

## Survey Response Details

### Response Information

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### Response Details

#### Page 1

- 1) **Country**  
Greece (0)
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- 7) **Date of submission:**  
Please enter in DD/MM/YYYY format  
17/03/2010

#### Page 3

- 8) **Describe the process used for NCPI data gathering and validation:**  
Organized by the Hellenic Centre for Diseases Control and Prevention
- 9) **Describe the process used for resolving disagreements, if any, with respect to the responses to specific questions:**

Resolved by consensus

10)

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

data quality

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11)

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

	Organization	Names/Positions	Respondents to Part A [Indicate which parts each respondent was queried on]
Respondent 1	Hellenic Centre for Diseases Control	Theodore Papadimitriou, Director	A.I, A.II, A.III, A.IV, A.V

12)

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

	Organization	Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 1	Centre for Life	Anna Kavouri	B.I, B.II, B.III, B.IV

13)

	Organization	Names/Positions	Respondents to Part B [Indicate which parts each respondent was queried on]
Respondent 2	ACT UP HELLAS	Konstantinos Kampourakis	B.I, B.II, B.III, B.IV
Respondent 3	Medecins du Monde	Christina Psara	B. I, B. II, B. III, B. IV
Respondent 4	Greek Hemophiliac Society	Tzeni Petadaki	B.I, B.II, B.III, B.IV
Respondent 5	Praksis	Antipas Tzanetos	B. I, B. II, B. III, B. IV
Respondent 6	Positive Voice	Marianela Kloka	B.I, B.II, B.III, B.IV
Respondent 7	OLKE	Kostis Spiliotis	B. I, B. II, B. III, B. IV
Respondent 8	Be Positive	Giannis Papagianopoulos	B.I, B.II, B.III, B.IV
Respondent 9	Synthesis	Dimitris Nastos	B. I, B. II, B. III, B. IV
Respondent 10	Hel. M. S. I. C.	Dimitris Stathis	B.I, B.II, B.III, B.IV
Respondent 11	New Life	Ema Skonjby	B. I, B. II, B. III, B. IV

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14)

**Part A, Section 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 (0)****Page 7**15) **Part A, Section I: STRATEGIC PLAN****Question 1 (continued)****Period covered:**

2008-2013

16)

**1.1 How long has the country had a multisectoral strategy?**

**Number of Years**

2

17)

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

	Included in strategy	Earmarked budget
Health	Yes	Yes
Education	Yes	Yes
Labour	No	No
Transportation	No	No
Military/Police	No	No
Women	No	No
Young people	No	No
Other*	No	No

**Page 8****18) Part A, Section I: STRATEGIC PLAN****Question 1.2 (continued)****If "Other" sectors are included, please specify:**

Migrants, Incarcerated, Injecting Drug Users

19)

**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

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20)

**Part A, Section I: STRATEGIC PLAN****1.3 Does the multisectoral strategy address the following target populations, settings and crosscutting issues?**

Target populations	
a. Women and girls	Yes
b. Young women/young men	Yes
c. Injecting drug users	Yes
d. Men who have sex with men	Yes
e. Sex workers	Yes
f. Orphans and other vulnerable children	No
g. Other specific vulnerable subpopulations*	Yes

<b>Settings</b>	
h. Workplace	No
i. Schools	Yes
j. Prisons	Yes
<b>Cross-cutting issues</b>	
k.HIV and poverty	No
l. Human rights protection	Yes
m. Involvement of people living with HIV	Yes
n. Addressing stigma and discrimination	Yes
o. Gender empowerment and/or gender equality	Yes

21)

**1.4 Were target populations identified through a needs assessment?**

Yes (0)

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22)

**Part A, Section I: STRATEGIC PLAN**

**Question 1.4 (continued)**

**IF YES, when was this needs assessment conducted?**

Please enter the year in yyyy format

2008

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23)

**Part A, Section I: STRATEGIC PLAN**

**1.5 What are the identified target populations for HIV programmes in the country?**

General Population, Women, Young people, Men who have sex with men, Injecting Drug Users, Migrants, Prisoners, People living with HIV

24)

**1.6 Does the multisectoral strategy include an operational plan?**

Yes (0)

25)

**1.7 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?	Yes

e. A monitoring and evaluation framework? Yes

26)

**1.8 Has the country ensured “full involvement and participation” of civil society\* in the development of the multisectoral strategy?**

Moderate involvement (0)

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27)

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

The Civil Society Sector was not fully involved in the initial development of the National Action Plan. The Civil Society Sector participated at a later stage during the public consultation process of the National Action Plan.

28)

**1.9 Has the multisectoral strategy been endorsed by most external development partners (bi-laterals, multi-laterals)?**

No (0)

29)

**1.10 Have external development partners aligned and harmonized their HIV-related programmes to the national multisectoral strategy?**

No (0)

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30)

**Part A, Section I: STRATEGIC PLAN**

**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 (0)

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31)

**Part A, Section I: STRATEGIC PLAN**

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

N/A (0)

**Page 17**

32)

**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 (0)

**Page 19**

33)

**5. Does the country have non-discrimination laws or regulations which specify protections for most-at-risk populations or other vulnerable subpopulations?**

Yes (0)

**Page 20**

34)

**Part A, Section I: STRATEGIC PLAN**

**5.1 IF YES, for which subpopulations?**

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	No
d. Men who have sex with men	Yes
e. Sex Workers	No
f. Prison inmates	No
g. Migrants/mobile populations	Yes
Other: Please specify	

35)

**IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:**

Greek Ombudsman, Commission of Equal Treatment, Body of Labour Inspection, Data Protection Authority

36)

**Briefly comment on the degree to which these laws are currently implemented:**

The laws are currently implemented in case a complaint is declared and signed by a person affected.

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37)

**Part A, Section I: STRATEGIC PLAN**

**6. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for most-at-risk populations or other vulnerable subpopulations?**

Yes (0)

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38)

**Part A, Section I: STRATEGIC PLAN**

**6.1 IF YES, for which subpopulations?**

- a. Women
- b. Young people
- c. Injecting drug users
- d. Men who have sex with men
- e. Sex Workers
- f. Prison inmates
- g. Migrants/mobile populations Yes
- Other: Uninsured Greek or EU citizens Yes

39)

**IF YES, briefly describe the content of these laws, regulations or policies:**

These laws hinder access to antiretroviral or any other kind of treatment except for emergency cases or underaged.

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40)

**Part A, Section I: STRATEGIC PLAN**

**7. Has the country followed up on commitments towards universal access made during the High-Level AIDS Review in June 2006?**

No (0)

**Page 25**

41)

**Part A, Section I: STRATEGIC PLAN**

**7.3 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 (0)

42)

**7.4 Is HIV programme coverage being monitored?**

No (0)

**Page 29**

43)

**7.5 Has the country developed a plan to strengthen health systems, including infrastructure, human resources and capacities, and logistical systems to deliver drugs?**

No (0)

**Page 30**

44)

**Part A, Section I: STRATEGIC PLAN**

**Question 7.5 (continued)**

**Overall, how would you rate strategy planning efforts in the HIV programmes in 2009?**

4 (4)

**Page 31**

45)

**Part A, Section II: POLITICAL SUPPORT**

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

President/Head of government	
Other high officials	Yes
Other officials in regions and/or districts	Yes

46)

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

No (0)

**Page 32**

47)

**Part A, Section II: POLITICAL SUPPORT**

**Question 2 (continued)****IF NO, briefly explain why not and how AIDS programmes are being managed:**

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

**Page 34**

48)

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

No (0)

**Page 35**

49)

**5. What kind of support does the National AIDS Commission (or equivalent) provide to civil society organizations for the implementation of HIV-related activities?**

Information on priority needs	Yes
Technical guidance	Yes
Procurement and distribution of drugs or other supplies	No
Coordination with other implementing partners	
Capacity-building	Yes
Other: Please specify	

50)

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

Yes (0)

**Page 36**

51)

**Part A, Section II: POLITICAL SUPPORT****6.1 IF YES, were policies and laws amended to be consistent with the National AIDS Control policies?**

No (0)

**Page 38**

52)

**Part A, Section II: POLITICAL SUPPORT****Question 6.1 (continued)**

**Overall, how would you rate the political support for the HIV programmes in 2009?**

4 (4)

**Page 39**

53)

**Part A, Section III: PREVENTION**

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

Yes (0)

**Page 40**

54)

**Part A, Section III: PREVENTION**

**1.1 IF YES, what key messages are explicitly promoted?**

Check for key message explicitly promoted (multiple options allowed)

- a. Be sexually abstinent (0)
- b. Delay sexual debut (0)
- c. Be faithful (0)
- d. Reduce the number of sexual partners (0)
- e. Use condoms consistently (0)
- f. Engage in safe(r) sex (0)
- h. Abstain from injecting drugs (0)
- i. Use clean needles and syringes (0)
- j. Fight against violence against women (0)
- k. Greater acceptance and involvement of people living with HIV (0)
- n. Know your HIV status (0)
- o. Prevent mother-to-child transmission of HIV (0)

55)

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

Yes (0)

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56)

**Part A, Section III: PREVENTION**

**2. Does the country have a policy or strategy promoting HIV-related reproductive and sexual health education for young people?**

Yes (0)

57)

**2.1 Is HIV education part of the curriculum in:**

primary schools?  
secondary schools? Yes  
teacher training?

58)

**2.2 Does the strategy/curriculum provide the same reproductive and sexual health education for young men and young women?**

Yes (0)

59)

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

No (0)

60)

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

Yes (0)

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61)

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

Check which specific populations and elements are included in the policy/strategy

Targeted information on risk reduction and HIV education	Injecting drug user, Men having sex with men, Other populations
Stigma and discrimination reduction	
Condom promotion	Men having sex with men, Other populations
HIV testing and counselling	Injecting drug user, Sex workers, Prison inmates, Other populations
Reproductive health, including sexually transmitted infections prevention and treatment	Injecting drug user, Men having sex with men, Sex workers, Clients of sex workers, Prison inmates, Other populations
Vulnerability reduction (e.g. income generation)	
Drug substitution therapy	Injecting drug user
Needle & syringe exchange	Injecting drug user

**Page 43****62) Part A, III. PREVENTION****Question 3.1 (continued)**

**You have checked one or more policy/strategy for "Other populations". Please specify what are "other populations".**

General Population, Migrants

**Page 44**

63)

**Part A, III. PREVENTION****Question 3.1 (continued)**

**Overall, how would you rate the policy efforts in support of HIV prevention in 2009?**

4 (4)

**Page 45**

64)

**Part A, III. PREVENTION**

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

Yes (0)

**Page 46**

65)

**Part A, III. PREVENTION****Question 4 (continued)**

**IF YES, how were these specific needs determined?**

Based on epidemiological data

66)

**4.1 To what extent has HIV prevention been implemented?**

<b>The majority of people in need have access</b>	
<b>HIV prevention component</b>	
Blood safety	Agree
Universal precautions in health care settings	Agree
Prevention of mother-to-child transmission of HIV	Agree
IEC* on risk reduction	Agree
IEC* on stigma and discrimination reduction	Agree
Condom promotion	Agree
HIV testing and counselling	Agree
Harm reduction for injecting drug users	Agree
Risk reduction for men who have sex with men	Don't agree
Risk reduction for sex workers	Agree
Reproductive health services including sexually transmitted infections prevention and treatment	Agree
School-based HIV education for young people	Don't agree
HIV prevention for out-of-school young people	Don't agree
HIV prevention in the workplace	Don't agree
Other: please specify	

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67)

**Part A, III. PREVENTION**

**Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2009?**

**4 (4)**

**Page 48**

68)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**1. Does the country have a policy or strategy to promote comprehensive HIV treatment, care and support? (Comprehensive care includes, but is not limited to, treatment, HIV testing and counselling, psychosocial care, and home and community-based care).**

Yes (0)

**Page 49**

69)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT****1.1 IF YES, does it address barriers for women?**

No (0)

70)

**1.2 IF YES, does it address barriers for most-at-risk populations?**

No (0)

71)

**2. Has the country identified the specific needs for HIV treatment, care and support services?**

Yes (0)

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72)

**2.1 To what extent have the following HIV treatment, care and support services been implemented?**The majority of people in need  
have access**HIV treatment, care and support service**

Antiretroviral therapy	Agree
Nutritional care	Don't agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Agree
Home-based care	Agree
Palliative care and treatment of common HIV-related infections	Agree
HIV testing and counselling for TB patients	Don't agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	Agree
TB infection control in HIV treatment and care facilities	Agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	Don't agree
HIV care and support in the workplace (including alternative working arrangements)	Don't agree

Other: please specify

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73)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**3. Does the country have a policy for developing/using generic drugs or parallel importing of drugs for HIV?**

No (0)

74)

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

No (0)

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75)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

**Overall, how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2009?**

8 (8)

**Page 54**

76)

**Part A, Section IV: TREATMENT, CARE AND SUPPORT**

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

N/A (0)

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77)

**Part A, Section V: MONITORING AND EVALUATION**

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

No (0)

**Page 58****78) Part A, Section V: MONITORING AND EVALUATION**



**Question 1 (continued)****IF NO, briefly describe the challenges:**

The creation of the National AIDS Committee to monitor and evaluate the implementation of the National AIDS Plan

**Page 64**

79)

**4. Are M&E priorities determined through a national M&E system assessment?**

No (0)

**Page 65**

80)

**5. Is there a functional national M&E Unit?**

No (0)

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81)

**Part A, Section V: MONITORING AND EVALUATION****6. Is there a national M&E Committee or Working Group that meets regularly to coordinate M&E activities?**

No (0)

82)

**6.1 Does it include representation from civil society?**

No (0)

**Page 71**

83)

**7. Is there a central national database with HIV- related data?**

No (0)

**Page 74**

84)

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

No (0)

**Page 77****85) Part A, Section V: MONITORING AND EVALUATION**

**10. Is there a plan for increasing human capacity in M&E at national, subnational and service-delivery levels?:**

No (0)

**Page 82****86) Part A, Section V: MONITORING AND EVALUATION**

**Question 10.2 (continued)**

**Overall, how would you rate the M&E efforts of the HIV programme in 2009?**

1 (1)

**Page 83****87)****Part B, Section I: HUMAN RIGHTS**

**1. Does the country have laws and regulations that protect people living with HIV against discrimination? (including both general non-discrimination provisions and provisions that specifically mention HIV, focus on schooling, housing, employment, health care etc.)**

No (0)

**Page 84****88)**

**2. Does the country have non-discrimination laws or regulations which specify protections for most-at-risk populations and other vulnerable subpopulations?**

Yes (0)

**Page 85****89)****Part B, Section I. HUMAN RIGHTS**

**2.1 IF YES, for which subpopulations?**

a. Women	Yes
b. Young people	Yes
c. Injecting drug users	
d. Men who have sex with men	
e. Sex Workers	
f. prison inmates	
g. Migrants/mobile populations	Yes
Other: Please specify	

90)

**IF YES, briefly explain what mechanisms are in place to ensure these laws are implemented:**

Mechanisms in place to ensure these laws are implemented In relation to Law 3488/06, article 13 assigns to the Greek Ombudsman the monitoring of the implementation of the principle of equal treatment for men and women both in the private and public sector. In cases of violation the Greek Ombudsman mediates so as the violation to be remedied. If the mediation does not produce satisfying results the Greek Ombudsman communicates its final conclusions to the appropriate authorities in order for the latter to exercise their disciplinary or penal jurisdiction. As far as the Law 3304/05 is concerned article 19 assigns: a) to the Greek Ombudsman the monitoring of the principle of equal treatment in cases of violation by the public sector; b) to the newly established Commission of Equal Treatment (in accordance with article 21 of the said Law) the monitoring of the principle of equal treatment in cases of violation by natural or juridical persons not falling under the public sector; c) to the Body of Labour Inspection the monitoring of the principle of equal treatment in cases of violation by natural or juridical persons in the area of occupation and labour. Furthermore, article 23 provides for the establishment of the Equal Treatment Service of the Ministry of Justice to examine complaints in relation to violation of the equal treatment principle.

91)

**Briefly describe the content of these laws:**

We need to note that patients with HIV fall under the general provisions of: a) article 47 of Law 2071/92 (Official Gazette A' 123 on Modernization and Organization of the Health System) entitled 'Rights of Hospitalized Patient'; b) of Law 2519/97 on Development and Modernization of the National Health System (Official Gazette A' 165), which under article 1 establishes the Independent Service for the Protection of the Rights of Patients and the Control Committee for the Protection of the Rights of Patients; and c) Law 3418/05 (Official Gazette A' 287) on Code of Medical Ethics. Official Gazette ( A 257) Law 3727/2008 article 20: imprisoned HIV (+) persons are released from prison in case of full blown AIDS. National labor treaty (2004-2005) –article 11: persons with HIV/AIDS with a dependent form of labor, who work at the same employer > 4 months, and they are able to work, in case they inform their employer, they have access to one more month of holidays. Greece has ratified the following international instruments regarding women's rights: 1) International Convention on the Elimination of All Forms of Discrimination against Women (Law 1342/1989, Official Gazette A' 39) 2) Optional Protocol to the International Convention on the Elimination of All Forms of Discrimination against Women (Law 2952/2001, Official Gazette A' 248). Greece has also adopted the following laws regarding women's rights: Law 3488/2006 (Official Gazette A' 191 on the Implementation of the Principle of Equal Treatment for Men and Women as Regards Access to Employment, Vocational Training and Promotion and Working Conditions. Young people: Greece has ratified the Convention on the Rights of the Child (Law 2101/1992, Official Gazette A' 192) Migrants/mobile populations' law. 2955/2001 article 11 E (official gazette 256^ A): immigrants hiv infected persons, in case they need ARV treatment and they cannot have access to treatment in their countries of origin or return have access to free care and treatment. For the time they get treatment they also get permanence and work permit. The MoH must declare the preconditions and

details of this provision. Other: Greece has also adopted Law 3304/2005 (Official Gazette A' 16) on the Implementation of the Principle of Equal Treatment between Persons Irrespective of Racial or Ethnic Origin, Religious or Other Convictions, Disability, Age or Sexual Orientation. Concerning migrants there is a discriminatory law (official gazette 199/27-8-1998), which refers to the following: a refugee/an asylum seeker or a legal migrant in order to get a job, it should be confirmed that there is no Greek citizen candidate for the same job.

92)

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

The laws are implemented in case a complaint is declared and signed by the person affected

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93)

**Part B, Section I. HUMAN RIGHTS**

**3. Does the country have laws, regulations or policies that present obstacles to effective HIV prevention, treatment, care and support for most-at-risk populations and other vulnerable subpopulations?**

Yes (0)

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94)

**Part B, Section I. HUMAN RIGHTS**

**3.1 IF YES, for which subpopulations?**

- a. Women
- b. Young people
- c. Injecting drug users
- d. Men who have sex with men
- e. Sex Workers
- f. prison inmates
- g. Migrants/mobile populations  Yes
- Other: Uninsured Greek or EU citizens

95)

**IF YES, briefly describe the content of these laws, regulations or policies:**

Undocumented migrants and uninsured Greeks or EU citizens do not have access to antiretroviral or any other kind of therapy except for emergency cases or the underaged

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96) **Part B, Section I. HUMAN RIGHTS**

**4. Is the promotion and protection of human rights explicitly mentioned in any HIV**

**policy or strategy?**

Yes (0)

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97)

**Part B, Section I. HUMAN RIGHTS****Question 4 (continued)****IF YES, briefly describe how human rights are mentioned in this HIV policy or strategy:**

In the National Action Plan for HIV/AIDS. Human rights represent a major part of the National Action Plan with actions for migrants, women, MSM, trafficking victims, but the NAP has not been implemented.

98)

**5. Is there a mechanism to record, document and address cases of discrimination experienced by people living with HIV, most-at-risk populations and/or other vulnerable subpopulations?**

Yes (0)

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99)

**Part B, Section I. HUMAN RIGHTS****Question 5 (continued)****IF YES, briefly describe this mechanism:**

The Greek ombudsman, the National committee for human rights and the independent data protection agency. The accusations have to be signed by the person affected and has no effect in the private health sector or insurance companies.

100)

**6. Has the Government, through political and financial support, involved people living with HIV, most-at-risk populations and/or other vulnerable subpopulations in governmental HIV-policy design and programme implementation?**

No (0)

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101)

**7. Does the country have a policy of free services for the following:**

a. HIV prevention services

Yes

- |   |     |
|---|-----|
| b. Antiretroviral treatment                   | No  |
| c. HIV-related care and support interventions | Yes |

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102)

**Part B, Section I. HUMAN RIGHTS****Question 7 (continued)**

**IF YES, given resource constraints, briefly describe what steps are in place to implement these policies and include information on any restrictions or barriers to access for different populations:**

Regarding prevention, blood screening for HIV and the other blood born diseases is in place since 1985. Hiv testing is free of charge, there is a fee of 3 E for accessing the doctors. As far as it concerns the HIV-related care and support interventions, in Athens there is a hospice for the homeless.

103)

**8. Does the country have a policy to ensure equal access for women and men to HIV prevention, treatment, care and support?**

No (0)

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104)

**9. Does the country have a policy to ensure equal access for most-at-risk populations and/or other vulnerable subpopulations to HIV prevention, treatment, care and support?**

No (0)

**Page 95**

105)

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

No (0)

106)

**11. Does the country have a policy to ensure that HIV research protocols involving human subjects are reviewed and approved by a national/local ethical review committee?**

Yes (0)

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107)

**Part B, Section I. HUMAN RIGHTS****11.1 IF YES, does the ethical review committee include representatives of civil society including people living with HIV?**

No (0)

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108)

**– 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 (0)

109)

**– Focal points within governmental health and other departments to monitor HIV-related human rights abuses and HIV-related discrimination in areas such as housing and employment**

No (0)

110)

**– Performance indicators or benchmarks for compliance with human rights standards in the context of HIV efforts**

No (0)

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111)

**Part B, Section I. HUMAN RIGHTS****13. In the last 2 years, have members of the judiciary (including labour courts/ employment tribunals) been trained/sensitized to HIV and human rights issues that may come up in the context of their work?**

No (0)

112)

**– Legal aid systems for HIV casework**

No (0)

113)

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

No (0)

114)

**– Programmes to educate, raise awareness among people living with HIV concerning their rights**

No (0)

115)

**15. Are there programmes in place to reduce HIV-related stigma and discrimination?**

No (0)

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116)

**Part B, Section I. HUMAN RIGHTS**

**Question 15 (continued)**

**Overall, how would you rate the policies, laws and regulations in place to promote and protect human rights in relation to HIV in 2009?**

**0**

117)

**Since 2007, what have been key achievements in this area:**

None

118)

**What are remaining challenges in this area:**

Everything is a challenge

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119)

**Part B, Section I. HUMAN RIGHTS**

**Question 15 (continued)**

**Overall, how would you rate the efforts to enforce the existing policies, laws and regulations in 2009?**

**0**

120)

**Since 2007, what have been key achievements in this area:**

None



121)

**What are remaining challenges in this area:**

Everything is a challenge

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122)

**Part B, Section II: CIVIL SOCIETY\* PARTICIPATION**

**1. To what extent has civil society contributed to strengthening the political commitment of top leaders and national strategy/policy formulations?**

1 (1)

123)

**Comments and examples:**

Civil Society has a good will and strong representation but there is no commitment of the top leaders

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124)

**Part B, Section II. CIVIL SOCIETY PARTICIPATION**

**2. To what extent 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)?**

2 (2)

125)

**Comments and examples:**

Civil Society has been involved in the planning but nobody was involved in the budget and budget break out

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126)

**a. the national AIDS strategy?**

2 (2)

127)

**b. the national AIDS budget?**

0

128)

**c. national AIDS reports?**

2 (2)

**Page 106**

129)

**a. developing the national M&E plan?**

0

130)

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

0

131)

**c. M&E efforts at local level?**

0

132)

**Comments and examples:**

M &amp; E of HIV response does not exist

**Page 107**133) **Part B, Section II. CIVIL SOCIETY PARTICIPATION****5. To what extent is the civil society sector representation in HIV efforts inclusive of diverse organizations (e.g. networks of people living with HIV, organizations of sex workers, faith-based organizations)?**

1 (1)

134)

**Comments and examples:**

In the board of directors of HCDP only church is represented. There is no NGO represented.

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135)

**a. adequate financial support to implement its HIV activities?**

1 (1)

136)

**b. adequate technical support to implement its HIV activities?**

0

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137) **Part B, Section II. CIVIL SOCIETY PARTICIPATION**

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

Prevention for youth	51-75%
<b>Prevention for most-at-risk-populations</b>	
- Injecting drug users	>75%
- Men who have sex with men	>75%
- Sex workers	>75%
Testing and Counselling	51-75%
Reduction of Stigma and Discrimination	>75%
Clinical services (ART/OI) *	<25%
Home-based care	>75%
Programmes for OVC* *	

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138)

**Part B, Section II. CIVIL SOCIETY PARTICIPATION**

**Question 7 (continued)**

**Overall, how would you rate the efforts to increase civil society participation in 2009?**

1 (1)

139)

**Since 2007, what have been key achievements in this area:**

None.

140)

**What are remaining challenges in this area:**

Everything is a challenge.

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141)

**Part B, Section III: PREVENTION**

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

Yes (0)

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142)

**Part B, Section III: PREVENTION****Question 1 (continued)****IF YES, how were these specific needs determined?**

There was a limited input from a limited number of NGOs but without their final consent.

143)

**1.1 To what extent has HIV prevention been implemented?**

The majority of people in need  
have access

**HIV prevention component**

Blood safety	Agree
Universal precautions in health care settings	Agree
Prevention of mother-to-child transmission of HIV	Agree
IEC* on risk reduction	Don't agree
IEC* on stigma and discrimination reduction	Don't agree
Condom promotion	Don't agree
HIV testing and counselling	Don't agree
Harm reduction for injecting drug users	Agree
Risk reduction for men who have sex with men	Don't agree
Risk reduction for sex workers	Don't agree
Reproductive health services including sexually transmitted infections prevention and treatment	Don't agree
School-based HIV education for young people	Don't agree
HIV prevention for out-of-school young people	Don't agree
HIV prevention in the workplace	Don't agree
Other: please specify	

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144)

**Part B, Section III: PREVENTION****Question 1.1 (continued)****Overall, how would you rate the efforts in the implementation of HIV prevention programmes in 2009?**

1 (1)

145)

**Since 2007, what have been key achievements in this area:**

None

146) **What are remaining challenges in this area:**

The rest besides the ones marked as “agree”

**Page 114**

147) **Part B, Section IV: TREATMENT, CARE AND SUPPORT**

**1. Has the country identified the specific needs for HIV treatment, care and support services?**

No (0)

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148) **IF NO, how are HIV treatment, care and support services being scaled-up?**

Only insured people have access to treatment and migrants who do not have access to ARVs in their own country, but this has to be verified

149) **1.1 To what extent have the following HIV treatment, care and support services been implemented?**

	The majority of people in need have access
<b>HIV treatment, care and support service</b>	
Antiretroviral therapy	Agree
Nutritional care	Agree
Paediatric AIDS treatment	Agree
Sexually transmitted infection management	Agree
Psychosocial support for people living with HIV and their families	Don't agree
Home-based care	Don't agree
Palliative care and treatment of common HIV-related infections	Don't agree
HIV testing and counselling for TB patients	Don't agree
TB screening for HIV-infected people	Agree
TB preventive therapy for HIV-infected people	Agree
TB infection control in HIV treatment and care facilities	Agree
Cotrimoxazole prophylaxis in HIV-infected people	Agree
Post-exposure prophylaxis (e.g. occupational exposures to HIV, rape)	Agree
HIV treatment services in the workplace or treatment referral systems through the workplace	N/A

HIV care and support in the workplace (including alternative working arrangements) N/A  
Other: please specify

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150)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT****Question 1.1 (continued)**

**Overall, how would you rate the efforts in the implementation of HIV treatment, care and support programmes in 2009?**

3 (3)

151)

**Since 2007, what have been key achievements in this area:**

The guidelines on non occupational exposure to HIV

152)

**What are remaining challenges in this area:**

Care and support

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153)

**Part B, Section IV: TREATMENT, CARE AND SUPPORT**

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

N/A (0)