



**Written statement of opinion by the Austrian
Ombudsman Board to the Committee on Civil
and Political Rights (ICCPR) on the occasion of
the 6th periodic examination**

September 2026

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1. General remarks/Cover page

1. The Austrian Ombudsman Board (AOB) is pleased to submit its contribution to the 6th periodic review of Austria's International Covenant on Civil and Political Rights (ICCPR). This contribution emphasises key areas of concern, with particular attention to the List of Issues and the Concluding Observations. Consequently, this report does not provide a comprehensive analysis of the situation regarding civil and political rights in Austria or a full account of the AOB's work.

2. In line with the Austrian Federal Constitution (B-VG), the AOB continues to carry out its mandate to investigate alleged maladministration of national, regional, and local administration (Art. 148a (1) B-VG) and to protect and promote human rights in line with the Paris Principles and Art. 148a (3) B-VG. Since 2012 the mandate of the AOB broadened with Austria's ratification of the Optional Protocol to the Convention against Torture (OPCAT) and the Convention on the Rights of Persons with Disabilities (CRPD). Consequently, Art. 148a (3) B-VG was amended to include a preventive monitoring mandate. The mandate permits the AOB and its special commissions to visit and inspect places of deprivation of liberty (Art. 4 OPCAT), to monitor organs authorized to exert direct administrative power and coercive measures, such as the police, and to visit institutions for persons with disabilities (Art. 16(3) CRPD). The AOB makes use of this right as often as possible. From the last UPR until the end of 2024, the total number of visits amounted to 2.014. A Human Rights Advisory Council (HRAC) comprised of representatives of NGOs, Federal Ministries and the *Laender* (provinces) supports the AOB as a consultative body.

3. In 2017, the constitutional provision "Pensions for Victims of Children's Home Act" further expanded the AOB's mandate. An independent Pension Commission was set up within the AOB to establish a pension for persons who suffered from violence in a home operated by the Federal Government, the *Laender*, or the church (Art. 15 Pensions for Victims of Children's Homes Act).

4. Since June 2026, the AOB also acts as a monitoring mechanism within the framework of the Common European Asylum System (CEAS) to ensure compliance with fundamental and human rights during screening and asylum border procedures.

5. Since 2009, the AOB hosts the General Secretariat of the International Ombudsman Institute, the only global organisation for ombudsman institutions. It currently has around 210 members in over 100 different countries.

6. The AOB places high value on its collaboration with the United Nations and other international organizations, and seeks exchange with fellow NHRI and NPM. In its role as A-accredited NHRI, the AOB actively engages with the UN Treaty Bodies. For example, in February 2024 a member of the AOB presented the AOB's shadow report at a private hearing with the Permanent Representatives in Geneva. Moreover, the AOB consistently answers to calls of input that concern its work. Accordingly, the AOB drafted two statements on the implementation of UN Res.75/186 on the role of Ombudsman and mediator institutions in the promotion and protection of human rights in 2022 and Res. 78/204 on NHRI in 2025. In the reporting period, the AOB followed eight information requests of the OHCHR's NIRMS section.

7. In addition, the AOB has various ongoing initiatives to promote and protect human rights. For example, the AOB provides human rights training for prospect prison guards and police officers. The compulsory training consists of lectures on the application of human rights and the preventive monitoring tasks of the AOB. In 2025, the AOB held 32 classes of basic police training and taught 11 units of human rights training to prison officers.¹

¹ Austrian Ombudsman Board, 'Promotion and Protection of Human Rights', (2025) p. 16 < [Annual Report 2025 on the activities of the Austrian National Preventive Mechanism \(NPM\)](#) >

2. Compliance with the Paris Principles

Relates to Para. 3 LOIPR / Para. 9–10 Concluding Observations

8. In April 2022, the AOB was re-accredited by GANHRI and obtained A-status.

9. The AOB is an independent organ. Art. 148a (6) of the Austrian Federal Constitution (B-VG) safeguards the independence of the AOB. The three Ombudspersons are elected by parliament to represent the AOB independently and impartially. The members of the AOB need to have knowledge of the AOB and the functioning of public administration and human rights. Each Ombudsperson has a fixed tenure of six years that cannot be revoked (Art. 148g (1) B-VG). Re-election is possible once. The Constitutional Court can only decide on the loss of office in the event of a violation of the law (Art. 141 (e) B-VG).

10. To increase the transparency of the selection and appointment process for the AOB, the government programme of the government formed in 2025 includes a commitment to introduce mandatory hearings for nominated Ombudspersons and to examine the possibility of reforming the parliamentary appointment procedure, without amending the Federal Constitutional Law.²

11. Furthermore, the AOB continues to collaborate with CSOs on a regular basis. The AOB organises an annual NGO forum to bring together CSOs and provide a platform for the exchange on current issues. After each forum, the AOB publishes a conference transcript on its website.³ With the NGO Sounding Board, the AOB maintains less formal contact with representatives of NGOs. The Sounding Board consists of approximately 10 to 15 NGOs that meet quarterly to explore potential overlaps in their work. The aim is to build or strengthen alliances between institutions, for example to cooperate in press relations.

3. Fragmented protection against discrimination

Relates to Art. 2 and 26 ICCPR / Para. 4 LOIPR / Para. 11–12 Concluding Observations

12. There is no uniform protection against discrimination in Austria, but rather different standards of protection for different grounds of discrimination and different areas of life, for which different bodies are

² [Government Programme 2025–2029](#), p. 135.

³ Kindly consult here for the publications: Austrian Ombudsman Board, ‘NGO Forum’ <[Volksanwaltschaft - NGO Forum - Conference proceedings](#)>

competent according to different legal bases. The AOB and many other bodies (e.g. the European Commission against Racism and Intolerance (ECRI)⁴ and the UN Special Rapporteur on Racism⁵) have long criticised the fact that this fragmentation in equal treatment law often leads to legal uncertainty and makes access to the law more difficult. It is therefore even more important that the competent bodies apply the existing protection against discrimination correctly and in full.⁶

- The AOB recommends a 'levelling-up' of rights for a uniform level of protection for all vulnerable groups in all areas of life.

4. Care for prisoners with psychosocial and intellectual disabilities

Relates to Art. 7 and 10 ICCPR / Para. 12 LOIPR / Para. 23–24 Concluding Observations

13. In the penitentiary system, the shortage of specialist psychiatric staff leads to significant constraints and problems. The number of prisoners who require specific treatment and care due to their mental health is rising steadily. However, the needs of these individuals cannot be adequately met when positions for specialised staff remain vacant because no suitable candidates apply. The reasons for this include unattractive working conditions and salaries in the public service, which cannot keep pace with pay levels in the private sector.

14. Furthermore, due to the lack of capacity psychiatric departments in hospitals are often reluctant to admit inmates. In addition, if an inmate is admitted to a psychiatric department in a hospital, the correctional institution must provide the necessary security by seconding staff to the hospital despite the existing shortage of staff in the correctional facility. As a result, persons with psychosocial disabilities often remain in correctional institutions, where only limited care is available. Inmates requiring inpatient psychiatric treatment cannot be adequately cared for in a prison setting, which is inconsistent with international human rights standards. Even in psychiatric departments of hospitals, there is often a shortage of specifically trained staff. Moreover, the physical layout of the facilities is not suitable for accommodating prisoners who require supervision. Although the Federal Ministry of Justice recognises the

⁴ European Commission Against Racism and Intolerance (ECRI), 'Report on Austria 2020' p. 7. <[48802c35e0](#)>

⁵ Ashwini K.P., 'Report of the Special Rapporteur on contemporary forms of racism, racial discrimination, xenophobia and related intolerance' (2026) A/HRC/62/55/Add.1, para. 10-11 and 69

⁶ Austrian Ombudsman Board, 'Monitoring Public Administration', (2024) p. 41 <[Annual Report of the Austrian Ombudsman Board to the National Council and the Federal Council 2024 - Monitoring Public Administration](#)>

need to expand forensic psychiatric services, the necessary resources are lacking.⁷ The seriousness of the situation is also evident from the numbers of in correctional institutions. These have been rising for years. From 2020 to 2025, a total of 60 inmates committed suicide. During this period, there were also 235 suicides attempts. In the period from 01.01.-26.08. alone, 33 suicide attempts and 8 suicides were reported to the AOB, which is already more than in the entire previous year.⁸

15. In March 2026, the AOB published a special report⁹ on the precarious situation of inmates with psychosocial and/or intellectual disabilities.¹⁰ In June 2026, a commission of experts set up by the government presented 78 recommendations on the penitentiary system, many of which coincide with the recommendations that the AOB has been giving for years. It remains to be seen whether the recommendations will be implemented.

- Appropriate psychiatric care must be ensured for all detainees.
- Long waiting times for treatment are incompatible with the requirement to safeguard prisoners' physical and mental health.
- Persons placed in correctional facilities as well as forensic institutions who have an urgent need for inpatient psychiatric treatment should not be held in specially secured cells on a long-term or recurring basis due to the chronic shortage of beds in psychiatric departments.
- If the facility itself is unable to provide medical psychiatric care, it must be ensured that public medical facilities fulfil their legal obligation to admit and treat detainees with psychosocial disabilities.

5. Discrepancy between allegations of misconduct in correctional institutions and convictions

Relates to Art. 2, 7, and 10 ICCPR / Para. 12 LOIPR / Para. 21–22 Concluding Observations

⁷ Austrian Ombudsman Board, 'Promotion and Protection of Human Rights', (2021) pp. 136-137 < [Annual Reprt of the Austrian Ombudsman Board to the National Council and the Federal Council 2021 - Protection and Promotion of Human Rights](#)>, Austrian Ombudsman Board, 'Promotion and Protection of Human Rights', (2024) pp. 161-163 <[volksanwaltschaft.gv.at/fileadmin/user_upload/Downloads/Berichte/ENG_Berichte/Annual_Report_2024_-_Activities_of_the_NPM_bf.pdf](#)>, Austrian Ombudsman Board, 'Written Submission of the Austrian Ombudsman Board to the Committee against Torture on the Occasion of the 7th Periodic Report of Austria Concerning the Implementation of the Convention Against Torture', (2024) p.3 <[https://tbinternet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolNo=INT%2FCAT%2FNHS%2FAUT%2F57968&Lang=en](#)>

⁸ [Volksanwältin Gaby Schwarz: Schon jetzt so viele Suizide in Haft wie im gesamten Vorjahr](#)

⁹ [Special Report of the Austrian Ombudsman Board 2026 – People with mental health conditions: Monitoring the care situation in the prison system](#)

¹⁰ [Volksanwaltschaft - Ombudsperson Gaby Schwarz presents focus report: Care for mentally ill prisoners is precarious!](#)

16. For years now, adolescents have been complaining about physical assaults by staff from other departments in the juvenile sections of the Vienna-Josefstadt correctional institution. The adolescents usually refrain from reporting these incidents for fear of reprisals. According to reports received by the AOB in 2025, the accounts ranged from degrading treatment – for instance, an adolescent was allegedly forced to kneel in front of staff and suck his thumb – to physical abuse, such as slaps and headbutts. Without precise details of individual cases, it is difficult to take countermeasures. The numerous observations were forwarded to the Federal Ministry of Justice.

17. The Federal Ministry of Justice did not consider awareness measures for staff an appropriate approach if the perpetrators were not identified. It therefore requested the Vienna-Josefstadt correctional institution to hold an information session for adolescent detainees and to develop an adequate complaints procedure together with the adolescent detainees. This event took place in October 2025.

18. An information sheet was drawn up together with the adolescents. It sets out what treatment is appropriate within the correctional institution and what conduct is not permitted. Furthermore, the information also contains good practise guidelines on how adolescents can take action against inappropriate behaviour by staff, an explanation of how a complaint is handled, and a reference to the anonymous complaints box.¹¹

- Inhumane and degrading behaviour, as well as physical assaults against detainees, must be prevented.

6. Treatment of persons in non-traditional places of deprivation of liberty

Relates to Articles 2, 7, and 10 ICCPR / in part Para. 12 LOIPR

19. In the course of its monitoring activities as NPM in non-traditional places of deprivation of liberty, the AOB has repeatedly identified inadequate staffing levels and insufficiently trained personnel. As a result, people who are dependent on institutional care do not receive the individual support and attention they need to be able to exercise their rights effectively. This may, in particular, affect their right to equal

¹¹ n(1) p. 156

treatment and respect for their dignity, as well as their right to protection from inhuman treatment in cases of avoidable physical or psychological suffering.

20. Children and adolescents placed in institutional care away from their families are particularly dependent on others for the effective exercise of their rights and for their safety and protection. The institution becomes the centre of their vital interests and must be a safe space that offers protection from violations of personal boundaries and violence. However, during its monitoring visits, the AOB observed that only 16 per cent of the facilities visited provided such a safe space. A lack of qualified staff, high workloads and staff turnover mean that children and adolescents do not receive sufficient individual support and care. Therefore, stable relationships can hardly be established.

21. To ensure a safe space for children and adolescents, uniform standards must be established. However, these are currently lacking because child and youth welfare services fall within the competence of the *Laender*. As a result, the AOB observed significant regional differences in staffing ratios, the size of the facilities and training requirements. Children and adolescents placed in care are entitled, like all children, to a loving, stable, and safe environment in which their rights and well-being are protected. An agreement under Article 15a of the Austrian Federal Constitution between the Federal Government and the *Laender* intends to ensure that child and youth welfare services are developed in a uniform manner throughout Austria and expressly refers to existing minimum standards.

22. In contrast, however, the Austrian Federal Constitutional Law on Children's Rights and the United Nations Convention on the Rights of the Child (UNCRC) guarantee every child the best possible development and, if they cannot live with their family, special protection by the State. Mere minimum standards do not fulfil these obligations. To date, there have been no nationwide efforts to develop a uniform federal framework with the involvement of civil society and the AOB. There remains a lack of both a nationally uniform quality framework consistently aligned with children's rights and sufficient, forward-looking budgeting for child and youth welfare services. Without these two important factors, however, support based on professional standards cannot be implemented due to a lack of resources.

23. Particularly serious disparities exist in the placement of unaccompanied minor refugees (UMR). Due to lower daily rates compared with those applicable to other children in care, there are fewer staff and lower staffing ratios. As a result, UMR do not receive the same support and individual assistance as

other children in care. Yet, traumatized minors, in particular, require small group settings and sufficient staffing to process their experiences and develop stable relationships.¹²

24. Older persons, too, depend on adequately trained staff who are able to recognise and respond to their individual needs. Around 80 per cent of older persons in facilities suffer from pain, although many are unable to express their pain or choose not to because they assume that pain is normal in old age. People with cognitive disabilities, such as dementia, in particular, rely on regular pain assessment by trained staff so that they can lead a dignified life.

25. The AOB's monitoring visits revealed that one in five facilities did not use any pain assessment tools. In 40 per cent of the facilities visited, the nature of the pain was not recorded. According to care staff, this is due to a lack of time, a lack of expertise or language barriers.¹³ Unrecognised and untreated pain can lead to depression and sleep disorders and thereby undermine the right to protection from inhuman treatment and respect for dignity.

26. Many federal and state laws, regulations and directives are still not in line with the UNCRPD and thus hinder people with disabilities from leading self-determined lives. There is an urgent need for a standardised, needs-based provision of personal assistance across the country, regardless of the type of disability, age or place of residence. Inclusion, as defined by the UNCRPD, obliges the federal government, the federal states, and local authorities to create the framework conditions that enable all people to participate on an equal footing. There is still a long way for people with disabilities to being automatically included in all areas of life.

27. Numerous complaints lodged with the AOB show that exclusion begins in early childhood and can continue into old age because individually tailored support models are not available. Poverty amongst people with disabilities and their families, coupled with a lack of freedom of choice, remains one of the main causes of institutionalisation. Around 28.000 people with disabilities in Austria work in workshops or day centres and receive no wages, merely a small allowance. Consistent deinstitutionalisation processes, aimed at ending all forms of institutionalisation, isolation and segregation of people with disabilities in

¹² [PRESS CONFERENCE – Monitoring priority: Children/adolescents: The facility as a safe space 16 April 2026](#)

¹³ [PG – Monitoring priority: Sexual self-determination for persons with disabilities 22 February 2024](#)

both the private and public sectors, have not yet been established. Only a few ‘pilot projects’ point in the right direction.

28. People with disabilities living in care homes are dependent on appropriately trained staff to enable them to realise their full potential and to ensure they do not suffer violence. In practice, however, they are often confronted with barriers and taboos. In 2023, the UN Committee on the Rights of Persons with Disabilities (UNCRPD) emphasised the importance of sex education concepts for sexual self-determination.¹⁴

29. Nevertheless, almost a third of the facilities visited by the AOB did not have a sex education concept. This means that there are no written rules on the topics of sexuality, partnership and protection from sexual violence. In many cases, facilities had developed sex education concepts, but the management and teams on site were not aware of it. Furthermore, the AOB’s findings showed that, even if a sex education concept was available, it was not always suitable for the institution in question. Sex education and an open and appropriate approach to love, relationships, sexuality and physicality are essential for people with disabilities to be able to make informed decisions about their sexual preferences, set boundaries and recognise behaviour that crosses those boundaries.¹⁵

Child and youth welfare services

- Further harmonisation and development of the *Laender’s* quality standards for the socio-pedagogical support of children and adolescents must be pursued nationwide and ensured through appropriate budgeting.
- The staffing ratio must be chosen in a way to ensure there is sufficient time available to address all the minors’ needs.
- If staff lack methodological skills, training must be undertaken promptly.
- Staff turnover must be avoided at all costs by the facilities, including through good working conditions, so that relationships are not disrupted.
- The significantly poorer conditions of care for unaccompanied minor refugees can only be compensated for by increased resources and an alignment of daily rates with those for socio-pedagogical shared accommodation.
- The currently permitted group sizes in facilities for unaccompanied minor refugees encourage negative dynamics of violence and must be reduced. Staff should be trained on specific issues regarding this group.

¹⁴ Committee on the Rights of Persons with Disabilities, ‘Concluding observations on the combined second and third periodic reports of Austria**’, (CRPD)/C/AUT/CO/2-3* (2023) para. 41–42

<internet.ohchr.org/_layouts/15/treatybodyexternal/Download.aspx?symbolno=CRPD%2FC%2FAUT%2FCO%2F2-3&Lang=en>

¹⁵ Austrian Ombudsman Board, ‘Promotion and Protection of Human Rights’, (2023) pp. 109-112 <[Annual Report 2023 - Protection & Promotion of Human Rights](#)>

Retirement and nursing homes

- Terminally ill patients are also holders of non-negotiable fundamental rights. From those rights derives the obligation to protect and fulfil the provision of professional palliative care at the end of life.
- In nursing and care homes, the necessary structures must be put in place to ensure comprehensive, high-quality pain management and palliative care.
- Due to the important role of nursing staff in pain management, regular training (further education and advanced training) is absolutely essential. It should be widely promoted.
- Routine screening should take place on admission to the care home, thereafter at least every four weeks, in the event of a change in medical status, and before, during and after any pain management intervention (medicinal and/or non-medicinal).

Institutions and facilities for persons with disabilities

- People with disabilities must have equal, barrier-free access to essential public services (such as housing, transport, healthcare, education, etc.), must be supported in accessing training and choosing a career, and must be able to participate in political and public life as well as in cultural and community life. A range of personal assistance services tailored to individual needs must be developed nationwide in accordance with the same criteria.
- Each facility should develop a tailor-made sex education concept through a participatory process involving both clients and staff.
- These programmes must be put into practice. Internal training sessions and regular team meetings should take place. The topic should also be made a compulsory part of the induction phase.
- Information and sex education protect against sexual violence and are essential for sexual self-determination.
- Persons with disabilities must be provided with sufficient and appropriate information on topics such as sexuality, love, partnership and relationships, drawing on external experts where necessary.

7. Gender-Based Violence

Relates to Art. 2, 3, 6(1) and 26 ICCPR / Para. 8 LOIPR

30. The number of femicides in Austria remains high. In 2026 alone, 16 women have been victims of femicide (as at 20 August 2026).¹⁶ Around three-quarters of murders of women are committed by current or former partners. There are not enough shelters for women affected by domestic violence. While women in Vienna are not turned down by shelters, the situation in other *Laender* – particularly in rural areas – is considerably worse. Placing women affected by violence on waiting lists is unacceptable. It jeopardises the person's right to life and, if a child is involved, it endangers the child's welfare.

¹⁶ [Association of Autonomous Austrian Women's Shelters – Further statistics](#)

31. For women with disabilities the access to shelters is particularly challenging starting with the fact that many shelters are not barrier free. Furthermore, many facilities are not adequately equipped to meet the needs of women with psychosocial disabilities or substance abuse problems. The AOB had already pointed out in 2023 that women with disabilities, as well as women belonging to minority groups, are at increased risk of gender-based violence.¹⁷ In accordance with Article 4(3) of the Istanbul Convention, which Austria has ratified, the AOB recommends the adoption of specific protective measures for women facing multiple and intersecting forms of discrimination. These include women from national, ethnic and sexual minorities, migrant women, asylum seekers and refugees, as well as women with substance abuse problems or disabilities.

32. In November 2025, the government presented its first National Action Plan (NAP) setting out specific measures for the prevention of violence.¹⁸ The NAP was developed in close collaboration with all government departments, representatives of civil society, academics and support organisations for women and girls affected by violence. Chapter eight of the NAP deals with violence prevention measures for women facing multiple forms of discrimination. It is essential that protection against violence is not neglected even after a separation, and that it explicitly includes family courts, proceedings concerning custody and access rights, and social and economic safeguards for single mothers.

- The AOB recommends implementing special protection measures for women who are subject to multiple forms of discrimination or face higher risks of poverty – among them single mothers, women from national, ethnic and sexual minorities, migrant women, asylum-seekers and refugees, as well as women with substance abuse problems or disabilities.

8. Hate speech and racism

Relates to Art. 2, 19, 20, and 26 ICCPR / Para. 5 LOIPR / Para. 15–16 Concluding Observations

33. As the National Human Rights Institution, the AOB observes developments in Austria involving the increasing use of exclusionary rhetoric and the growing polarization of public discourse with concern. The visit by the UN Special Rapporteur¹⁹ in 2025 and the monitoring visit by ECRI²⁰ painted a similar picture. The Special Rapporteur observed that widespread and deep-rooted racism exists in Austria. This is also

¹⁷ Austrian Ombudsman Board, 'Promotion and Protection of Human Rights', (2023) p. 104 <[Annual Report 2023 - Protection & Promotion of Human Rights](#)>

¹⁸ 'National Action Plan to Combat Violence against Women and Girls 2025–2029' <https://www.bmfwf.gv.at/frauen-und-gleichstellung/nap_gegen_gewalt_an_frauen.html>

¹⁹ Ashwini K.P., 'Report of the Special Rapporteur on contemporary forms of racism, racial discrimination, xenophobia and related intolerance' (2026) A/HRC/62/55/Add.1, para. 45

²⁰ (n5) para. 12–14

reflected in political discourse. The tone of parliamentary debates is becoming increasingly acrimonious. This is also evident in the high number of calls to order. These particularly frequently concerned Members of Parliament from the right-wing party.²¹

9. Intersex children

Relates to Art. 7, 17, 24, and 26 ICCPR / Para. 10 LOIPR / Para. 15–16 Concluding Observations

34. According to estimates, up to 30 children are born each year in Austria with ambiguous gender. Intersex people criticise the fact that medical practice is still geared towards the early surgical removal of ‘disturbing’ sexual characteristics, whilst the lives of intersex children are rarely at risk requiring immediate treatment. Austria still does not have a clear ban on operations that are not medically necessary. Although a working group was set up with the participation of intersex people, a concrete draft law has not been finalised. The AOB takes the view that the protection of intersex people and their families through appropriate legislation that recognises diversity and inclusion is long overdue.

35. Furthermore, the AOB regards non-medicalised, psychosocial counselling as essential for preventing invasive and irreversible sex reassignment surgery on intersex infants and children. Parents usually give their consent to the operation out of fear of stigmatisation and prejudice against their child. The lack of counselling options for parents of intersex children can be extremely harmful and even fatal. The life stories of intersex children show that sex reassignment surgery is often perceived as a violation of their physical integrity or as mutilation. This is because they have been deprived of the opportunity to develop their gender identity in a self-determined manner. Consequently, intersex people experience psychological distress and face problems relating to their physical well-being and sex life.

36. The AOB suggests establishing competence centres to provide access to scientifically proven knowledge nationwide. Medical facilities across Austria should be able to contact these centres to ensure specialised and professional care for those affected and their families. The existing outpatient department for sexual development at Vienna General Hospital could serve as a best practice.²²

²¹ [Question-askers, troublemakers, windbags: The National Council's big ranking – Parliament – derStandard.at › Domestic](#)

²² Austrian Ombudsman Board, ‘Monitoring Public Administration’, (2019) p. 62 <[PB-43-Nachprüfend 2019 310320.indd](#)>

- The AOB advocates for legislation banning imposed sex reassignment surgery that is not medically necessary.
- Competence centres should be established to support those affected by providing scientific knowledge.

11. Right to privacy

Relates to Art. 17 ICCPR / Para. 19 LOIPR

37. Article 17 of the ICCPR does not restrict the right to privacy to specific individuals. Consequently, it also applies to persons with psychosocial and/or intellectual disabilities in forensic units in hospitals. Their stays can often last for several years and are fundamentally different from ordinary hospital stays, where patients are discharged as soon as further outpatient treatment is possible. It is therefore essential that forensic units are equipped to accommodate long-term stays and ensure the privacy of persons detained there. Forensic patients in a hospital must not be treated less favourably than patients in a forensic therapeutic centre. A complaint received by the AOB in September 2025 illustrates the problem.

38. A patient detained in a hospital's forensic unit complained about the lack of privacy. She had been detained in the hospital for two years. She was now symptom-free, and her level of danger had been reduced to such an extent that she was due to be transferred to an aftercare facility shortly. Although she had had a partner for two years, an extended visit to the hospital was not possible. Furthermore, there was no room where she could meet up with her children. Meetings were only possible outdoors or in a communal room where the coffee machine was located.

39. The medical management confirmed that there is a lack of suitable visiting facilities. The recommendation to design the visiting rooms child-friendly will be addressed and is to be taken into account when fitting out the facilities in the new building. According to the medical management, there are no facilities for long-term visits at the hospital. Where patients' health permits, their understandable needs are met by granting them day release.

40. The AOB, in its capacity as the NPM, also identified shortcomings in the protection of the privacy of persons detained in correctional facilities in the context of surveillance and monitoring measures. In one correctional institution, the 'greyed out' or 'pixelated' areas on the video surveillance monitors were often partly covering the wrong areas, thereby allowing a view of detainees' private parts whilst they were using the toilet. With regard to body searches, too, the VA found that the two-stage principle was not adequately

ensured in all cases. In some instances, inmates were made to undress completely prior to a rectal examination, as they voluntarily removed all their clothing and were not informed that this was not necessary. The AOB recommended that inmates be explicitly informed of the option to undress in stages. The Federal Ministry of Justice took up this recommendation and raised staff awareness accordingly.

41. Furthermore, the AOB repeatedly observed the display of detainees' health related or sensitive data on cell doors. The public display of this data may constitute degrading treatment and can lead to stigmatisation. Furthermore, this practice expressly contravenes Article 17 of the ICCPR. The AOB was informed that all health-related and other sensitive data has now been removed from the cell doors and that all sections are monitored closely in this regard.²³

- Detainees should be able to receive extended visits.
- Sufficient rooms must be made available for extended visits.
- Rooms for long visits shall facilitate privacy and intimacy.
- Visiting areas should be designed in a family-friendly way, so that visits with children take place in a child-friendly and welcoming atmosphere.
- If the surveillance cameras also cover the sanitary facilities (in specially secured cells in particular), the respective persons should only be shown in a schematic or pixelated form to protect their privacy.
- Health-related or sensitive data of inmates must not be posted on the inmate cell doors.

12. Freedom of expression

Relates to Art. 19 and 20 ICCPR / Para. 22 LOIPR

42. The AOB has observed risks to civil society organisations (CSOs) working to protect human rights. CSOs have repeatedly been put under pressure through public statements on their funding. In 2025, an opposition party submitted a parliamentary inquiry of over 200 pages to various Federal Ministries regarding the funding of several hundred organisations.²⁴ The same party also initiated a parliamentary committee of inquiry to investigate state funding for CSOs. To date, the committee has been unable to identify any misappropriated or 'wasteful' funding to CSOs. Due to national budget cuts, funding for CSOs was also cut. At the start of 2026, it was unclear whether funding from the Federal Government would

²³ (n1) p. 154

²⁴ 2738/J 1 of 227 dated 25 June 2025 (XXVIIIth parliamentary session) ENQUIRY, [imfname_1695774.pdf](#)

continue for an established CSO campaigning against hate speech, racism and discrimination. The case received significant media attention and, ultimately, funding for 2026 was secured.²⁵

13. Participation in public life

Relates to Art. 25 ICCPR / Para. 24 LOIPR

43. The AOB regularly receives complaints about a lack of barrier-free accessibility in almost all areas of life. It is discriminatory and degrading when persons with disabilities have to demand accessibility in order to exercise their rights. A lack of accessibility violates the constitutionally guaranteed right to equal treatment and is also inconsistent with Article 26 of the ICCPR. Barrier-free accessibility is not an additional service, but a fundamental prerequisite for equality, self-determination, and participation in society. The right to self-determination is one of the core elements of the UNCRPD and it requires comprehensive barrier-free accessibility. The complaints received by the AOB highlight the existing structural deficiencies. For example, complaints concerned the lack of accessibility to the Social Services Centre in Wels,²⁶ as well as the difficulty in accessing graves at Cemetery in Stammersdorf following the removal of paths there.²⁷ In the area of public transport, the AOB handles numerous complaints each year due to the lack of accessibility on the Austrian Federal Railways network.²⁸

44. The AOB also observes the lack of accessibility in the area of political participation. Under the 2018 Referendum Act, applications for referendums cannot be submitted electronically. People who, due to their disability, are unable to provide a handwritten signature are thereby disadvantaged without objective justification and restricted in their participation in an important democratic process. The Federal Ministry of the Interior acknowledged the need for change and pointed to the necessity of amending the law. However, no concrete legislative steps have yet been taken.²⁹

²⁵ [ZARA funding: Ministry for Women and Media steps in – news.ORF.at](#)

²⁶ [Volksanwaltschaft - Ombudsperson Gaby Schwarz: Accessibility is not an optional extra, but a duty](#)

²⁷ [Volksanwaltschaft - Ombudswoman Gaby Schwarz: Don't play off biodiversity in cemeteries against accessibility](#)

²⁸ For instance (n6) p. 180

²⁹ Austrian Ombudsman Board, 'Monitoring Public Administration', (2025) p. 166-167 < [Bericht der Volksanwaltschaft an den Nationalrat und an den Bundesrat 2025: Band 1 - Kontrolle der öffentlichen Verwaltung](#) >