-risk cases within the police, public prosecutor's office, child and youth welfare office and family courts in all (federal) Länder.
- » expand training on identifying high-risk cases, and include high-risk management and risk analysis as topics in the education and training of police and judicial personnel.
- » introduce mandatory, sustainable and recurring training for police officers, prosecutors and judges to create a deeper understanding of the contexts, dynamics and causes of gender-based violence and killings.
- » fund research on the effectiveness of inter-institutional cooperation and various risk assessment tools.
- » systematically collect data on the number of risk assessments carried out and on risk management.
- » expand research on femicide and take into account the background of the crimes, the relationship between the survivor and the perpetrators, and information about the survivors and perpetrators.
- » systematically expand research on the investigation of homicides for the purpose of prevention. This applies to the police and all other institutions that decide on protective and crime-restricting measures. Regulations on data exchange beyond the case of death are necessary in order to learn from the cases.
- » clarify data protection issues that do not stand in the way of cooperation in case conferences and the comprehensive protection of survivors. Internal and external information chains within authorities must be ensured and interdisciplinary case conferences enabled.
- » standardise reporting restrictions for better protection of survivors.

We recommend to the legislator

- » to establish mandatory participation in perpetrator work courses in high-risk cases.
- » to push ahead with a comprehensive reform of family law that provides for systematic risk assessment by family courts.
- » to implement the amendment to the FamFG for cases in which the place of residence of the survivor and their children must be kept secret.
- » to resolve the problem of the duty of disclosure by child and youth welfare offices in cases of advance maintenance payments, e.g. by having the child and youth welfare office in the district of the child's father provide administrative support.

Article 52 – Emergency barring orders

Background

All (federal) Länder have provisions in their police laws allowing the police to remove persons from the (shared) home and to issue restraining orders (no approaching) or expulsion orders⁴²⁴. The individual arrangements vary. Neither the duration of an expulsion order nor the possibility of extending it are regulated uniformly.

In some cases, this police measure is linked to the so-called proactive approach⁴²⁵: When a removal order is issued, the person affected by violence is offered appropriate counselling services – in some cases through the direct transfer of data to intervention and counselling centres, as regulated by law, and in other cases only with the consent of the person concerned (*see also Article 11*).

Regarding question 51

Have any legislative or other measures been taken to introduce and/or amend the legal framework governing emergency barring orders in order to align it with the requirements of Article 52?

First of all, the existence of the instrument of police expulsion is to be welcomed. However, since the GREVIO recommendations, there have been no legal changes to police or court protection orders. In addition, case numbers and outcomes of proceedings are not systematically recorded. The judicial statistics⁴²⁶ show a funnel between the number of cases received under the GewSchG and “successful” conclusions: According to the Federal Statistical Office, there were a total of 44,832 new cases involving GewSchG measures under Sections 1 and 2 in 2021 – 36,787 of which were for protection against violence and stalking (Section 1) and 8,045 for transfer of residence (Section 2).

Only 4,213 measures were implemented by order under the GewSchG, of which 3,646 were protection orders and 567 were housing provisions. The statistics do not break down the cases settled by comparison individually. As many cases end this way, it is not possible to determine an exact success rate. At least in contested cases, this was less than 10%. This proves that GREVIO’s demand for more precise statistics has not been implemented.

If yes, please specify whether:

- a.** *emergency barring orders may remain in place until a victim can obtain a court- ordered protection order in order to ensure that gaps in the protection do not arise;*

When applied by police officers, difficulties arise with regard to the risk assessment, the duration of the expulsion and the synchronisation with the family court’s processing time until a protection order is obtained under the GewSchG. Practical experience shows that legal application offices at local courts are sometimes unavailable to submit the relevant applications in a timely manner. In

424 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd. S. 287 ff.

425 Currently only in the (federal) Länder of Bremen and Schleswig-Holstein. In Mecklenburg-Western Pomerania, a corresponding regulation has been abolished again.

426 DeStatis 2022: Rechtspflege Familiengerichte. Fachserie 10, Reihe 2.2, in: ebd. 09.08.2022, https://www.destatis.de/DE/Themen/Staat/Justiz-Rechtspflege/Publikationen/Downloads-Gerichte/familiengerichte-2100220217004.pdf?__blob=publicationFile&v=5 (accessed on 17.09.2025).

addition, the length of time taken by the courts to process cases due to the hearings deemed necessary before a protection order is issued creates a gap in protection.

b. support and advice are made available to women victims of domestic violence in a pro-active manner by the authority competent to issue an emergency barring order;

According to an analysis of the *Women's Shelter Statistics by Frauenhauskoordinierung e. V.*, it can be assumed that in cases of domestic violence, victims are more likely to be advised to flee to a women's shelter than to have the perpetrator removed⁴²⁷. There is a lack of training and awareness among police⁴²⁸. As shown in the preliminary remarks, far too few emergency barring orders are issued in the interests of the survivor.

A comparison of *statistics on protective measures against violence* under the police laws of the federal states and the subsequent protective measures proceedings before the family courts shows a significant "drop-out" rate. Not every expulsion from the shared home, for example, results in a (temporary) assignment based on the GewSchG.

Experience in Munich, for example, shows that this gap between (strictly time-limited) police measures such as expulsion and the necessary subsequent GewSchG applications or measures can be closed by multi-professional structures: proactive contact and counselling of victims of violence within 24 hours of the police intervention are crucial⁴²⁹. This should be explicitly enshrined as a funding objective for (federal) Länder and municipalities.

c. children are specifically included in contact bans issued under the emergency barring order;

A restraining order (no contact) does not normally extend to children in care.

d. any exceptions to contact bans are made and in which circumstances.

The application of police removal orders has its limits, e.g. in communal facilities for refugees or people with disabilities in (inpatient) residential facilities. This also applies to women with disabilities who live in couple relationships in their own homes if the perpetrator also provides the necessary assistance or care.

If children are also affected, exceptions are made in favour of visitation rights (see also Art. 31, question 51 a/b).

The data available on the use of police removal orders is insufficient⁴³⁰, so that the perceived difficulties can hardly be verified. Accordingly, no analyses or improvements have been made to date.

Therefore, questions a) to d) can only be answered in the negative.

Regarding question 52

Please provide information on the measures taken to enforce emergency barring orders and on responses to any violations of such orders.

427 Frauenhauskoordinierung 2024: Bundesweite Frauenhaus-Statistik 2023, in: ebd. 09.2024, [online] https://www.frauenhauskoordinierung.de/fileadmin/redakteure/Publikationen/Statistik/2024-10-08_Langfassung_Frauenhausstatistik_2023_final.pdf, S. 37f (accessed on 18.08.2024).

428 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd. S. 292.

429 Polizeipräsidium München 2019: Unterstützungs-Modell gegen Häusliche Gewalt, in: Polizei Bayern 22.11.2019, [online] <https://www.polizei.bayern.de/schuetzenvorbeugen/beratung/index.html/8867> (accessed on 18.01.2021).

430 DIMR 2024: Kurzfassung. Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland Erster Periodischer Bericht, Berlin: ebd., S.26.

The data available on this issue is also extremely scarce. According to the evaluation in the *Monitor Violence Against Women* by the National Rapporteur Mechanism on gender-based violence, only one (federal) Land provided information on this⁴³¹.

There are also legal obstacles. The coercive measures available under police law, such as penalty payments, execution bei substitution, coercive detention and direct coercion, are ineffective due to the passage of time or a lack of enforcement options, or are not applied⁴³². Violation of a police expulsion order is not relevant under criminal law and cannot even be punished as an administrative offence with a fine. Depending on the individual risk assessment of the police officers responsible, a so-called “threat management interview” may be conducted with the perpetrator.

Countering this with electronic monitoring seems inappropriate given the lack of application of existing sanctions (see also background to Art. 51, Art. 53 and question 54).

Recommendations

We recommend

- » that appropriate surveys be conducted and analysed to determine why protection orders are not enforced and violations are not sanctioned. The previous recommendations of GREVIO must continue to apply.

431 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 295.

432 Ibid.

Article 53 – Contact and restraining orders (no approaching) and protection orders

Background

The Protection Against Violence Act contains protection orders that allow for restraining orders (no contact), contact bans, injunctions and housing assignments. These refer to specific forms of violence, such as physical violence, deprivation of liberty, violation of sexual self-determination, threats and stalking, but do not cover all forms of violence in domestic relationships.

Legal action before the family court is designed as an urgent procedure, but can also be conducted in main proceedings. The GewSchG also applies to persons in reception facilities for refugees (*but see question 51 d*).

Section 4 of the GewSchG stipulates that violations of orders or settlements under Section 1 are punishable by law. In 2021, the penalty⁴³³ was increased to up to two years' imprisonment or a fine. The family courts themselves can impose administrative fines or administrative detention of up to six months each, up to a maximum of two years in total.

Regarding question 53 (a/b/c)

Have any legislative or other measures been taken to introduce and/or amend the legal framework governing restraining and protection orders in order to align it with the requirements of Article 53? If yes, please specify whether:

- a.** *restraining or protection orders are available – in the context of criminal proceedings and/or upon application from civil courts – to women victims of all forms of violence covered by the Istanbul Convention, including domestic violence, stalking, sexual harassment, forced marriage, female genital mutilation, violence related to so-called honour as well as digital manifestations of violence against women and girls;*
- b.** *children are specifically included in protection orders;*

The law has only been revised slightly to date. Reform efforts do not relate to the free enforcement of the law. Investigative requirements for judges, procedural law to speed up proceedings, the prohibition of simultaneous visitation rights, and consideration of the rights of children and migrant women have remained in the drafting stage due to the end of the governing coalition. Changes and adjustments have therefore not been made. The law excludes cases in which the child is under the parental care of the aggressor and refers to the child protection provisions of the BGB (*Section 3 GewSchG in conjunction with Sections 1666 ff. BGB*).

- c.** *any exceptions to contact bans are made and, if so, in which circumstances these may be made.*

See question 51 d).

⁴³³ [1] Art. 2 of the Act Amending the Criminal Code – More Effective Combating of Stalking and Better Recording of Cyberstalking, as well as Improvement of Criminal Law Protection against Forced Prostitution of August 10, 2021 Art. 2 des Gesetzes zur Änderung des Strafgesetzbuches – effektivere Bekämpfung von Nachstellungen und bessere Erfassung des Cyberstalkings sowie Verbesserung des strafrechtlichen Schutzes gegen Zwangsprostitution vom 10.08.2021, BGBl. I S. 3513.

Regarding question 54

Please provide information on the measures taken to enforce protection orders and on responses to any violations of such orders.

As part of the planned reforms, the Federal Ministry of Justice intends to incorporate the imposition of electronic monitoring and compulsory participation in social training courses into the Protection Against Violence Act. This is intended to improve the enforcement of protection orders and the protection of those affected. Currently, administrative fines (*see question 52*) or threats of punishment are not sufficiently effective.

The prosecution statistics of the Federal Statistical Office (*Fachserie 10, Reihe 3*) show that 6,483 male suspects were charged under Section 4 GewSchG for violations of orders under the GewSchG, of whom 796 were convicted – a rate of only 12%⁴³⁴.

Since applications under the Protection Against Violence Act are dealt with in summary proceedings, in some cases on the basis of *affidavits* and without oral hearings, these instruments are not appropriate in this legislative context. In addition, unlike in Spain, there is a lack of comprehensive, institutionalised, cross-agency risk management and sufficient services for social training courses (perpetrator work) (*see also Articles 56, 51 and 52*).

Recommendations

The National Rapporteur Mechanism on gender-based violence recommends (above all) to the state governments and the competent judicial and police authorities

- » to collect precise data on the number of protection orders issued and comparisons and, as a matter of principle, to break down the completed protection against violence proceedings by type of completion.
- » to inform survivors about protection orders in a non-discriminatory and proactive manner and support them in implementing the legal options for obtaining protection orders.
- » ensure that the Protection Against Violence Act is applied without discrimination to women with disabilities and asylum seekers.
- » establish clear guidelines and reliable standards for violence protection concepts in institutions for people with disabilities, developed in a participatory manner, taking into account intersectional aspects, different disabilities and multiple disabilities.
- » exhaust existing sanctions and, above all, implement preventive and sustainable measures to ensure the effectiveness of court protection orders (such as participation in violence prevention or perpetrator intervention programmes, which, however, must not be linked to the Protection Against Violence Act).
- » systematically collect disaggregated data on violations of protection orders and court settlements in order to be able to review the effectiveness of measures.

⁴³⁴ DeStatis 2022: Rechtspflege Familiengerichte. Fachserie 10, Reihe 2.2, in: ebd. 09.08.2022, https://www.destatis.de/DE/Themen/Staat/Justiz-Rechtspflege/Publikationen/Downloads-Gerichte/familiengerichte-2100220217004.pdf?__blob=publicationFile&v=5 (accessed on 17.09.2025).

Article 56 – measures of protection

Background

The provisions of the Code of Criminal Procedure offer opportunities to inform victims about the status of proceedings, e.g. through their own rights to inspect files, information on detention status and release after serving a sentence. However, these are largely unknown and rarely requested.

Regarding question 55 (a/b/c/d)

Please provide information on the measures taken to ensure the following:

- a.** *that the relevant agency informs the victim when the perpetrator escapes or is released temporarily, at least when they or their family might be in danger (paragraph 1 b);*

There are no corresponding information obligations on the part of the authorities, nor are they exercised; rather, it is the responsibility of the victim to obtain information about relevant applications. This cumbersome procedure also does not apply if the victim is unaware of the perpetrator's current situation.

- b.** *the protection of the privacy and the image of the victim (paragraph 1 f);*

There are no special measures.

- c.** *the possibility for victims to testify in the courtroom without being present or at least without the presence of the alleged perpetrator, notably through the use of appropriate communication technologies, where available (paragraph 1 i);*

The possibility of video questioning is used, but not yet to the extent that would be advisable for survivors.

- d.** *the provision of appropriate support services for victims so that their rights and interests are duly presented and taken into account (paragraph 1 e).*

See question 38.

Recommendations

- » Install significantly more support measures for survivors.
- » The criminal justice system, which continues to focus on perpetrators, must take better account of the concerns of survivors.

APPENDIX

Regarding question 11

Table 1: Initial education (school or vocational training)

Please complete the table and list the professionals (from the fields of healthcare, law enforcement, criminal justice, social services, education, asylum and migration, media/journalism and support services) who have received initial training on violence against women. Please enter a separate row for each occupational group.

The (federal) Länder have considerable scope for decision-making and design when it comes to implementing federal framework guidelines. This results in regional differences in the requirements and design of initial training (e.g. nursing training: the framework curriculum allows for the topic of domestic violence to be addressed, but does not explicitly mention it. Bremen has introduced compulsory teaching. Berlin rejects a requirement, citing the decision-making leeway of each individual nursing school.) According to the DIMR data report, data is primarily available on *further training* in the areas of policing, justice and teaching⁴³⁵. A nationwide overview of initial training is not available.

Below we list the data known to us. Due to the funding of S.I.G.N.A.L. projects by the state of Berlin, detailed information is available for the federal state of Berlin. This is listed here and in question 12 to show what progress can be achieved in this area with the help of coordination/a systematic approach.

Individual universities in the field of psychosocial work have anchored the topic primarily through committed professors at the respective universities. No comprehensive survey could be conducted on this, but positive examples are listed in the table⁴³⁶.

In addition, the interdisciplinary online course (see above) on domestic violence is worth mentioning because it was funded by all (federal) Länder for free use and places great emphasis on teaching professional standards for addressing gender-specific violence⁴³⁷. This was based on a systematic evaluation of the training courses offered to medical and therapeutic professionals. Teachers, (social) pedagogical and psychosocial professionals, legal professionals, and police officers in the professional fields of pre-school services, educational institutions, child and youth welfare, women's counselling centres and support facilities, (psycho-)social, (social-)pedagogical institutions, counselling facilities, healthcare, police, and justice on the subject of domestic violence. The team, a collaboration between the research institutions KJP Uni Ulm, FIVE (University of Freiburg), SOFFI F. and SOCLES, clearly identified existing gaps in the training landscape.

435 DIMR 2023: Bericht über die Datenlage zu geschlechtsspezifischer Gewalt gegen Frauen und häusliche Gewalt in Deutschland, in: ebd. 08.2023, [online] <https://www.institut-fuer-menschenrechte.de/publikationen/detail/bericht-ueber-die-datenlage-zu-geschlechtsspezifischer-gewalt-gegen-frauen-und-haeuslicher-gewalt-in-deutschland>, S. 106 (accessed on 29.07.2025).

436 See website of Universität Tübingen, [online] <https://uni-tuebingen.de/fakultaeten/wirtschafts-und-sozialwissenschaftliche-fakultaet/faecher/fachbereich-sozialwissenschaften/erziehungswissenschaft/studium/zusatzqualifikation/>; Website of Dualen Hochschule Baden-Württemberg, [online] https://www.dhbw-stuttgart.de/fileadmin/dateien/Forschung_Lehre_SW/Forschung_Lehre_Teubert.pdf; Website of Universität Kassel, [online] <https://www.uni-kassel.de/uni/studium/diversitaet-forschung-soziale-arbeit-master.html>.

437 See the interdisciplinary online course on protection and help in cases of domestic violence, <https://haeusliche-gewalt.elearning-gewaltschutz.de/>.

Professionals	Do they benefit from initial training on violence against women and domestic violence?	Is this training mandatory?	Are training efforts supported by guidelines and protocols?	Who funds the training?	Please describe the content and duration of the training
Health professionals / Nationwide					
Midwives	No data on implementation of the requirement	Topic anchored in study and examination regulations	A guideline/protocol is available in the federal state of Berlin. It is unknown whether it is used nationwide	Respective university	Appendix 1, III, 3. of the regulations, including skills to be learned: advising women and their families on support services in cases of violence, especially domestic violence, encouraging the use of preventive support services in cases of risk of neglect, maltreatment or sexual abuse of infants. ⁴³⁸
Healthcare professionals / Berlin (federal state)					
Nursing (19 of 41 nursing schools are participating, as of May 2025)	Yes	Individual requirements are set by each school	Yes, S.I.G.N.A.L. guideline	Respective education institution pays trainers. Coordination funded by Berlin Senate Department for Health.	6–8 teaching units - Basic knowledge of domestic and sexual violence (definition, prevalence, dynamics, forms, etc.) - Health consequences - Addressing violence and conducting conversations - Documentation of injuries - Support system, referrals
Medical assistants (Medizinische Fachangestellte)	Yes	See nursing	RTB recommendations for general medical practices	See nursing Lessons are repeatedly cancelled at one of two schools because there are insufficient funds	6 teaching units Content: see nursing
Dental assistants (Zahnmedizinische Fachangestellte)	Yes	See nursing	RTB Recommendations for dentistry	See nursing Lessons are repeatedly cancelled at one of two schools because there are insufficient funds	6 teaching units Content: see nursing
Midwives	Yes	Yes, topic is anchored in the midwifery sciences BSC curriculum	Yes, S.I.G.N.A.L. guidelines & RTB guideline/protocol for obstetrics & midwifery	See nursing	See nursing
2023: at least 1,204 people in Berlin trained from the above-mentioned occupational groups (= number of people who completed the evaluation questionnaire)					
2024: at least 1,404 people in Berlin trained from the above-mentioned occupational groups (= number of people who completed the evaluation form)					
Healthcare professionals / Brandenburg (federal state)					
Medical students at Brandenburg Medical School	Yes	Yes	Yes (WHO guidelines, S.I.G.N.A.L. guidelines)	Brandenburg Medical School	In the 5th semester, 90-minute seminar on domestic and sexual violence (focus: communication). Topic is part of the examination

438 HebStPrV, Anlage 1, III.

Table 2: In-service training

Professionals	Number of professionals trained	Is the training mandatory?	Frequency	Training efforts supported by guidelines and protocols?	Please describe the content and duration of the training
Health professionals / Berlin (federal state)					
Social pedagogues/social workers at pregnancy counselling centres	2023: 70 people	No	One-off	Yes (RTB guidelines for this area)	3 hours Prevalence, recognition, response and referral
Doctors, nurses, psychologists, hospital social workers, medical assistants, pharmacists (S.I.G.N.A.L. basic training)	Basic training: 2023: 38 people 2024: 46 people Advanced training: 2024: 23 people	No No	3x/year service 1.5-day training course 1-2 times per year	Yes (WHO guideline, RTB recommendations for various areas of care) Yes, if available for the respective topic	8 teaching units - Basic knowledge of domestic and sexual violence (definition, prevalence, dynamics, forms, etc.) - Health consequences - Addressing violence and conducting conversations - Documentation of injuries - Support system, referrals 2 teaching units, various topics
Midwives	2023: 40	No	One-off, midwives' congress	Yes, RTB recommendations for obstetrics & midwifery	1 UE Intervention in obstetrics & midwifery
Babylotsen (Babyguides) Further training/education	2023: 29 2024: 18	Yes, anchored in the curriculum	1-2 times per year	Yes, S.I.G.N.A.L. intervention & RTB recommendations Obstetrics & midwifery	8 teaching units (45 minutes each) with a focus on obstetrics & midwifery (and see above for basic training)
Babylotsen (Babyguides) Advanced training/refreshers	2024: 22	No	One-off workshop		6 teaching units (45 minutes each) Trauma-informed care and self-care
Adaptation course for midwives from third countries	2023: 40 2024: 40	Request made for each course	1 / year (Depending on the number of participants, 2 groups in parallel)		8 teaching units (45 minutes each) with a focus on obstetrics & midwifery (see above)
Advanced training in emergency care	1 course in 2023, number of participants not recorded	Yes	One-off	RTB recommendations for accident and emergency departments	8 teaching units (45 minutes each) with a focus on obstetrics (see above)
Specialist training in general medicine	2023: 2 courses, 60 participants	No	Every 2 years	Recommendations for general medicine	1.5 hours/course - Recognising signs of domestic violence - Addressing suspicions - Support options
Further training for family midwives	2024 1 course (participant numbers not recorded)	Yes	One-off	Recommendations RTB for midwives	8 teaching units (45 minutes each) with a focus on obstetrics & midwifery (see above)
Nationwide / all professional groups					
VIPROM project, figures for Germany: Medical students, nursing trainees, doctors	88 people to date	No	One-off	Yes	10 modules, e.g. forms, definition, communication, medical examination, inter-professional cooperation

Professionals	Number of professionals trained	Is the training mandatory?	Frequency	Training efforts supported by guidelines and protocols?	Please describe the content and duration of the training
Interdisciplinary „Protection and help in cases of domestic violence – an interdisciplinary online course“	Self-directed e-learning According to project evaluation 2019–2022: 2,470 participants	No	Anytime	Yes	25 learning units in 5 modules on: - Forms and consequences of domestic violence - Recognising and addressing violence issues - Interdisciplinary cooperation within the support system; support options, risks and consequences for children and young people who witness domestic violence, approaches to working with violent partners, particular risks in difficult living conditions (), legal principles: eviction orders, protection orders, child protection, contact, data protection, finances, etc., digital control and ways to protect oneself Competence in dealing with dilemmas & self-care for professionals and much more...
Prosecutors in North Rhine-Westphalia	Not known	Yes	Not known	Not known	Ten-day training course for “young public prosecutors” ⁴³⁹ . The training course is offered by the relevant authorities in North Rhine-Westphalia (including the Ministry of Justice of North Rhine-Westphalia) for public prosecutors in North Rhine-Westphalia ⁴⁴⁰ .

439 DIMR 2024: Monitor Gewalt gegen Frauen. Umsetzung der Istanbul-Konvention in Deutschland. Erster Periodischer Bericht, Berlin: ebd., S. 151.

440 ibid., S. 150f.



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Bei häuslicher Gewalt
Hilfe für Frauen und ihre Kinder



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Bundesarbeitsgemeinschaft kommunaler **frauen** Büros und Gleichstellungsstellen



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