

Greece Report NCPI

NCPI Header

COUNTRY

Name of the National AIDS Committee Officer in charge of NCPI submission and who can be contacted for questions, if any:

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Describe the process used for NCPI data gathering and validation:

Organized by the Hellenic Centre for Disease Control and Prevention The Global AIDS response progress reporting 2012 and ECDC questionnaires and other relevant questions were disseminated to the various stakeholders (Ministries, Institutions and NGOs) to be completed. The Hellenic Centre for Disease Control and Prevention (HCDCP) was responsible for collecting indicators data, collating information and developing the narrative report and the NCPIA and part A of the European Supplement to the National Commitments and policy instrument. The NCPI part B and the European supplement to NCPI part B were sent to be completed by members of the civil society.

Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:

Resolved by consensus, though further meetings were organised in order to reach consensus especially for part B of NCPI

Highlight concerns, if any, related to the final NCPI data submitted (such as data quality, potential misinterpretation of questions and the like):

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NCPI - PART A [to be administered to government officials]

Organization	Names/Positions	A.I	A.II	A.III	A.IV	A.V	A.VI
Hellenic Centre for Disease Control and Prevention	Theodore Papadimitriou/ Director	Yes	Yes	Yes	Yes	Yes	Yes

NCPI - PART B [to be administered to civil society organizations, bilateral agencies, and UN organizations]

Organization	Names/Positions	B.I	B.II	B.III	B.IV	B.V
Positive Voice	Marianela Kloka/ Apostolos Kallogiannis/ Nikos Dedes	Yes	Yes	Yes	Yes	Yes
Praksis	Tzanetos Antypas/ Anastasia Kanakari/ Maria Melliou	Yes	Yes	Yes	Yes	Yes
Center for Life	Elena Giamma/ Anna Kavouri	Yes	Yes	Yes	Yes	Yes
ACT UP Hellas	Konstantinos Kampourakis/ C.Botsi	Yes	Yes	Yes	Yes	Yes
HeIMSIC - Hellenic Medical Students' International Committee	Dimitis Stathis/ Konstantinos Kampourakis/Evangelina Dimitrakoulou	Yes	Yes	Yes	Yes	Yes
Greek Hemophilic Society	Jane Pittadaki	Yes	Yes	Yes	Yes	Yes
Greek Helsonki Monitor	Gregory Valianatos	No	No	No	No	No
-	-	No	No	No	No	No
-	-	No	No	No	No	No
-	-	No	No	No	No	No
-	-	No	No	No	No	No

A - I. STRATEGIC PLAN

1. Has the country developed a national multisectoral strategy to respond to HIV?
(Multisectoral strategies should include, but are not limited to, those developed by Ministries such as the ones listed under 1.2):

Yes
IF YES, what was the period covered:

2008-2012
IF YES, briefly describe key developments/modifications between the current national strategy and the prior one.
IF NO or NOT APPLICABLE, briefly explain why.:

1.1 Which government ministries or agencies

Name of government ministries or agencies [write in]:
 Ministry of Health and Social Solidarity

1.2. Which sectors are included in the multisectoral strategy with a specific HIV budget for their activities?

SECTORS

Included in Strategy	Earmarked Budget
Yes	Yes
Yes	Yes
No	No
No	No
No	No
No	No
-	-

Other [write in]:
 migrants, icancertrated, IDU's
IF NO earmarked budget for some or all of the above sectors, explain what funding is used to ensure implementation of their HIV-specific activities?:
 Funding for prevention

1.3. Does the multisectoral strategy address the following key populations, settings and cross-cutting issues?

- Men who have sex with men:**
Yes
- Migrants/mobile populations:**
Yes
- Orphans and other vulnerable children:**
No
- People with disabilities:**
-
- People who inject drugs:**
Yes
- Sex workers:**
Yes
- Transgendered people:**
-
- Women and girls:**
Yes
- Young women/young men:**
Yes
- Other specific vulnerable subpopulations:**
Yes
- Prisons:**
Yes
- Schools:**
Yes
- Workplace:**
No

Addressing stigma and discrimination:

Yes

Gender empowerment and/or gender equality:

Yes

HIV and poverty:

No

Human rights protection:

Yes

Involvement of people living with HIV:

Yes

IF NO, explain how key populations were identified?:

1.4. What are the identified key populations and vulnerable groups for HIV programmes in the country [write in]?:

General Population (Young People), Women, , Men who have Sex with Men, Injecting Drug Users, Migrants, Prisoners, People living with HIV

1.5. Does the multisectoral strategy include an operational plan?: Yes

1.6. Does the multisectoral strategy or operational plan include

a) Formal programme goals?:

Yes

b) Clear targets or milestones?:

Yes

c) Detailed costs for each programmatic area?:

Yes

d) An indication of funding sources to support programme implementation?:

Yes

e) A monitoring and evaluation framework?:

Yes

1.7

1.7. Has the country ensured “full involvement and participation” of civil society in the development of the multisectoral strategy?:

Moderate involvement

IF NO or MODERATE INVOLVEMENT, briefly explain why this was the case:

-

1.8. Has the multisectoral strategy been endorsed by most external development partners (bi-laterals, multi-laterals)?:

Yes

1.9

1.9. Have external development partners aligned and harmonized their HIV-related programmes to the national multisectoral strategy?:

N/A

2. Has the country integrated HIV into its general development plans such as in: (a) National Development Plan; (b) Common Country Assessment / UN Development Assistance Framework; (c) Poverty Reduction Strategy; and (d) sector-wide approach?:

N/A

3. Has the country evaluated the impact of HIV on its socioeconomic development for planning purposes?:

N/A

4. Does the country have a strategy for addressing HIV issues among its national uniformed services (such as military, police, peacekeepers, prison staff, etc)?:

No

5. Has the country followed up on commitments made in the 2011 Political Declaration on HIV/AIDS?:

Yes

5.1. Have the national strategy and national HIV budget been revised accordingly?:

-

5.2. Are there reliable estimates of current needs and of future needs of the number of adults and children requiring antiretroviral therapy?:

Estimates of Current Needs Only

5.3. Is HIV programme coverage being monitored?:

-

5.4. Has the country developed a plan to strengthen health systems?:

-

Please include information as to how this has impacted HIV-related infrastructure, human resources and capacities, and logistical systems to deliver medications:

6. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate strategy planning efforts in the HIV programmes in 2011?:

5

Since 2009, what have been key achievements in this area:

Target prevention campaigns to populations that are at increased risk Scale up of efforts in order to respond to HIV epidemic among IDUs

What challenges remain in this area:

-

A - II. POLITICAL SUPPORT AND LEADERSHIP

1. Do the following high officials speak publicly and favourably about HIV efforts in major domestic forums at least twice a year

A. Government ministers:

Yes

B. Other high officials at sub-national level:

Yes

1.1

(For example, promised more resources to rectify identified weaknesses in the HIV response, spoke of HIV as a human rights issue in a major domestic/international forum, and such activities as visiting an HIV clinic, etc.):

Yes

Briefly describe actions/examples of instances where the head of government or other high officials have demonstrated leadership:

-

2. Does the country have an officially recognized national multisectoral HIV coordination body (i.e., a National HIV Council or equivalent)?:

No

IF NO, briefly explain why not and how HIV programmes are being managed:

AIDS programmes are being managed by the Hellenic Centre for Disease Control and Prevention

2.1. IF YES, does the national multisectoral HIV coordination body

Have terms of reference?:

-

Have active government leadership and participation?:

-

Have an official chair person?:

-

Have a defined membership?:

-

Include civil society representatives?:

-

Include people living with HIV?:

-

Include the private sector?:

-

Strengthen donor coordination to avoid parallel funding and duplication of effort in programming and reporting?:

-

3. Does the country have a mechanism to promote interaction between government, civil society organizations, and the private sector for implementing HIV strategies/programmes?:

Yes

IF YES, briefly describe the main achievements:

The Hellenic Center for Disease Control & Prevention (HCDCP) hosts the Social Dialogue Committee for HIV/AIDS, in which the participation of stakeholders has increased during the past couple of years. This Committee now consists of 11 representatives of various HCDCP departments (7 of which are new members) and 14 NGOs (6 of which are new members), some dealing with HIV/AIDS issues, some representing MSM and/or lesbian women and others supporting refugees, migrants, sex workers, victims of trafficking, IV users etc. A representative from the Hellenic Society for the Study and Control of AIDS just confirmed his participation to the Committee from here onwards. The Committee deals with medical, social, psychological as well as welfare matters related to HIV. There has been increased collaboration in the planning and

implementation of campaigns targeted to young people, MSM, migrants, sex workers, IV users and people with disabilities. A guide for STDs and HIV prevention was created and distributed in a HCDCP campaign at a popular gay festival in Mykonos with the participation of volunteer MSM from NGOs. There is collaboration regarding changing welfare matters, issues concerning discrimination of PLWHIV and recently seropositive prisoners' needs are on the agenda. Workshops relating to HIV issues are planned in collaboration.

What challenges remain in this area:

At a time of scarce resources and increasing needs in Greece, the need for cost effective collaborations is pressing. New seropositive cases are vulnerable in many respects and often have several difficult issues to deal with aside from HIV, such as poverty, addiction, absense of legal documents, homelessness, unemployment etc. Furthermore, the social problems in Greece make more people more at risk for hiv infection as for example Muse is rising. The Social Dialogue for HIV/AIDS Committee should include sex workers, IV users and migrants to participate in the process of planning, implementing and evaluating HIV prevention programmes targeted to them. This would lead to greater acceptance and higher impact of the campaigns to the targeted groups and also it will make services more accessible to the groups who are most in need of them. Due to the financial crisis the private sector as Civil Society could also be more engaged to participate.

4. What percentage of the national HIV budget was spent on activities implemented by civil society in the past year?:

-

5.

Capacity-building:

Yes

Coordination with other implementing partners:

Yes

Information on priority needs:

Yes

Procurement and distribution of medications or other supplies:

-

Technical guidance:

Yes

Other [write in below]:

-

6. Has the country reviewed national policies and laws to determine which, if any, are inconsistent with the National HIV Control policies?:

-

6.1. IF YES, were policies and laws amended to be consistent with the National HIV Control policies?:

-

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the political support for the HIV programme in 2011?:

8

Since 2009, what have been key achievements in this area:

-

What challenges remain in this area:

-

A - III. HUMAN RIGHTS

1.1

People living with HIV:

Yes

Men who have sex with men:

Yes

Migrants/mobile populations:

Yes

Orphans and other vulnerable children:

Yes

People with disabilities:

Yes

People who inject drugs:

Yes

Prison inmates:

Yes

Sex workers:

Yes

Transgendered people:

Yes

Women and girls:

Yes

Young women/young men:

Yes

Other specific vulnerable subpopulations [write in]:

Health Care Personnel, students (education), military- armed forces, employees, tenants (housing, rental residence), family members, members of societies, clubs and organizations

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:

Yes

IF YES to Question 1.1. or 1.2., briefly describe the content of the/laws:

Constitution (art. 1-25). Our country has ratified European Convention of Human Rights, Protocols, a lot of Conventions for Human Rights, all the European law for the protection of human rights as a member of European Union, as much as Law for European Constitution (Law 3114/2005).

Briefly explain what mechanisms are in place to ensure these laws are implemented:

Mechanisms in place to ensure that these laws are implemented are greek courts, Ombudsmann, Hellenic Data Protection Authority, Hellenic Center for Disease Control and Prevention (HCDCP), Ministry of Health and Social Solidarity. We consider the implantation of human rights and civil liberties as satisfactory. Even with the financial crisis i.e., allowances of benefits have been maintained, as much as free access of vulnerable groups to health care services (i.e. Hospitals and Health Centers of NHS, medication).

Briefly comment on the degree to which they are currently implemented:

-

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?:

No

IF YES, for which subpopulations?

People living with HIV:

-

Men who have sex with men:

-

Migrants/mobile populations:

-

Orphans and other vulnerable children:

-

People with disabilities:

-

People who inject drugs :

-

Prison inmates:

-

Sex workers:

-

Transgendered people:

-

Women and girls:

-

Young women/young men:

-

Other specific vulnerable subpopulations [write in below]:

-

Briefly describe the content of these laws, regulations or policies:

There is specific legislation for undocumented migrants (in general they have free access to health care services till age of 18 and for urgent cases, which could be interpreted as all others to have any access to health care services) and uninsured people in Greece that possibly could be obstacles for free access to health care services and medication, but with specific Circulars this access is possible for all.

Briefly comment on how they pose barriers:

-

A - IV. PREVENTION

1. Does the country have a policy or strategy that promotes information, education and communication (IEC) on HIV to the general population?:

Yes

IF YES, what key messages are explicitly promoted?

Abstain from injecting drugs:

No

Avoid commercial sex:

No

Avoid inter-generational sex:

No

Be faithful:

No

Be sexually abstinent:

No

Delay sexual debut:

-

Engage in safe(r) sex:

Yes

Fight against violence against women:

Yes

Greater acceptance and involvement of people living with HIV:

Yes

Greater involvement of men in reproductive health programmes:

-

Know your HIV status:

Yes

Males to get circumcised under medical supervision:

No

Prevent mother-to-child transmission of HIV:

Yes

Promote greater equality between men and women:

Yes

Reduce the number of sexual partners:

No

Use clean needles and syringes:

Yes

Use condoms consistently:

Yes

Other [write in below]:

-

1.2. In the last year, did the country implement an activity or programme to promote accurate reporting on HIV by the media?:

Yes

2. Does the country have a policy or strategy to promote life-skills based HIV education for young people?:

Yes

2.1. Is HIV education part of the curriculum in

Primary schools?:

No

Secondary schools?:

Yes

Teacher training?:

Yes

2.2. Does the strategy include age-appropriate, gender-sensitive sexual and reproductive health elements?:

Yes

2.3. Does the country have an HIV education strategy for out-of-school young people?:

Yes

3. Does the country have a policy or strategy to promote information, education and communication and other preventive health interventions for key or other vulnerable sub-populations?:

Yes

Briefly describe the content of this policy or strategy:

-

3.1. IF YES, which populations and what elements of HIV prevention does the policy/strategy address?

IDU	MSM	Sex workers	Customers of Sex Workers	Prison inmates	Other populations
Yes	Yes	Yes	No	No	migrants
Yes	Yes	Yes	No	No	migrants
Yes	Yes	Yes	No	No	-

Yes	No	No	No	No	-
Yes	Yes	Yes	No	No	migrants
Yes	Yes	Yes	No	No	migrants
Yes	Yes	Yes	No	No	migrants
No	No	No	No	No	-

3.2. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate policy efforts in support of HIV prevention in 2011?:

6

Since 2009, what have been key achievements in this area:

HIV prevention programs for IDUs HIV prevention programs for the general population HIV prevention programs for Men having sex with Men HIV prevention programs for documented undocumented migrants Stronger cooperation with Civil Society through the National Social Dialogue Committee that the HCDCP and several NGOS participate HIV prevention programmes for Secondary Schools and Teachers Health education and HIV/STI's prevention in the Health mobile units of the HCDCP

What challenges remain in this area:

The production and distribution of a new interactive material related to Health Education and HIV/STI's prevention that will be distributed in Secondary Schools all over Greece. (school year 2012-2013). Development of a program for the health promotion of seropositive prisoners is being designed. It will be implemented by the Department of Community Intervention, with the collaboration of NGO Positive Voice.

4. Has the country identified specific needs for HIV prevention programmes?:

Yes

IF YES, how were these specific needs determined?:

The specific needs are identified by epidemiological data and assesment by major stakeholders including governmental agencies (HCDCP, EKTEPN- Greek Reitox focal point, OKANA, KETHEA) and NGOs HCDCP Department of Intervention in the Community identifies as specific needs: The implementation of more HIV prevention programs for IDU's since the increase of HIV positive cases among IDU's raises is 15 times higher compared to 2010 More HIV prevention programmes for sex workers (legal or not) with an extended programmes of individuals using such services. More HIV prevention programmes for the General population and msm More HIV prevention programmes for migrants (documented or undocumented)

4.1. To what extent has HIV prevention been implemented?

Blood safety:

Strongly Agree

Condom promotion:

Strongly Agree

Harm reduction for people who inject drugs:

Agree

HIV prevention for out-of-school young people:

Strongly Agree

HIV prevention in the workplace:

Agree

HIV testing and counseling:

Strongly Agree

IEC on risk reduction:

Agree

IEC on stigma and discrimination reduction:

Strongly Agree

Prevention of mother-to-child transmission of HIV:

Agree

Prevention for people living with HIV:

Strongly Agree

Reproductive health services including sexually transmitted infections prevention and treatment:

Strongly Agree

Risk reduction for intimate partners of key populations:

-

Risk reduction for men who have sex with men:

Strongly Agree

Risk reduction for sex workers:

Agree

School-based HIV education for young people:

Strongly Agree

Universal precautions in health care settings:

Agree

Other[write in]:

-

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in implementation of HIV prevention programmes in 2011?:

6

A - V. TREATMENT, CARE AND SUPPORT

1. Has the country identified the essential elements of a comprehensive package of HIV treatment, care and support services?:

Yes

If YES, Briefly identify the elements and what has been prioritized:

-

Briefly identify how HIV treatment, care and support services are being scaled-up?:

-

1.1. To what extent have the following HIV treatment, care and support services been implemented?

Antiretroviral therapy:

Strongly Agree

ART for TB patients:

Strongly Agree

Cotrimoxazole prophylaxis in people living with HIV:

Strongly Agree

Early infant diagnosis:

Agree

HIV care and support in the workplace (including alternative working arrangements):

-

HIV testing and counselling for people with TB:

Strongly Agree

HIV treatment services in the workplace or treatment referral systems through the workplace:

-

Nutritional care:

-

Paediatric AIDS treatment:

Strongly Agree

Post-delivery ART provision to women:

Strongly Agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):

Strongly Agree

Post-exposure prophylaxis for occupational exposures to HIV:

Strongly Agree

Psychosocial support for people living with HIV and their families:

Strongly Agree

Sexually transmitted infection management:

Strongly Agree

TB infection control in HIV treatment and care facilities:

Strongly Agree

TB preventive therapy for people living with HIV:

Strongly Agree

TB screening for people living with HIV:

Strongly Agree

Treatment of common HIV-related infections:

Strongly Agree

Other [write in]:

-

2. Does the government have a policy or strategy in place to provide social and economic support to people infected/affected by HIV?:

Yes

Please clarify which social and economic support is provided:

According to law all Greek citizens and citizens of EU Member States residing in Greece who are infected by hiv + are entitle a monthly financial allowance Hellenic Centre for Diseases Control and Prevention (HCDCP) provides social support to infected persons. Among other things, HCDCP supports economic and people who have no financial income and do not get any benefit privileged For hiv+ persons who are homeless and destitute the Hellenic Centre for Diseases Control and Prevention has two long hosting shelters.

3. Does the country have a policy or strategy for developing/using generic medications or parallel importing of medications for HIV?:

-

4. Does the country have access to regional procurement and supply management mechanisms for critical commodities, such as antiretroviral therapy medications, condoms, and substitution medications?:

-

5. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care, and support programmes in 2011?:

10

Since 2009, what have been key achievements in this area:

Update of guidelines for the use of antiretroviral treatment in adults and adolescents Guidelines for HIV testing (in process)

Guidelines for prevention of mother to child transmission (in process)

What challenges remain in this area:

-

6. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?:

N/A

7. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2011?:

-

Since 2009, what have been key achievements in this area:

-

What challenges remain in this area:

Comments to question 6 In Greece, the size of the hiv epidemic has not led to a large number of orphans. As a result this group has not been included in the national plan of action for hiv/aids. Isolated cases are handled in cooperation with the state institution for orphans looking for foster families for hiv related orphans.

A - VI. MONITORING AND EVALUATION

1. Does the country have one national Monitoring and Evaluation (M&E) plan for HIV?:

In Progress

Briefly describe any challenges in development or implementation:

The country reports every two years to UNAIDS and Dublin Declaration using indicators provided. For these reports the questionnaires are disseminated to all relevant stakeholders in order to be completed. The Hellenic Centre for Disease Control and Prevention is responsible for collecting the indicator data, collating information and developing the narrative report and the NCPIA and Part A of the European Supplement the National Commitment and policy Instrument. The NCPI part B and the European supplement to NCPI part B are sent to be completed by members of the civil society. Surveys have been organized especial for these reports using unaids questionnaires and information through other behavioural surveys such as EMIS (the European MSM Internet study). Information on indicators about HIV among IDUs is derived from data collected by the Greek Reitox focal point. Data on HIV epidemiology is derived from the national HIV surveillance system . The narrative report, the indicators and the national commitment and policy instrument are uploaded in unaids and in the HCDCP websites. The establishment of a strong national functional Monitoring and Evaluation (M&E) mechanism to oversee the national response remains an urgent challenge that needs to be implemented in close collaboration with relevant stakeholders as well as European and international partners.

Briefly describe what the issues are:

-

2. Does the national Monitoring and Evaluation plan include?

A data collection strategy:

-

A data analysis strategy:

-

A data dissemination and use strategy:

-

A well-defined standardised set of indicators that includes sex and age disaggregation (where appropriate):

-

Guidelines on tools for data collection:

-

3. Is there a budget for implementation of the M&E plan?:

-

4. Is there a functional national M&E Unit?:

-

Briefly describe any obstacles:

-

4.1. Where is the national M&E Unit based?

In the Ministry of Health?:

-

In the National HIV Commission (or equivalent)?:

-

Elsewhere [write in]?:

-

Permanent Staff [Add as many as needed]

POSITION [write in position titles in spaces below] **Fulltime** **Part time** **Since when?**

-

-

-

-

Temporary Staff [Add as many as needed]

POSITION [write in position titles in spaces below] **Fulltime** **Part time** **Since when?**

-

-

-

-

4.3. Are there mechanisms in place to ensure that all key partners submit their M&E data/reports to the M&E Unit for inclusion in the national M&E system?:

-

Briefly describe the data-sharing mechanisms:

-

What are the major challenges in this area:

-

5. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?:

-

6. Is there a central national database with HIV- related data?:

-

6.1. IF YES, does it include information about the content, key populations and geographical coverage of HIV services, as well as their implementing organizations?:

-

6.2. Is there a functional Health Information System?

At national level:

-

At subnational level:

-

IF YES, at what level(s)?:

-

7. Does the country publish an M&E report on HIV , including HIV surveillance data at least once a year?:

-

8. How are M&E data used?

For programme improvement?:

-

In developing / revising the national HIV response?:

-

For resource allocation?:

-

Other [write in]:

-

Briefly provide specific examples of how M&E data are used, and the main challenges, if any:

-

9. In the last year, was training in M&E conducted

At national level?:

-

At subnational level?:

-

At service delivery level including civil society?:

-

9.1. Were other M&E capacity-building activities conducted` other than training?:

-

10. Overall, on a scale of 0 to 10 (where 0 is “Very Poor” and 10 is “Excellent”), how would you rate the HIV-related monitoring and evaluation (M&E) in 2011?:

-
Since 2009, what have been key achievements in this area:

-
What challenges remain in this area:

B - I. CIVIL SOCIETY INVOLVEMENT

1. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?:

2

Comments and examples:

A ministerial decree was issued by the MoH in August 2011, explaining access to ART issues for migrants/refugees and social excluded categories. Withdrawal of the new legislation proposal of the Ministry of Labor concerning the Regulation of Evaluating Disability Rates (KEBA). Elaboration and publication of the Greek results concerning the EMIS survey. Advocacy about access to ART for people living with HIV in prisons. Some NGOs also consider that the establishment of a special unit for pregnant HIV(+) women in 2011 in Athens, was a positive development. However, other NGOs feel that this development may act adversely in strengthening discrimination policies.

2. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) have civil society representatives been involved in the planning and budgeting process for the National Strategic Plan on HIV or for the most current activity plan (e.g. attending planning meetings and reviewing drafts)?:

0

Comments and examples:

Although the National Strategic Plan from the Management of HIV/AIDS developed in 2008 was developed in collaboration with civil society, it was never fully implemented, nor evaluated or budgeted.

3.

a. The national HIV strategy?:

1

b. The national HIV budget?:

0

c. The national HIV reports?:

3

Comments and examples:

There is no national HIV budget.

4.

a. Developing the national M&E plan?:

0

b. Participating in the national M&E committee / working group responsible for coordination of M&E activities?:

:

0

c. Participate in using data for decision-making?:

0

Comments and examples:

There is no national monitoring and evaluation plan for HIV response.

5. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is the civil society sector representation in HIV efforts inclusive of diverse organizations (e.g. organisations and networks of people living with HIV, of sex workers, and faith-based organizations)?:

3

Comments and examples:

There is on-going close collaboration with: National centre of social solidarity (EKKA), National organization against drugs (OKANA / KETHEA), General confederation of labor (GSEE), National Committee of Human rights (EEDA), Greek Ombudsman (Sinigoros tu Politi), Children’s Ombudsman (Sinigoros tu Paidiou), Greek Migrants forum, UNHCR Greece, General Secretary of Youth (Nea genia), IOM, General Secretary of Equity, Police Anti-trafficking Unit.

6. To what extent (on a scale of 0 to 5 where 0 is “Low” and 5 is “High”) is civil society able to access

a. Adequate financial support to implement its HIV activities?:

1

b. Adequate technical support to implement its HIV activities?:

3

Comments and examples:

In general, there has been little financial support as well as technical support, mostly based on human resources joint network, to implement HIV activities. The NGO Doctors of the World receive financial support from the MoH on activities

concerning migrants and HIV. There are two Committees for Social Dialogue, hosted by the Hellenic CDC, with all relevant stakeholders meeting on a monthly basis and contributing to planning and implementation of future HIV-related programmes.

7. What percentage of the following HIV programmes/services is estimated to be provided by civil society?

People living with HIV:

25-50%

Men who have sex with men:

51-75%

People who inject drugs:

25-50%

Sex workers:

<25%

Transgendered people:

<25%

Testing and Counselling:

25-50%

Reduction of Stigma and Discrimination:

51-75%

Clinical services (ART/OI)*:

<25%

Home-based care:

<25%

Programmes for OVC:**

<25%

8. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to increase civil society participation in 2011?:

6

Since 2009, what have been key achievements in this area:

-

What challenges remain in this area:

Prisoners and ART, special unit for women HIV+ (including pregnancy care), targeting MSM, IDUs, Victims of Trafficking . NGOs can play a key role in planning and implementing national HIV strategic plan in order to: reduce new IDUs diagnoses as well as other excluded categories, access to ART for all, access to free and confidential HIV testing, introduce sexual education in schools, combat stigma and discrimination of PLWH.

B - II. POLITICAL SUPPORT AND LEADERSHIP

1. Has the Government, through political and financial support, involved people living with HIV, key populations and/or other vulnerable sub-populations in governmental HIV-policy design and programme implementation?:

No

B - III. HUMAN RIGHTS

1.1.

People living with HIV:

Yes

Men who have sex with men:

Yes

Migrants/mobile populations:

Yes

Orphans and other vulnerable children:

Yes

People with disabilities:

Yes

People who inject drugs:

No

Prison inmates:

No

Sex workers:

No

Transgendered people:

No

Women and girls:

Yes

Young women/young men:

Yes

Other specific vulnerable subpopulations [write in]:

in addition Yes to religious minorities, elderly, trafficking victims

1.2. Does the country have a general (i.e., not specific to HIV-related discrimination) law on non-discrimination?:

Yes

If YES to Question 1.1 or 1.2, briefly describe the contents of these laws:

Implementation of equal treatment despite of racial or national, religious or other beliefs, disability, age, sexual orientation. (3304/2005)

Briefly explain what mechanisms are in place to ensure that these laws are implemented:

Mechanisms: Greek Ombudsman, Personal Data national committee, National committee of human rights, Greek Federation of Labor, General Secretary of gender equality.

Briefly comment on the degree to which they are currently implemented:

Degree: Estimation 40-50%

2. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for key populations and other vulnerable subpopulations?:

Yes

2.1. IF YES, for which sub-populations?**People living with HIV:**

Yes

Men who have sex with men:

Yes

Migrants/mobile populations:

Yes

Orphans and other vulnerable children:

-

People with disabilities:

Yes

People who inject drugs:

Yes

Prison inmates:

Yes

Sex workers:

Yes

Transgendered people:

Yes

Women and girls:

No

Young women/young men:

No

Other specific vulnerable subpopulations [write in]:

citizens of the EU

Briefly describe the content of these laws, regulations or policies:

Criteria for welfare health document: Ministry of Health, decision YA139491/2006. Ministry of Health, decision N. Y4A/OIK93443/2011, people with no national insurance, undocumented migrants. Migrants coming from countries where ART is not available: this could be a solution in many cases but is not implemented, 2955/2001. Citizens of EU in order to have access to ART and to the national health system, should be covered by any insurance company (national or private). In Greece no private insurance company covers HIV+ (Presidential Declaration: 106/2007). Citizens of EU in order to get welfare health document have a limit of 6.000 euros to their annual income (Ministry Decision: 139491/2006). Prisons: bureaucratic problems arise when personal archives are transferred from the Ministry of Health to the Ministry of Justice, which lacks medical perspective.

Briefly comment on how they pose barriers:

-

3. Does the country have a policy, law or regulation to reduce violence against women, including for example, victims of sexual assault or women living with HIV?:

Yes

Briefly describe the content of the policy, law or regulation and the populations included:

There is a law about domestic violence, sexual harassment, unequal labor treatment, but no law specifically for women living with HIV.

4. Is the promotion and protection of human rights explicitly mentioned in any HIV policy or strategy?:

Yes

IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:

Protection of Human rights is mentioned in the national Strategy for HIV/AIDS 2008 – 2012, but this plan was never implemented.

5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, key populations and/or other vulnerable sub-populations?:

Yes

IF YES, briefly describe this mechanism:

Via the Greek Ombudsman

6. Does the country have a policy or strategy of free services for the following?

Provided free-of-charge to all people in the country	Provided free-of-charge to some people in the country	Provided, but only at a cost
-	Yes	-
-	Yes	-
-	Yes	-

If applicable, which populations have been identified as priority, and for which services?:

It is mentioned that IDUs and migrants are identified as priority populations for HIV and testing has targeted those 2 categories (on behalf of the state). IDUs are targeted for both testing and care due to the recent IDU-related HIV outbreak in the centre of Athens.

7. Does the country have a policy or strategy to ensure equal access for women and men to HIV prevention, treatment, care and support?:

No

7.1. In particular, does the country have a policy or strategy to ensure access to HIV prevention, treatment, care and support for women outside the context of pregnancy and childbirth?:

No

8. Does the country have a policy or strategy to ensure equal access for key populations and/or other vulnerable sub-populations to HIV prevention, treatment, care and support?:

No

9. Does the country have a policy or law prohibiting HIV screening for general employment purposes (recruitment, assignment/relocation, appointment, promotion, termination)?:

Yes

IF YES, briefly describe the content of the policy or law:

Law: 3304/2005 (equal treatment) Law: 3996/2011 (control and implementation of equal treatment) Ministerial Decision: Y1/Γ.Π. 140520/2009 (people with HIV can work in hygienic professions).

10. Does the country have the following human rights monitoring and enforcement mechanisms?

a. Existence of independent national institutions for the promotion and protection of human rights, including human rights commissions, law reform commissions, watchdogs, and ombudspersons which consider HIV-related issues within their work:

Yes

b. Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts:

Yes

IF YES on any of the above questions, describe some examples:

Greek Ombudsman, National Committee for Human rights, Monitoring Helsinki, Euro barometer However, the above mechanisms do not monitor specific performance indicators systematically.

11. In the last 2 years, have there been the following training and/or capacity-building activities

a. Programmes to educate, raise awareness among people living with HIV and key populations concerning their rights (in the context of HIV)?:

No

b. Programmes for members of the judiciary and law enforcement on HIV and human rights issues that may come up in the context of their work?:

No

12. Are the following legal support services available in the country?

a. Legal aid systems for HIV casework:

No

b. Private sector law firms or university-based centres to provide free or reduced-cost legal services to people living with HIV:

Yes

13. Are there programmes in place to reduce HIV-related stigma and discrimination?:

No

14. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2011?:

2

Since 2009, what have been key achievements in this area:

On behalf of the state there has been a ministerial decree by the Ministry of Health (Y4A/OIK93443/2011) that facilitates access to ART for migrants and non-insurance people. Also we have the law (3996/2011) that controls the implementation of equal treatment.

What challenges remain in this area:

Challenges: legal coverage for PLWH, access to ART for all, despite of the insurance status, monitoring human rights protection in relation to HIV, introduction of sexual behavior and human rights course in schools, co-affiliation with NGOs in raising campaigns against stigma and discrimination.

15. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the effort to implement human rights related policies, laws and regulations in 2011?:

2

Since 2009, what have been key achievements in this area:

No major achievements, nevertheless there was a new law that contributes to a better assimilation for second generation migrants in Greece

What challenges remain in this area:

As mentioned above key challenges remain in terms of legal coverage, social and educational awareness, implementation of EU directives and targeted policies in all aspects of human rights.

B - IV. PREVENTION

1. Has the country identified the specific needs for HIV prevention programmes?:

Yes

IF YES, how were these specific needs determined?:

There are targeted group interventions (outreach activities by HCDCP) for Sex workers, MSM, Migrants, IDUs (OKANA AND KETHEA also perform outreach activities in this field) However, prevention efforts need to be evaluated and scaled up with expansion of the target groups.

1.1 To what extent has HIV prevention been implemented?

Blood safety:

Strongly Agree

Condom promotion:

Disagree

Harm reduction for people who inject drugs:

Agree

HIV prevention for out-of-school young people:

Disagree

HIV prevention in the workplace:

Strongly Disagree

HIV testing and counseling:

Agree

IEC on risk reduction:

Disagree

IEC on stigma and discrimination reduction:

Strongly Disagree

Prevention of mother-to-child transmission of HIV:

Strongly Agree

Prevention for people living with HIV:

Agree

Reproductive health services including sexually transmitted infections prevention and treatment:

Disagree

Risk reduction for intimate partners of key populations:

Disagree

Risk reduction for men who have sex with men:

Disagree

Risk reduction for sex workers:

Disagree

School-based HIV education for young people:

Strongly Disagree

Universal precautions in health care settings:

Agree

Other [write in]:

-

2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the

implementation of HIV prevention programmes in 2011?:

3

Since 2009, what have been key achievements in this area:

Mobile units operated by the Hellenic CDC and co-financed by the MoH are deployed in the centre of Athens since June 2011. They are targeting migrants/IDU/sex workers and might be considered as an achievement though the implemented actions.

What challenges remain in this area:

Challenge remains a targeted intervention in group categories mentioned above. PLWH PREVENTION / RISK REDUCTION IN IDUs / RISK REDUCTION AMONG MSM / RISK RED SEX WORKERS / SCHOOL BASED HIV EDUCATION, as holistic intervention of extended duration

B - V. TREATMENT, CARE AND SUPPORT

1. Has the country identified the essential elements of a comprehensive package of HIV and AIDS treatment, care and support services?:

Yes

IF YES, Briefly identify the elements and what has been prioritized:

-

Briefly identify how HIV treatment, care and support services are being scaled-up?:

ART for people in need, in some cases screening for STIs. PEP guidelines have been developed by the Hellenic CDC, although PEP is available mostly for occupational exposures. Also free screening for STIs (syphilis (VDRL test) and gonorrhoea) is offered.

1.1. To what extent have the following HIV treatment, care and support services been implemented?

Antiretroviral therapy:

Agree

ART for TB patients:

Agree

Cotrimoxazole prophylaxis in people living with HIV:

Agree

Early infant diagnosis:

Strongly Agree

HIV care and support in the workplace (including alternative working arrangements):

Strongly Disagree

HIV testing and counselling for people with TB:

Agree

HIV treatment services in the workplace or treatment referral systems through the workplace:

Strongly Disagree

Nutritional care:

Strongly Disagree

Paediatric AIDS treatment:

Agree

Post-delivery ART provision to women:

Agree

Post-exposure prophylaxis for non-occupational exposure (e.g., sexual assault):

Disagree

Post-exposure prophylaxis for occupational exposures to HIV:

Agree

Psychosocial support for people living with HIV and their families:

Agree

Sexually transmitted infection management:

Agree

TB infection control in HIV treatment and care facilities:

Agree

TB preventive therapy for people living with HIV:

Agree

TB screening for people living with HIV:

Agree

Treatment of common HIV-related infections:

Agree

Other [write in]:

-

1.2. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2011?:

4

Since 2009, what have been key achievements in this area:

More effective treatment and care for HIV (+) patients is available according to the European guidelines.

What challenges remain in this area:

Need for more effective support based on systemic approach focused on constant education of socio-psychologists. Monitoring system on extended scale. Innovative approach in support. Need for the incorporation of HIV/AIDS management in the curricula of all internal medicine specialties, as it seems that HIV has remained a field for infectious disease specialists only.

2. Does the country have a policy or strategy to address the additional HIV-related needs of orphans and other vulnerable children?:

-

3. Overall, on a scale of 0 to 10 (where 0 is "Very Poor" and 10 is "Excellent"), how would you rate the efforts to meet the HIV-related needs of orphans and other vulnerable children in 2011?":

-

Since 2009, what have been key achievements in this area:

Not applicable

What challenges remain in this area:

Not applicable

Source URL: <http://aidsreportingtool.unaids.org/83/greece-report-ncpi>