



UNGASS INDICATORS COUNTRY REPORT
GREECE-HELLAS

Reporting period: 2003-2005

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Preface

The General Assembly of the UN on the subject: "Declaration of Commitment on HIV/AIDS: five years later", is an important moment for all the humanity. It owes to confer in order to locate what went wrong, what was promised and was not done so much in the governmental level and in the civil society level. The HIV/AIDS is still an epidemic that is not under control, while the "3 by 5" goal, has not been achieved. States are destabilised with their productive group of population being unable to participate in the production line, while world organisations as the World Trade Organisation, hesitate to take decisions that will make easier the benefit of antiretroviral treatment to those in need. Respectively, governmental representatives express different opinions in different organizations, which results in a weakness in development of concrete National strategic plans for the HIV/AIDS.

ACT UP HELLAS, having 12 years of offer in HIV /AIDS area, seeked to be part of this event. The UNAIDS, after evaluation, dispatched its approval, and a letter of the president of the General assembly was sent to the Minister of Health. However - and despite the explicit directives of the President of the General Assembly to the Ministers of Health to inform and facilitate the participation of CS representatives- no mobilisation has been observed on behalf of the Greek Ministry of Health. On the contrary the country does not also meet its obligation to compile the National report on HIV/AIDS. Despite our efforts to contact the relative bureau for the purpose of the General Assembly, this was not feasible.

We decided to collect the opinions/data of all those who deal with the HIV/AIDS, NGOs but also Academic institutions or even government institutions and political party organisations for the UNGASS indicators. Fifteen organisations have contributed to this report. We want to thank all those who answered, since this text would not be the same without their contribution. We must, however, point out that we have the sole responsibility of the text. We want also to thank the HELLENIC AID of the Ministry of Foreign Affairs for its activation but mainly because it's not necessary to explain to them why HIV/AIDS is such an important subject for humanity and because it is clear that it is not necessary to absolutely agree in order to discuss. Finally we want to express our dissatisfaction but also our agony for the attitude of the Ministry of Health.

We believe - and we know that we are not wrong- that the UN General Assembly is always an event of great importance.

We believed and we believe that the HIV/AIDS is a big challenge for the humanity. If it is not faced in time and responsibly, its effects can be devastating. We believed and we also believe that the promises that are given should be kept.

Mr. Konstantinos Kabourakis and Mrs. Chryssoula Botsi are responsible for this report and ACT UP HELLAS, collectively!

During the compilation of this report, the President of the Greek Homosexual Community Mr. Vangelis Gianellos, has passed away.

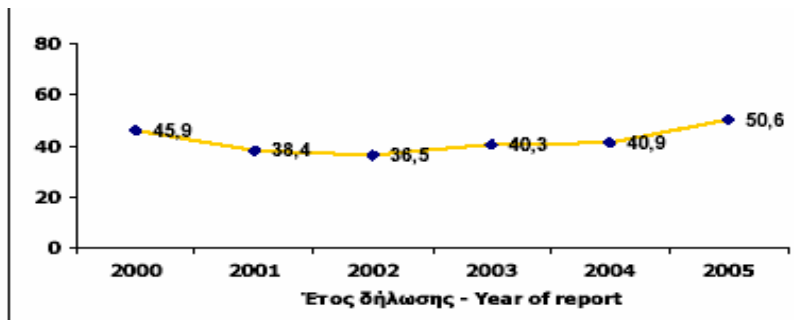
His contribution in this report was his last fight.

This report is dedicated to him and to his willingness to fight!

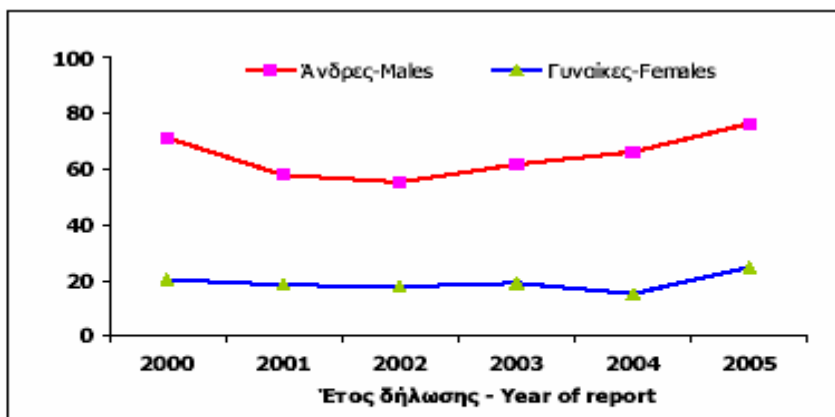
Greece is a country whose epidemiological surveillance is bad or even non-existent. Perhaps the only disease that is supervised systematically is, HIV infection. HIV is a low prevalence epidemic in Greece.. The first case was reported in 1981 while the systematic surveillance of the disease started in 1984.

The main route of transmission was and still remains sexual contact whilst the group of population, mainly affected, still remains the male homosexuals. The responsible body of epidemiologic monitoring is HCDCP that is answerable to the Ministry of Health. During 2005, 560 new infections were reported to HCDCP from which 74,8% were males and 24,8% females. The route of transmission was reported as “undetermined” in 38,6% of cases, something that remains inexplicable. The reported cases of HIV infection in Greece are increasing steadily.

In 2003 and in 2004 a small increase of new infections was reported while in 2005, there was a significant increase of HIV infections (Figure 1), with the women accounting for 24,8%. (Figure 2).



Σχήμα 1. Νέες δηλώσεις HIV λοίμωξης ανά εκατομμύριο πληθυσμού
Figure 1. Reported HIV infections per million population



Σχήμα 2. Νέες δηλώσεις HIV λοίμωξης ανά εκατομμύριο πληθυσμού σε άνδρες και γυναίκες
Figure 2. Reported HIV infections per million population in males and females

1. Expenditures for HIV/AIDS in Greece

All NGOs but the University departments also (NSPH) and even international organizations (IOM) agree that the amount of national funds disbursed by the government for HIV/AIDS, is not enough especially regarding prevention. NGOs point out (HLCG) that the whole amount of this money never goes out in public, so that anyone can safely estimate it. The need to increase the funds but also to distribute them in a proper way is pointed out by everybody. The care of PWAs (ARV treatment and follow up) is in fact in a better level than this of other chronic diseases.

2. Health Policies

2a. Prevention: Prevention projects/ awareness campaigns

The country did never apply prevention projects. Awareness campaigns have been limited in the commemorative celebration of December 1st. Even these campaigns are so conservative, that they do not adopt the UNAIDS campaign themes like the one "Men make the difference". The campaign was considered offensive for the male community and was changed in: "Condom, come hell or high water!"

The occasional efforts of the state in the schools follows traditional methods (lectures) while characteristic is the hesitant attitude of the Ministry of Education to the WAC program of "Lessons 4 life" that has

been proposed by ACT UP HELLAS and remains unanswered up to now. NGOs but also academic departments occasionally have worked out awareness projects that however are interrupted due to lack of financing and support.

The fact that all those who collaborated in this report agree on the absence of awareness projects, the non-existence of specialized intervention projects and naturally the non-existence of any system of evaluation of even projects that were applied is rather impressive.

2b. Care and support (antiretroviral treatment /care of patients).

Access to antiretroviral treatment is in very good levels, as is the seropositive individuals follow-up. Delays in their access or even lack have been observed casually (C.I.L.). However the insufficient or in some cases, exceptionally insufficient staff of Units of Special Infections constitutes a major problem, since they are not part of the National Health System totally as autonomous units. As a result, their survival depends on the self-denial of their personnel and also in the offer of work from the NGOs regarding medical personnel and laboratory workers (ACT UP).

Illegal immigrants face a particular problem after the implementation of the immigration law (3386/2005), as well as uninsured Greeks after the issuing of new circulars by the Ministry of Health. The question that does not only concern the immigrants but constitutes also a serious subject of public health, has been placed so much in the parliament by opposition parties (PASOK, Sinaspismos) and to the relative bureaus (HCDCP, Ministry of Health) by NGOs (ACT UP). The subject has not been resolved institutionally compelling the medical world to move itself between legality and illegality (HLCG).

2c. Defence/violations of human rights.

In Greece a code of ethics exists with regard to the defence of human rights of seropositive patients while the country has also ratified international conventions that are related to human rights. Even though many of those that were asked were not aware of the existence of such a code of ethics, the violation of rights of persons with HIV/AIDS is widely acquainted and pointed out.

The violations that are reported are as follows:

- Requirement of HIV test in banks, in the ATTIKO METRO Company but also in insurance companies and hotels.
- Disclosure of hiv status from employees of the ORGANISATION FOR THE OCCUPATION OF THE WORK FORCE to potential employers.
- Demotions, lay offs and dismissals from the Army because of positive hiv status.
- Refusal of benefit of medical services.
- Violation of secrecy from the Mass Media but also from people who work in the Health Services.
- As forementioned, the code of ethics remains unknown in the province, in the private labour space and unfortunately often in people who work in the Health Services.

Unfortunately, no initiative is undertaken by the state but also not by other institutions (e.g Medical Association). It is impressive that the violation of rights of seropositive patients is the subject of research for the "obudsman" that began in 2005 while it constituted a poster from the medical area in the 16th Pan-Hellenic AIDS Congress.

2d. Support of NGOs from the state. Participation in the mapping out of policy for the confrontation of HIV /AIDS.

It constitutes general consent that the NGOs in the HIV/AIDS area do not enjoy support from the state. In Greece the institutional frame for the activities, the role but also the evaluation of NGOs is missing. Despite the fact that there exists a serious relationship between NGOs in other fields of action (in feminine subjects, environment and trafficking) and the state in the level of decision-making (Ministry of Justice, Ministry of Public Order, Ministry of Environment and Ministry of Foreign Affairs), the HIV/AIDS area is highly depreciated.

The support of NGOs is insufficient and mainly it is found in the level of casual financing of booklets, or events at December 1st. But as the NGOs and the remainder institutions that were asked clearly answered, even this insufficient funding has seized to exist for the last years. The existence of coordinated applied programs that is worked out in collaboration with the responsible institutions (Ministry of Health and HCDCP) is not the case in Greece. It is characteristic that in the

administration body of HCDCP, participates as representative of civil society the Orthodox Church but no NGO. On the contrary to the Ministry of Health, the Ministry of Foreign Affairs coordinates and finances programs of education of health up to benefit of medical services, inside and outside the country, but also it coordinates and finances a study of behaviors in the frame of International Developmental Collaboration, in collaboration with a lot of NGOs. In the newly-founded Committee of National Plan of Action (it has a life of hardly two months) an NGO (The Centre for Inspirational living) is the only NGO which participates from those that were asked. The criteria of attendance in the National Plan of action were never discussed in the platform of NGOs and they were not publicised nor did - until now - the Plan of Action and its likely evaluation.

2e. Estimate/evaluation of programs of intervention

The responsible institution so much for the development, application and for the evaluation of intervention projects (HCDCP) remains a cumbersome, bureaucratic and ineffective public service in the development and planning of strategies as masterfully points out the NGO "SYNTHESIS". The above mentioned institution, while it collects the epidemiological data of the country for years on, never did it evaluate their data so that it produces a strategy of prevention and management of the disease. Consequently no process of evaluation exists either.

2f. Most at risk populations. (LGBT, sex workers, mobile populations, IDUs, women, youth) and programmes responding to their needs.

As it has already been reported systematic projects do not exist in Greece. Despite the existence of specific proposals to the HCDCP so much from academic departments (NSPH), gay organisations (HLCG) and from international organisations (IOM) and ACT UP, we never got an answer despite the intervention of the obudsman. Programmes, however are applied from the NGOs but in the frame of EU projects and HELLENIC AID of the Ministry of Foreign Affairs.

For homosexual men: Awareness campaign of the NGOs "SYNTHESIS" and ACTUP.

Seropositive individuals' information campaign on the antiretroviral treatment: NGO "SYNTHESIS"

Project "LAIS": the project is financed by the HELLENIC AID of the Ministry of Foreign Affairs, and worked out by ACT UP. It consists of 1) a telephone hot-line for PEP (post exposure prophylaxis) after unsafe sex and possible exposure to the HIV and 2) the distribution of printed material on the information and the prevention of all STDs (Sexual Transmitted Diseases) in 4 languages with the street work and bar to bar method. The program began on the occasion of the Olympic Games that were held in Greece in 2004 and is continued. Epidemiological and behavioral data from the phone line are also collected.

For the refugees: European initiative EQUAL: briefing/support of seropositive refugees. The Centre for inspirational Living.

Informative material on health education in seven languages with target group: immigrants/refugees. The program is worked out by the the General Secretariat of Youth and the NGO, CFIL.

Immigrants: AIDS AND MOBILITY, a program of the European Union that is represented in Greece by NSPH.

Sex workers: TAMPEP: EU project with target group the migrant sex workers. The project runs in 25 countries and acts as an adviser for WHO for the prevention of transmission of STDs in sex workers. It includes printed and electronic material in 22 languages and approach of the target group with the street work and bar to bar method. It still includes the education of sex workers via the peer education. In Greece the project is represented by ACT UP that is also a steering committee member.

The project ERATO of ACT UP that is financed by the HELLENIC AID of the Ministry of Foreign Affairs has sex workers but also trafficking victims as their target group and it has as their aim both the to inform and collect data regarding STDs of sex workers and illegal migrants. The program has partners from Slovakia and Ukraine. Trafficking victims are the target group of the program by IOM and of the ERATO program of ACT UP.

IDUs: The IDusers, have free access to the laboratory testing for HIV/AIDS and to the antiretroviral treatment. Moreover, the specialised drug treatment programs, the low-threshold programs

(harm reduction) and the street-work programs organise often, and in collaboration with health professionals, seminars and/or distribution of leaflets that concern more generally the promotion of health, but also harm reduction in active users. These actions include almost always the briefing on the ways of transmission of virus and ways of protection from it.

A basic problem is that the programs which address active users, who run the higher danger of infections due to the high-risk behaviours they adopt, are very few in Greece and mostly in the prefecture of Attica. Particularly, in 2004 two low-threshold programs existed in Athens and in Piraeus, four street work programs in Athens, one in Piraeus and one in Thessalonica, and only two programs of needle distribution and/or exchange in Athens.

KETHEA (project against drug use) and the Doctors of World have streetwork programs that have drug users as their target group. Programs that are addressed to women do not exist, as well as programs for the young persons and the adolescents.

NATIONAL ACTION PLAN FOR HIV/AIDS

The national action plan has a life of 2 months (March 2006) the initiative taken by the Minister of Health. It is important that its existence is known only to one NGO (CFIL) while nobody else knows anything about it. Until now there is no known prevention project for the most vulnerable groups.

KNOWLEDGE AND BEHAVIOR

According to a recent study of NSPH (sociology department) about 90% of the general population know the ways of transmission while 64% identify the condom as the only means of protection, the last percentage has increased considerably compared to 19,6% who in the first study carried out in the 1990s had given the same answer (Ioannidi-Kapolou & Agrafiotis, 2005)

The percentages the NSPH refers to, are much higher than the ones given from Travestis /Transsexual NGOs. They report knowledge of the ways of transmission of 50% of their clients. The women NGOs report a 60% knowledge of the ways of transmission (ENOW).

The percentages regarding condom use coincide in the case of sex workers: despite the fact that women NGOs express their fear that condom use in the case of sex workers has dropped (ENOW, IN.EQ), the T.T.sex workers' experience coincides with the data for a NSPH research: Sex workers report a 80% use of condom while men who had a sexual contact with a sex worker, reported a 93% use of condom. On the contrary, in a pilot study for the use of condom among male sex workers in Athens area, many of them, and among them many migrants do not use condom constantly (Papathanasiou & Ioannidi, 2005).

From the data of the phone line "LAIS" of ACT UP, 56% of men report use of condom, while the percentage of women reporting use of condom is up to 6%.¹ From those reporting anal intercourse is impressive that 37% does not report condom use while 18,82% replied that they had a sexual contact with a seropositive person.

In 2005 33% of IDUs that reported injecting in the last month before the interview, reported they also shared syringes. In 2005 21% of IDUs that had a regular partner reported that they always used condom with him/her in the last 6 months. In addition, 46,6% of IDUs that had at least one occasional partner, reports they always used a condom. However the percentage of IDUs who report sharing of any equipment, injecting and non-injecting at least once in their lifetime is 84,6% for 2005. (Greek REITOX focal point, 2006).

ACCESS TO THE TREATMENT: A WORLD NEED

The access to the treatment is a major subject of human rights since it is directly related to the maintenance of life.

The access to treatment cannot depend on the existence or no of insurance coverage and cannot be deprived in minority groups. This also represents an important public health issue since it is the cause of sickness, mortality but also transmission of other infections such as tuberculosis, hepatitis etc. All those that were asked in this survey is unanimous: access to treatment to all those in need, wherever they reside. The problem owes to be solved in Greece where it remains

¹ Refers to male condom, as female condom is not available in Greece

still vague due to the legal frame and the circulars of the Ministry of Health.

FEMINIZATION OF AIDS: THE EMPOWERMENT OF WOMEN AND THE DEFENSE OF WOMEN RIGHTS CAN CHANGE THE FLOW OF THE EPIDEMIC.

As it is obvious from the epidemiological data, women have continuously increasing numbers.

The women place in the Greek society is such that does not allow her self-protection regarding sexual contact, that still remains a male choice. The non-existence of programs of empowerment and information of women contributes to their vulnerability. As it is pointed out, the intervention owes to begin from the equal access of women in the education and in the job market.

Trafficking of human beings aiming at the sexual exploitation is a recent phenomenon in the Greek society that owes to be fought.

The current legislation on trafficking of persons in Greece focuses on the phenomenon itself, on the level of cracking down on criminality, and the aid of victim with regard to his/her repatriation and in his/her social rehabilitation. However the phenomenon is not appreciated in its health-related indicators: e.g sexually transmitted diseases remain outside of phenomenon study while these data lack, even internationally, despite the proposals of both feminine organisations and those that deal with the HIV/AIDS.

In Greece a medical protocol of victims of sexual assault does not exist both in the level of prevention of transmission of diseases as well as in the level of collection of forensic data (ACT UP).

Therapeutic intervention for the prevention of transmission of infections and for pregnancy has not been enacted as neither the diagnostic procedure (ACT UP).

The stigmatization of women with homoerotic orientation makes them an invisible population (HLCCG) that remains uncontrollable since there are no friendly health departments.

The proposals of NGO for the above remain without any answer on behalf of the Ministry of Health.

SUSTAINABLE FINANCING FOR SCALED – UP AIDS RESPONSES. (funding to face HIV/AIDS, access to drugs for the HIDPC)

Greece is a donor country in the Global Fund Against HIV/AIDS, Tuberculosis and Malaria, but it does not meet its obligations in the frames of development collaboration. With the occasion of meeting of UN on the MDGs (SEPTEMBER 2005), the NGOs submitted their demands on this subject to the Prime Minister:

1. The developed countries should correspond in their obligation of disposal of 0.7% of the GDP for the developmental help.
2. The debts of HIP countries should be given away.
3. Health and education infrastructures should be financed.
4. The handling of money of global fund should contribute in the health and education infrastructures but also in the study of infectious diseases and in the study of HIV resistant strains and tuberculosis.
5. The international organisations and the countries' representatives should work together for the decision- making process.
6. The World Health Organisation should accelerate the process of verification of generic medicines.
7. Access of generic medicines should be possible in all the HIP countries at least with high incidence of the HIV epidemic and where it is characterized as an "emergency".

Management of HIV/AIDS has to be a national issue, whereas exclusions of stakeholders and competitive behaviors should not exist. The CS and the seropositive individuals owe to be in the front line

STIGMATIZATION AND DISCRIMINATION. SUPPORTING NGOs. LEGISLATION

According to a recent research of the Department of sociology of NSPH, there are enough Greeks still have concerns against seropositive individuals.

This should be changed by now and it is one more proof of the lack of existence of continuous, scientifically drawn awareness campaigns. The stigmatization follows the seropositive individuals while they suffer continuous discrimination in all their social life. The discriminations that face the seropositive individuals so much in the job market and in the

medical care area as long as in their right of their self-disposal but also in their reproduction rights, cannot be fought if measures to fight these misconceptions are not taken.

The defence of rights of seropositive people remains a prayer book without practical application since no-one is punished for any violation.

As a result, the appropriate legal frame that provides taking measures and combatting discrimination in coordination with constant awareness campaigns on behalf of the state, is necessary

As it has already been reported the institutional frame for the activity, the aid and the evaluation of NGOs does not exist in Greece.

The relation of NGOs with the state remains an ambiguous one.

The state did not honour the UN Declaration of commitment of 2001 that asked for the empowerment of NGOs, both economically and institutionally. Characteristic is the attitude of the Ministry of Health, since none of the UNAIDS recommendations regarding the UNGASS meeting were ever followed.

No NGO or other institution, e.g academic or politician, was informed.

The attendance of NGOs was not sought, while no meeting with the leadership of the Ministry of Health on the subject of the UN Conference and the discussion of the relative subjects was achieved, despite our continuous and strenuous efforts.

On the contrary, access and communication with the Ministry of Foreign Affairs in their area of concern is at a very good level, probably because of its constant collaboration with NGOs and due to a better perception of international reality.

However the relation of the NGOs with the government institutions cannot be left in the good disposal of institutions. It owes to be legislated, continuous, in the frame of respect and recognition of services that NGOs provide. The intervention of UNAIDS, where and when this is also required, may be extremely helpful.

The role of NGOs owes to be critical and active.

The NGOs do not have to be agreeable to the state and their support cannot depend on this. If this happens, then the NGOs lose their autonomy and reliability._

ANNEX:

NGOs –ORGANIZATIONS-INSTITUTIONS WHO COLLABORATED

AKΓ: Free women movement

ENOW: European Organization of women

ANTIGONI: European observatory against discrimination and xenophobia

GREEK OBSERVATORY AGAINST VIOLENCE AGAINST WOMEN AND TRAFFICKING

IOM: international organization of migration

GOH: Greek organization of homosexuals

NSPH: National school of public health

IN. EQ: Institute of equality

C. R. A.P: center of research of action for peace

CFIL: Center for Inspirational living

SYNTHESIS:

SATTE: Organization for travestites and transsexuals

SYNASPISMOS: the youth department of left party

GREEK REITOX FOCAL POINT

HLCG: homosexual/lesbian community of Greece

OPHG: organization for the protection of Haemophiliacs in Greece