

Contribution

**to the Call for written Submissions on the draft guidelines on
addressing multiple and intersectional forms of discrimination
against women and girls with disabilities**

by Weibernetz

Preliminary remark

Weibernetz, the German network of women, lesbians and girls with disabilities, welcomes the opportunity to submit a written contribution based on the UN CRPD Committee's call for draft guidelines on addressing multiple and intersectional forms of discrimination against women and girls with disabilities. We are pleased to provide the Committee with findings and experiences from Germany and are grateful for this opportunity.

Weibernetz is highly convinced, that in particular due to international conventions such as the UN CRPD and the Istanbul Convention as well as European directives, national policy measures are focusing on intersectional anti-discrimination policies

Officially, there are around 5 million women with an approved severe disability living in Germany. As women without a severe disability card are not included in this figure, the actual number of women with disabilities is much higher. There is no (consistent) data on how many of them have experienced flight or migration, about their sexual orientation, etc. Knowledge of combined intersectional links is correspondingly limited.

In recent years, individual studies have yielded insights into the intersections of gender, disability and violence in particular.

As a political lobby group of disabled women, we only have limited knowledge of specific instances of discrimination based on other characteristics than disability and gender, which is why we cannot address all intersections in this contribution.

In principle, Weibernetz has found in its political work that both, the German constitution (Article 3 of the constitution (Basic Law)) and (anti-discrimination) laws, provide a good basis for non-discrimination (including intersectional discrimination) – see below. However, there is a lack of consistently intersectional measures and

strategies in an intertwined equality and disability policy to break down barriers, secure rights and make disabled women visible in all their diversity.

Consideration of intersectionality in German (anti-discrimination) legislation

Social Code Book 9 (SGB IX), which specifically covers benefits for people with disabilities, was the first German law in 2001 making it mandatory to take into account the needs of women and girls with disabilities. Also the needs of mothers and fathers with disabilities must be taken into account in all services promoting participation.

In practice, it is repeatedly evident that service providers have little understanding of the gender-specific issues that people with disabilities may face. When the law was amended in 2016, there were even considerations to remove the reference to 'women's rights'. From the perspective of Weibernetz, however, it would have been more necessary to include further intersections in the spirit of intersectionality.

To our knowledge, the Disability Equality Act (BGG) of 2002 was the world's first anti-discrimination law on equality for people with disabilities, that explicitly addressed the concerns of women with disabilities. It includes the enforcement of 'actual equality for women with disabilities' with the aim of eliminating discrimination against women with disabilities.

The General Equal Treatment Act (AGG) – Germany's comprehensive anti-discrimination law – passed in 2006 covers a wide range of characteristics that are grounds for discrimination: gender, disability, sexual identity, age, origin, religious affiliation and ideology. However, its scope is limited and does not generally apply to private providers. Protection against multidimensional discrimination based on various characteristics is provided in principle, but is inadequate in practice.

Violations of the AGG can be reported to the Federal Anti-Discrimination Agency. Consulting practice shows that most discrimination is based on racist reasons, followed by discrimination based on disability or gender.

Further topic-specific legislation is listed below under the respective topics.

Lack of intersectionality in statistics

Despite the above-mentioned laws, data on the living conditions of people with disabilities in Germany are never consistently gendered. In the Federal Participation Report, which is published every four years, some areas, e.g. gainful employment, show data separated by gender. In many areas, gender-differentiated figures are missing. Age is often recorded as an additional category, but other characteristics are rarely included. In some cases, there are statements about disabled people with refugee or migration experiences. However, these are also not gendered. Characteristics such as sexual orientation or statements beyond the binary gender are not recorded.

In equality policy, information on the category of disability is often missing (see below, 'Lack of intersectionality in the context of experiences of violence').

Participation of non-governmental organisations in the context of women and girls with disabilities

At the federal level, Weibernetz is the only disabled people organisation (DPO) for women with various disabilities that works across a range of issues relating to gender equality and disability policy. At the state level, there are 12 Länder networks of disabled women in a total of 16 Länder in Germany to represent the interests and needs of women and girls with disabilities.

All Länder networks are members of Weibernetz. Some of them also offer counselling, empowerment and exchange services.

Most DPO networks are funded on a project or annually basis, depending on the budgetary situation of the federal states. As a nationwide interest group, Weibernetz has been receiving project funding for three years since 2003 for each project period, with 1.5 positions for content-related work. Only three Länder networks have a fixed budget, and some networks operate solely on a voluntary basis.

This means that it is not possible to guarantee permanent and continuous representation of interests in all areas where cooperation would be necessary. Nor can the necessary intersectional perspective beyond gender and disability be guaranteed with the limited resources available. In some cases, there are or have been temporary projects aimed at women with disabilities and refugee or migration experiences, or services for lesbians with disabilities.

Since 2019, there has also been another nationwide interest group, the Federal Network of Women's Representatives in Institutions. The network represents the interests of women who live in residential institutions (special forms of housing) or work in sheltered workshops for people with disabilities and creates and promotes networking among the elected women's representatives of the institutions. The network is financed by the operators of the sheltered workshops. At the state level, Länder working groups of women's representatives are currently being established.

In autumn 2025, a nationwide DPO of deaf women will be founded, which will also represent deaf lesbians, intersex, non-binary, trans* and asexual persons (FLINTA*).

In addition, there are representatives of women with disabilities or chronic illnesses in self-help organisations, which also works on a project basis.

The inclusion of all groups in political processes relating to equality and disability policy at federal and Länder level is not guaranteed and, as described above, could not be achieved in terms of personal due to insufficient funding – with consequences for the visibility and consideration of intersectionality.

Experiences of discrimination by ...

... lesbians with disabilities

We know from experience reports that lesbians with disabilities, especially those in situations of dependency, live with great concerns about lesbian- or queer-hostile violence, possibly combined with withholding services. This applies for example in assistance and care situations both in their own homes and in institutions or hospitals, as well as transport services and other service providers.

In Germany, by now there are good examples of best practice in the field of care with sensitive care services, care homes for the elderly, etc. for LGBTIQ+ people (see <https://www.queer-pflege.de/>).

Everyone in the LGBTIQ+ community is familiar with the fear of sexism and ableism combined with queerphobia. In particular, there are demands for the right to choose assistance and care providers and LGBTIQ+ friendly services and facilities (including services for older people).

... women and girls with disabilities who live or work in institutions

In Germany, there are still sheltered workshops and residential institutions that serve as special structures for people with disabilities. Residential institutions are particularly common for people with learning difficulties and complex disabilities. People with mental or psychological disabilities are also increasingly working in sheltered workshops

The UN CRPD fundamentally stipulates that a self-determined life away from any special arrangements must be a priority. Instead, companies in Germany can continue to pay a compensatory levy if they do not employ people with disabilities. Among other things, parts of this compensatory money can be used to finance sheltered workshops and contributes to the preservation of these special arrangements.

Women and girls with disabilities who live and work in institutions are particularly likely to experience discrimination on the basis of their disability and gender. They are only allowed to live with their own children in specialised institutions. Many women report that they have not received adequate sex education. At the same time, the three-month contraceptive injection is often prescribed to them. They rarely have the opportunity to visit women's counselling centres or similar facilities outside the institution.

The high incidence and impact of sexual harassment and violence in institutions is confirmed by a study from 2024 (BMAS 2024). More than 25% of persons with disabilities working in sheltered workshop have experienced sexual harassment in the workplace in the last three years, women with disabilities experiencing it more than twice as often as men. Networking with external counselling and support services was rated as low in all areas examined.

In outpatient and inpatient care settings, men are more frequently affected by physical violence, while women are much more frequently affected by sexual harassment, psychological violence and sexualised violence.

In social settings in particular, women with disabilities are significantly more likely to be affected by psychological violence from their partners.

Two relatively new laws in the field of disability policy take into account the intersections of disability and gender: since 2017, women with disabilities must be elected as women's representatives in sheltered workshops. They have co-determination rights on equality and protection against violence in institutions and offer counselling for their colleagues as well as empowerment courses.

In 2021, § 37a of SGB 9 stipulated that institutions and services must have violence protection concepts in place. The law recognises that women and girls with disabilities are particularly vulnerable to violence and must be protected. However, there is a lack of minimum standards, e.g. for the participatory development of the concepts. Intersectional aspects such as gender-differentiated, age-differentiated, culturally sensitive protection, etc. are also not specified. Furthermore, not all Länder in Germany have sanctions in place for failure to provide appropriate concepts.

Lack of intersectionality...

... in the context of experiences of violence

To date, there has been no study in Germany that depicts the intersectionality of violence against women; one is currently being prepared.

The first representative study on violence against women, conducted in 2004, did not include data on violence against women with disabilities. Following criticism from NGOs, a study on the living situations and stresses of women with disabilities was published in 2012 (Schröttle et al 2012). This study clearly shows, that women with various disabilities are exposed to multiple forms of discrimination and all forms of violence, but are often inadequately protected from physical, sexual and psychological violence.

The high risk of being affected by violence in the course of their lives is significantly higher for women and girls with disabilities than for women without disabilities in the average population and also for men with disabilities in similar living conditions. The women surveyed experienced sexualised violence two to three times more often. Deaf women are the most affected by physical and sexual violence – 75% of deaf women have experienced physical violence since the age of 16, 43% have been affected by sexualised violence in adulthood and 84% by psychological violence.

Blind, deaf and severely physically and multiply disabled women are particularly likely to experience direct discrimination by individuals or institutions – this includes not being taken seriously, harassment, patronising behaviour, boundary violations, discrimination at work and in public, or unpleasant and unauthorised touching and staring.

Women with disabilities often want more opportunities to strengthen their self-confidence, such as self-defence courses. Although women with disabilities in Germany have been entitled to these courses since 2003 under § 64 of the SGB 9, it is extremely difficult to take advantage of them. There are no nationwide programmes. They are rarely designed to meet different needs and trainers are rarely trained to offer courses for different disabilities (for deaf or blind women/girls, as well as for women with learning difficulties in easy to read versions).

... in the context of protection against violence

There are two laws in Germany for the protection of women against violence.

The Protection Against Violence Act (GewSchG) stipulates, among other things, that the perpetrator of violence must leave the shared home upon request (in accordance with § 2 GewSchG). However, there are no specific provisions for women with disabilities who live with a violent perpetrator who also provides assistance or care for her. The police's right to issue a restraining order under the GewSchG is difficult to implement in this situation because there are no provisions for finding replacement assistance or care at short notice. In practice, violent partners often remain in the home so as not to leave the woman alone, precisely because she is dependent on support.

The same thing happens in institutions for disabled people. Since it is not clear whether the right of expulsion also applies in institutions. For years, interest groups representing disabled women have been demanding that this right of expulsion must also apply to facilities for disabled people!

The Violence Assistance Act (GewHG) came into force in 2025. It takes gender and disability into account. The law stipulates, that women will have a legal right to protection from violence from 2032 onwards. By then, there should be sufficient women's shelters and women's counselling centres available nationwide to meet demand. Accessibility is not mandatory, but attention should be paid to it. However, an obligation is urgently needed in Germany, as only about 10% of women's shelters are even close to being accessible.

In addition, at the end of 2024, the Federal Government presented a violence protection strategy for the implementation of the Istanbul Convention, which mentions intersectionality in its description of objectives (BMFSFJ 2025). However, the specific measures of the strategy include only a few projects that address, for example, women and girls with disabilities or women with a migration background.

By 2024, the Federal Government had implemented a comprehensive federal investment programme (www.gemeinsam-gegen-gewalt-an-frauen.de) worth €90 million, which, among other things, promoted the barrier-free expansion of women's counselling centres and women's shelters. The programme clearly shows that - if money is invested in support structures - the nationwide expansion of accessible services accelerates.

... in the context of healthcare

In addition to fully accessible medical practices with, for example accessible toilets, doctors also lack adequately remunerated time for the significantly greater effort involved in treatments for disabled women and girls. Women in wheelchairs often report that there are no hoists and they cannot even get onto the treatment chair without one. In gynaecological care in particular, there is a massive medical undersupply in Germany as a result of a huge lack of accessibility, inter alia because women are afraid of the visit and the related discriminations.

There are major gaps in the knowledge and awareness of healthcare professionals in the area of gender and disabilities, so that discrimination is often inevitable due to ignorance and uncertainty. For example, women with spinal cord injuries report that they are usually recommended to have a caesarean section. In the case of natural childbirth, there is often a lack of knowledge about how contractions manifest in a woman with a spinal cord injury during labour.

Accordingly, healthcare workers must receive adequate training in the treatment of women and girls with disabilities, including sexual and reproductive health. Treatments and procedures should be based on the informed consent of women with disabilities. Furthermore, the mandatory expansion of accessible medical practices and clinics must become a top priority, and they should only be permitted to open if they fulfil all accessibility criteria.

... in the context of sexual and reproductive self-determination

Girls and women with disabilities experience widespread discrimination when it comes to exercising their sexual and reproductive rights. The desire to pregnancy, childbirth, keeping their children and self-determined sexuality are often particularly difficult for them to achieve.

This is especially true for women with learning difficulties. They are still often not trusted to become good mothers and being a good role model for their child. According to one study, up to 80% of women/couples living in outpatient or inpatient residential institutions are childless (BMAS 2024).

Legally, since 2017, parents with learning difficulties have had a legal right to assistance for parents or so-called accompanied parenting specifically for parents with learning difficulties (according to § 78 SGB IX). In reality it is difficult to obtain this support. There are only a few facilities that offer assisted living for parents with learning difficulties, so pregnant women with disabilities often have to move out of their residential institutions because there are no suitable mother-child services available there.

Furthermore, studies show that women with disabilities, especially women with learning difficulties, are sterilised eight times more often than women in the general population (ibid.). Despite the multiple side effects, they are often given long-term contraceptives such as the three-month injection, even though some women are not sexually active at all.

Many women report that they were neither fully informed nor did they give their informed and voluntary consent before deciding on contraception or permanent measures such as sterilisation. Rather, they report having 'agreed' under emotional pressure because they were concerned about not receiving sufficient support or have to move to another city.

In 2023, § 1830 of the Civil Code (BGB) was introduced to tighten the requirements for sterilisation in people who are unable to give consent on their own. So far, there is no data on how this tightening of the law is affecting practice. In 2025, the Federal Ministry of Justice announced a research project to review this situation. Initial results are expected in 2027.

Overall, there is a lack of accessible information material for different disabilities on topics such as sexuality, pregnancy, childbirth, etc. To date, there is only one medical guideline in Germany on pregnancy, childbirth and the postpartum period for women with spinal cord injuries, but none for other disabilities or multiple disabilities.

There is a lack of intersectional studies in both healthcare and reproductive self-determination, particularly in the area of gender sensitivity and disability, such as gender identity, sexual orientation and neurodiversity. The lack of representation due to widespread ableism in all disciplines has a strong negative impact on the health of people with disabilities.

... in the context of poverty and the risk of poverty

Poverty in Germany is primarily a problem for women. Women with disabilities have a significantly higher risk of poverty. Many women with disabilities or chronic illnesses live close to or well below the poverty line.

According to the German government's third participation report from 2021, two-thirds of all women with disabilities work part-time (men 10%) and approximately one-third of all women with a recognised severe disability have a personal income of less than €1,000 without taxes (men with disabilities = 12%; women without disabilities = 14% and men without disabilities = 5%), which significantly increases the risk of poverty in old age.

Just like women without disabilities, disabled women take on care work, which is why a full-time job is not possible at all. If there were a study on the mental load of women with disabilities, it would immediately become clear how high the burden actually is.

Even in sheltered workshops, women with disabilities are far from equal. They earn less money because they often work in so-called female-typical occupations such as laundry, kitchen or cleaning services, which are lower paid, while their male colleagues work in wood or metal processing trades or in the manufacture of individual parts for the automotive industry.

Conclusion

Examples from Germany demonstrate multiple overlapping forms of discrimination based on gender, disability and other characteristics in all areas of life. Although various legal frameworks recognise the special circumstances of women and girls with disabilities and pursue the goal of non-discrimination, most political measures do not have an intersectional effect in practice, even if they stipulate intersectionality in their preamble.

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Beatrice Gómez-Barroso and Martina Puschke

Weibernetz

German network of women, lesbians and girls with disabilities

Samuel-Beckett-Anlage 6, D - 34119 Kassel

martina.puschke@weibernetz.de

beatrice.gomez@weibernetz.de

www.weibernetz.de

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