

SUBSECTORS OF SOCIAL CARE & SUPPORT SERVICES AND THEIR CHARACTERISTICS

Early Childhood Intervention

Early childhood intervention in Greece focuses on providing health, social support, and education services to children with disabilities 0 (usually 6 months and up) to 6 (or 7) years of age. There is a gap in public services for children aged 6 months to 2-years-old, with such services offered only by private institutions (interview with I. Bolanou, confirmed by K. Veneri). Furthermore, early intervention is not legally defined but only implemented on its own initiative resulting from population needs (comments of Day Care Centre Logos Nous, confirmed by I. Bolanou and K. Veneri).

Early childhood intervention services are provided by a) public institutions for early intervention, which are financed through private donations, sponsorships, EU funds, and the Ministry of Health; b) private institutions; c) non-profit organisations; d) non-governmental organisations; and e) associations of parents of children with disabilities, the latter being financed through private donations and sponsorships. All these organisations have their own operating rules, cater for different age ranges (Tavoulari, Katsoulis & Argyropoulos, 2014), and offer early intervention programmes on their own initiative or in collaboration with the Ministry of Education, Research and Religious Affairs. The programmes that are available at these organisations include the following:

- Part of pre-school education programmes provided in infant schools, nursery schools, and kindergartens;
- Part of the compulsory education programmes provided by state and/or private schools¹;
- Care outside the school environment, provided locally by municipalities in playgrounds, youth centres, and other kindergartens run by local and regional initiatives, as well as private centres;
- Care provided at home by educational assistants; and
- Athletic or cultural activities, and learning music or foreign languages, provided by the State or private centres (Karampalis and Michaelidou, 2010).

Pre-school education has recently been legally introduced (Law 4521/2018, Art. 30) as mandatory for all children when they reach the age of four. Consequently and regarding children with neurodevelopmental disorders, Special Education and Training (EAE) kindergartens, early intervention departments of EAE kindergartens, and mainstream kindergartens usually receive children from four to seven years of age. 'Inclusion support teachers' help with the integration of children with mild disabilities (such as learning disabilities or hyperactivity) into the mainstream kindergarten environment (source: interview with I. Bolanou). In addition, children with disabilities and special educational needs from four to seven years of age can attend the early intervention programme of the Hellenic Organisation for the Protection and Rehabilitation of Disabled Children (ELEPAP). ELEPAP is a non-profit organisation, whose funding is mainly covered through donations, as well as a grant from the Ministry of Health and Social Solidarity, parents' social security contributions, and legacies. ELEPAP attendance is equal to the attendance at any other special preschool education unit (Law 3699/2008, Art. 32).

Nevertheless, public institutions for early intervention are very few, with very limited available spaces, and long waiting lists. Moreover, waiting lists for diagnosis through the national health system is a very lengthy process, that may take up to six months (EASPD and Essl Foundation, 2016). The majority of early intervention services are offered by private therapy centres² or non-profit welfare organisations³. Parents pay initially for services (such as, physiotherapy, speech or occupational therapy), and then they are reimbursed by their insurance fund up to a maximum monthly amount,

¹The entrance age of children could be flexible depending on evaluation by KEDDY (Centres of Differential Diagnosis, Diagnosis, and Support of Special Educational Needs).

²Such a centre is 'Epafi' Children's Therapy Centre (Athens). The centre offers both early childhood intervention services (for 3 - 6 year olds) and services for older children (until 17 years of age). It offers occupational therapy (sensory integration), speech therapy, parents' counselling, psychological support for children and parents, and child psychiatrist services.

³Such an organisation is 'Theotokos Foundation' (https://www.theotokos.gr/en/theotokos) that provides early intervention services to preschool children aged 2.5 - 5 years with developmental delays, developmental intellectual disorders, and autism spectrum disorders (programmes are also offered to teenagers and young adults). The programme is provided in groups with a small teacher-to-student ratio as well as in individual educational, speech therapy, and occupational therapy sessions.



depending on their children's disability (for example, in 2018 it was up to €250/month for children with milder disabilities, and up to €440/month for children with more severe disabilities, including autism).

Children with disabilities or children whose parents suffer from physical or mental disability are given preference in public childcare and nursery schools (Ministry Decision No. C2b/oik8291/1984, Art. 4, Par. 2) (Ministry of the Interior, Public Administration and Decentralisation, 2007). However, young children with disabilities are often not able to attend kindergarten (either because there is none nearby or because they are not accepted due to the severity of their disability). In this case, families that can afford private care and intervention send their children to private therapy centres that act as 'kindergartens', where they can spend a few hours, usually in the mornings, by getting involved in creative activities, such as theatrical play, drawing, and exercising⁴. Due to the increase in the number of private therapy centres, there is no waiting time for enrolling young children with disabilities at these centres (source: interview with I. Bolanou).

Education Support

Special Education and Training, like mainstream education, is obligatory and forms an integral part of public and free education. Policy measures addressing equal opportunities for persons with disabilities have focussed on all levels of education, with a particular emphasis on restructuring special education – including vocational education – to be similar to mainstream⁵. Students with disabilities and special educational needs⁶ aged four to 22 receive free education, independent of what educational setting they are attending, i.e. whether mainstream, integrated or special schools.

All students with disabilities and special educational needs are assessed at Centres of Differential Diagnosis, Diagnosis, and Support of Special Educational Needs (KEDDY), which are decentralised public services, directly subordinated to the Ministry of Education, Research, and Religious Affairs. KEDDY are to be replaced by Centres for Educational Support (KESY) in April 2019, according to the new Law 4547/2018⁷. KESY are in fact the evolution of KEDDY and provide support regarding learning, social inclusion, psycho-emotional needs, inclusion of students with disabilities, school bullying, as well as career counselling.

KEDDY / KESY are also in charge of providing assessment for students with disabilities and special educational needs, in order to decide the most suitable schooling environment for them. Depending on KEDDY / KESY's assessment, students can attend: a) regular classes in a mainstream school, with more or less support provided by special education teachers and counsellors; b) specially-organised and suitably-staffed Integration Departments operating in general and vocational education schools; c) School Units for Special Education and Training – SMEAE: these are public schools throughout Greece, providing primary and secondary education to students with more severe disabilities and educational needs; d) school units or departments that function in hospitals, rehabilitation centres, juvenile-care institutions, institutions for the chronically-ill, or Mental Health Education and Rehabilitation Services; and e) home-schooling, with the help of a special primary and secondary education teacher and counselling by a 'support group', for students with serious short or long-term health problems, who cannot move and attend school (this is a public service, not outsourced to private entities)⁸.

⁴Only therapies – depending on each child's disability and up to a maximum monthly amount – are reimbursed, not 'kindergarten' services in such private therapy centres.

⁵For example, beginning with the 2017-2018 school year, special primary schools follow a six-hour schedule of compulsory classes daily, just like in mainstream schools (Ministry of Education, Research, and Religious Affairs, 2017). The restructuring concerning secondary special education has mainly focussed on modernising vocational training and improving transition to the labour market, mostly under the Greek Youth Guarantee Implementation Plan (Ministry of Labour, Social Security and Welfare, 2014).

⁶In Greece, the term 'students with disability and special educational needs' is used. This category refers to students with significant learning difficulties due to sensory, mental, cognitive, developmental, psychological, and neurological disorders. It also includes students with complex cognitive emotional and social difficulties due to abuse, as well as students with one or more special mental skills and talents (European Commission, Eurydice, 2018c, no page).

⁷Law 4547/2018 'Support structures for primary and secondary education'. Available at: https://www.kodiko.gr/nomologia/document_navigation/372828/nomos-4547-2018

⁸For more information on these types of schools, please check Law 3699/2008 'Special Education and Training of people with disabilities or special educational needs'. Available at: http://www.e-yliko.gr/amea/Vivlio_Pl/downloads/Vivlio_Ekp/kefalaia/10N3699.pdf



Greece Fact Sheet on Social Care & Support Services Sector for Persons with Disabilities

Table 1 provides an updated list of special education school units throughout Greece at the pre-primary, primary, and secondary level.

Table 1. Special education school units: pre-primary, primary, and secondary level (2018)

Special education school units	No
Special needs kindergartens	135
Day special needs kindergartens	17
Special needs primary schools	149
Day special needs primary schools	62
Special needs lower secondary schools	6
Special needs lower secondary schools with upper secondary school classes	3
Special vocational lower and upper secondary schools*	19
Special needs vocational education and training workshops (EEEEK)	90
Special needs technical vocational schools (TEE)	24
Total	505

Source: Most data come from the 2015 list of special education school units of the Ministry of Education, Research, and Religious Affairs (2015). The list has been updated according to the opening of more school units, as published by the Ministry of Education (https://www.minedu.gov.gr/eidiki-agwgi-2/sxoleia-eidiki-ekpaideusi-5?start=0).

There are 3,629 special education teachers employed in primary education, and 2,212 in secondary education (a 4% and 5.6% increase respectively, compared to the 2017-2018 school year). The recruitment of approximately 3,000 substitute Special Educational Personnel and Special Assistance Personnel is to follow shortly (Hellenic Ministry of Education, Research, and Religious Affairs, 2018).

Regarding accessible materials, and support measures and services for students with disabilities and special educational needs, these are provided by the Institute of Educational Policy, public universities, the KEDDY / KESY, and the SMEAE. More particularly, the Institute of Educational Policy, which is the official, public advisor on primary and secondary education matters of the Ministry of Education, offers accessible materials (such as materials for partially-sighted students), as well as teacher training on issues of inclusive education and differentiated instruction. Public universities design and implement accessible materials are designed and implemented by public universities as well, in the context of other programmes, for example, 'Education for foreign and repatriated pupils' (European Agency for Special Needs and Inclusive Education, 2018).

KEDDY / KESY are also in charge of providing free of charge support measures (for instance, planning and implementation of special education and rehabilitation programmes, and didactic methods), as well as special devices and equipment for students with blindness, hearing loss, and mobility disabilities, including e-equipment, software, logistics, and other solutions (European Commission, Eurydice, 2018b / 2018c). Furthermore, KEDDY / KESY and SMEAE provide support services, including educational, social, and psychological support, physiotherapy, speech therapy, counselling, transportation, and any other measures or services that aim at the promotion of equality for students with disabilities (Law 2817/2000, Art. 1, Par. 7)⁹ (Centre of European Constitutional Law, 2014).

^{*} In the 2017-2018 school year, Special Vocational Lower and Upper Secondary Schools were introduced (these schools were separate before). They operate under a single administration, school head, and schoolteachers' board (European Commission, Eurydice, 2018a).



Employment Support

Equality Law 3304/2005¹⁰ stipulates non-discrimination on account of disability (Ch. 3) but only in the area of employment (and not in the sectors of social protection and social security provisions). Policy measures aimed at promoting the employment of disabled people in Greece concentrate mostly on providing placements through disability-specific schemes, and do not generally address the wider impediments to entering the labour market, such as protection of workers' rights and accessibility of workplaces (Strati, 2018a). Existing employment schemes for people with disabilities include programmes and placements provided by the Hellenic Manpower Employment Organisation (OAED), centres for vocational training, Social Cooperatives for the Social Inclusion of Vulnerable Groups, and sheltered workshops.

The Hellenic Manpower Employment Organisation (OAED) is the public authority focussing on national policy programmes regarding promotion to employment, unemployment insurance and social protection of maternity and family, and vocational education and training. There are 121 local public employment services across the country, as well as six Employment Offices for Special Social Groups (in Athens, Thessaloniki, Larissa, Volos, Patras, and Herakleion-Crete), which aim at the integration into the labour market of population groups at risk of social exclusion, including people with disabilities. These latter offices offer psychosocial support, career orientation advice, and referral to mainstream employment and vocational training programmes, and provide various training vouchers, wage subsidy programmes, public work schemes, or social enterprising (Strati, 2018a)¹¹. In order to increase the employment of people with disabilities, OAED has also introduced a series of programmes aimed at employers, such as subsidising businesses that create a new place of employment for a person with at least 50% disability, and funding for necessary adjustments in the workplace (for example, ramps, accessible toilets, etc.) (OAED, 2017)¹².

In addition, there are more than 50 public Centres of Vocational Training, and more than 20 public Specialised Centres of Vocational Training for people with disabilities across various municipalities in Greece, co-funded by the Ministry of Employment and Social Solidarity, and the EU. The centres aim to promote employment, through vocational training, and provide social support and counselling to encourage the entrance or re-entrance of long-term unemployed and vulnerable groups – including people with disabilities – to the labour market (European Blind Union, nd).

Another employment scheme for people with disabilities across Greece are the Limited Liability Social Cooperatives (Koi.S.P.E.s), which are civil cooperatives that possess entrepreneurial capacity by law. These cooperatives run with national and EU funds, donations, contributions in kind, as well as income from sales, while members retain limited legal responsibility. The purpose of Koi.S.P.E.s is to facilitate the socioeconomic inclusion and occupational integration of people with serious mental problems and contribute to their treatment, and if possible, to their economic independence; for this purpose, at least 30% of their staff are people with mental disabilities. By law, Koi.S.P.E.s can only operate as Mental Health Units, and are overseen by the Mental Health Department of the Ministry of Health. Koi.S.P.E.s operate in many sectors, including tourism, environment, services, and agriculture (European Commission, 2014).

Concerning sheltered workshops, these run in most municipalities in Greece under the jurisdiction of the National System for Social Care. They are mostly operated by non-profit organisations (state and EU funding, donations), and day centres supervised by public hospitals (public funds). These workshops are provided as an alternative form of employment for people with all types of disabilities with at least 50% reduced work capacity, who usually make and sell small crafts, such as jewellery, candles, etc. (European Parliament, 2015). There is, however, no legislation for sheltered workshops in Greece; as a result, people employed in such workshops are not entitled to wages nor to any kind of employment protection.

¹⁰Law 3304/2005 Equal treatment irrespective of racial or nationality origin, religion, disability, age or sexual orientation, Available at: http://www.ypakp.gr/uploads/files/2538.pdf.

¹¹OAED has also two centres for the vocational training of people with disabilities, one in Athens and the other one in Thessaloniki. For more information, see http://www.oaed.gr/kek-amea.

¹²Other measures include the 10% mandatory employment quota scheme in the public sector for the employment of disabled people with 50% impairment level, and a 5% quota for parents, spouses or siblings of people with at least a 67% disability in all vacancies of the independent recruiting council for the public sector-ASEP. The same process applies to all EU / national-funded schemes of employment (Strati, 2018a). For the private sector, companies with more than 50 employees have to cover 8% of their staff with employees with disabilities and other socially-sensitive groups.



Day Care

Day care centres for people with disabilities provide services during set periods of the day. Their aim is to provide beneficiaries a framework for acquiring new skills, which will offer them a better quality of life, a higher level of autonomy, as well as social integration. The providers of day care centres for people with disabilities in Greece are primarily public institutions (public day care centres, public hospitals, or university hospitals) and private institutions (either for- or non-profit).

Table 2 presents the types of day care centres for people with disabilities available in Greece (European Union Agency for Fundamental Rights – FRA, 2015)¹³.

Table 2. Types of day care centres for people with disabilities

Type of day care centre	Users	Services	Typical provider	Typical funder	
Day care centres for people with physical disability (KDIF)	Adults with physical disabilities	Day care (max 16-hours daily) Services: professional	Mixed (Public, private, non-profit institutions)	EU funding / National Government	
Day care centres for people with sensory disability (KDIF)	Adults with sensory disabilities	training, information and entertainment, implementation of EU- funded programmes			
Day care centres for people with intellectual disability (KDIF)	Adults with intellectual disabilities	Turided programmes			
Mixed day care centres	Adults with multiple disabilities or different types of disability	Daytime support: health and hospitalisation services, training, recreational activities	Mixed (Public, private, non-profit institutions)	EU funding / National Government	
Day centres	I. Children, adolescents, and older people with mental, and intellectual disability II. People at risk of social exclusion III. Families of beneficiaries	Interventions at individual, group and collective level including needs assessment, skills training, therapeutic interventions, vocational training, recreational activities, family support, awareness	Mixed (Public and non- profit institutions)	EU funding / National government	
Mobile mental health units	Children, adolescents, and adults with mental disorders and serious psychosocial problems, behavioural and autistic disorders	Prevention and assessment of disorders, psychosocial rehabilitation, community education	Mixed (Hospitals, university hospitals, private non-profit organisations)	National government	
Mental health centres (non-residential)	Children, adults, and older people with mental health problems	Psychosocial rehabilitation, prevention and treatment of mental disorders, community awareness	Mixed (Hospitals, university hospitals, private_non-profit organisations)	National government	

Note: Day care centres for people with disabilities are provided across the country, with the exception of 'mobile mental health units' that provide services for mental health sectors where individuals have difficulty in accessing mental health services or where no sufficient mental health services exist.

¹³The website 'Noesi' (www.noesi.gr) offers a list with day care centres (particularly KDIF, see Table 2) available in the country. Noesi also provides up-to-date services for students with special educational needs and people with disabilities in Greece and Cyprus regarding education, health, and welfare. As of October 2018, there were 1,176 public, private, and non-governmental organisations and centres registered on the website that offer services for disabled people, with the majority of such services (34.2%) concentrated in the Attica region (administrative region encompassing the metropolitan area of Athens).



Depending on type of day care centre and target group, services may include transportation of beneficiaries to and from the centre, accommodation and nutrition, personalised programmes (occupational therapy, speech therapy, etc.), psychological support to beneficiaries and their families, creative and entertainment activities, as well as other services (e.g. self-help education, exhibition of beneficiaries' work, etc.). Some day care centres – particularly the ones targeting young adults – provide vocational workshops, which aim at improving beneficiaries' skills in order to aid their social and professional integration.

Living Support

Living support in Greece is provided by the National Organisation for Healthcare Provision (EOPPY), local municipalities, public university hospitals, and mental health units (i.e. private or non-profit mental health centres, and public medical-education centres for children).

Concerning the provision of domestic assistance, the two main programmes available in Greece are a) 'Services of hospitalisation and special mental healthcare at home', provided by public university psychiatric hospitals and mental health units; and b) 'Aid at Home', provided by local municipalities throughout the country. These programmes aim at ensuring independent living conditions at home for people with at least 67% disability, with the aim of eliminating their dependence and social exclusion.

The first programme is provided throughout Greece by university psychiatric hospitals (public), and mental health units, which include private or non-profit health centres that are funded by the Ministry of Health, and public medical-education centres for children. It offers in-home mental health services for children, adolescents and adults with mental disorders and serious psychosocial problems, behavioural disorders, and autistic disorders. The programme does not solely provide prevention, diagnosis and therapy, but also psychosocial rehabilitation and reintegration, community education, practical needs and skills, and interventions targeting family members. The same providers – together with university mental health institutes, which are public institutions funded by the Ministry of Health, and private centres that have acquired a special permit from the Ministry of Health – also offer Mobile Mental Health Units. These in-home mental health services are offered to people with disabilities who have difficulty in accessing mental health services and/or neighbouring mental health sectors do not have sufficient mental health services; such services are provided when called by the patient, family, friendly environment or voluntary support group. (European Union Agency for Fundamental Rights – FRA, 2015).

Local municipal authorities provide the 'Aid at Home' programme, which provides domestic services across the country to people with disabilities who face situations of isolation, family crisis or exclusion¹⁴. (European Commission, 2018). Regarding disability, people need to be certified as having at least 67% disability (any type of disability), independent of age, and receiving an individual income of less than 7.715,65 euros per year or a family income of less than 15.431,30 euros (2018). People with disabilities fulfilling these prerequisites file an application at municipal authorities that implement this programme; there is no waiting list¹⁵. The main services that are offered free of charge include social help provided by a social worker, nursing assistance provided by two nurses, and home help provided by a family assistant.

There are no personal assistance schemes available to people with disabilities in Greece offering choice and control over the support they receive, such as in the form of direct payments (Strati, 2017).

Concerning rehabilitation devices, including assistive technologies and consumable medical supplies, the National Organisation for Healthcare Provision (EOPPY) is in charge of providing and supervising such provisions. EOPPY is a public organisation, falling under the jurisdiction of the Ministry of Health, aiming at the provision of health services to active members, pensioners and their family dependents registered to the merging healthcare funds.

¹⁴The programme also offers services to elderly people.

¹⁵The continuation of this programme depends on the availability of funds. It was announced that the programme has secured funding until the end of 2019, having amassed 60 million euros / year from the retirement solidarity contribution account, the regular budget of the Ministry of Labour, the special contribution of insured people, and the regular budget of the Ministry of the Interior.

Provisions are awarded after medical assessment, and evaluation of the EOPPY's health committees; according to the needs / disabilities of each person, the devices or supplies can be awarded as often as necessary (for more information on various procedures and prices, please see 2018 Ministerial Decision EALE/G.P. 46846)¹⁶. Beneficiaries procure devices and supplies from the providers affiliated with EOPPY, EOPPY's special warehouses and pharmacies or from the free market. Provision is in cash, with cost ceilings, beneficiaries pay 25% of the cost, and then they are reimbursed by EOPPY¹⁷. No specific age or impairment levels apply (Strati, 2017).

Long-Term Institutional Care and Respite Care

Long-term institutional care services for people with disabilities are provided by the state, private non-profit organisations, and private for-profit organisations. It should be noted that there is a strong tradition of family responsibility in Greece, in the sense that family members usually provide care for the people with disability in the family (OECD, 2011).

Table 3 provides a list with the types of long-term institutional care available in Greece for people with disabilities (European Union Agency for Fundamental Rights – FRA, 2015).

Family support / respite care is not provided in Greece (European Union Agency for Fundamental Rights – FRA, 2017).

Leisure and Social-Life Support

There are various leisure and creative activities programmes aimed at people with disabilities in Greece, such as public or private Creative Activities Centres, tourism programmes provided by public organisations, ministries, and municipalities, as well as various clubs (such as athletic, dance, music, theatre) provided mostly by non-profit organisations and charities.

Creative Activities Centres (KDAP)¹⁸ are centres for young people that provide extra-curricular creative educational activities. Such activities can be offered throughout the country by a) municipalities and legal persons of public and private law in those municipalities; b) private law or non-profit companies; and c) other legal persons of public and private law, which can legally offer these services.. There are two types of KDAP: a) Children's Creative Activities Centres targeting children aged 5-12 with no disabilities or with mild kinetic or sensory problems (KDAP); and b) Centres for Creative Activities for People with Disabilities (KDAP-MEA), with no attendance age limit (Noesi, 2015). KDAP-MEA offer various services to people with disabilities and their families, including transfer of beneficiaries to and from the centre, specialised intervention, safe employment and leisure time use, development of social skills and integration into the local community, and family support.

KDAP- and KDAP-MEA are funded by the Hellenic Agency for Local Development and Local Government (EETAA) – the institutionalised operational partner of the government and local authorities – that in turn, is partially funded by EU structural funds, particularly the European Social Fund. People that are interested in joining a centre apply to the website of EETAA, provide necessary documents, and are selected depending on points (for example, 50 points for people with at least 35% disability). Then, the EETAA provides funding to the centre for each beneficiary, depending on the centre's space availability. For example, for the 2017-2018 period, the maximum amount per person was 5,000 euros for KDAP-MEA that function eight hours a day or 40 hours / week (Hellenic Agency for Local Development and Local Government, 2017).

¹⁶The 2018 Ministerial Decision EALE/G.P. 46846 regarding EOPPY's Unified Health Provision Regulation provides detailed information (beneficiaries, procedures, prices) on rehabilitation devices, visual and hearing aids, other materials and devices, KDIF, boarding houses, apartments and houses for supported living, physiotherapy, speech therapy, occupational therapy, and psychotherapy, among others (https://www.ygeianet.gr/images/site/1510/59330_large/ekpy.pdf).

¹⁷There is usually no waiting time for the procurement of devices or supplies. However, due to the deteriorating socioeconomic conditions in Greece, the increased patient participation in co-payments for pharmaceuticals and increased fees to access healthcare (Karanikolos and Kentikelenis, 2016), the unmet healthcare needs particularly of vulnerable groups, such as people with disabilities, have increased.

¹⁸The website Noesi (see footnote 17) provides a list with all the KDAP available in the country.

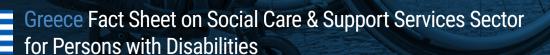


Table 3. Types of long-term institutional care for people with disabilities in Greece

Type of disability	Type(s) of institutional care	Services	Target group	Typical provider	Typical funder
Mental health disorders / psychosocial problems	Hostels a) In-hospital hostels b) Community hostels	Social rehabilitation, cultural activities, professional reintegration	Adults	a) National (hospitals) b) Public, private or non-profit organisations	EU funding / National Government
	Hostels and boarding houses for adolescents	Variable support (therapeutic environment away from family, hospitality)	Adolescents*	Mixed (State and non-profit institutions)	
	Psychiatric hospitals	24-hour support	Adults	National	National government
	Psychiatric wards for children	24-hour support	Children		
	Medical-educational centres for children	Therapy (physio, speech), educational activities	Children / adolescents	National (decentralised units of hospitals)	
	Foster families	Residence, personal expenses, participation in family activities, psychosocial integration, preparation for independent living	Children / adolescents / adults	Beneficiary's friendly or family environment, without direct relationship	
Mental health problems / intellectual disability	Boarding houses	High level of support (residence, therapy, and support)	Adults (19-30 / 31-55) and older people (56+)	Mixed (State and non-profit institutions)	EU funding / National government
	Sheltered housing	Variable support (psychosocial care)	Adults		
Mixed	Apartments for supported living for people with disabilities	Safe residence in own room, medical and hospitalisation care, entertainment, training	Adults (people with increased autonomy)		Mixed (Government other funds)
	Boarding houses for people with disabilities	Social rehabilitation, cultural and educational activities	Adults (people who cannot live independently)		EU funding / National government
	Therapy centres of chronical diseases	Occupational therapy, physiotherapy, social support	Adults with intellectual / physical disabilities	Mixed (National, non- profit institutions)	National government
	Private care homes for AMEA (persons with disabilities)	Variable support (medical, psychological), educational activities	Children / adults with different types of disability	Private	Private

^{*} Adolescents with delinquent behaviour, mental disorders or without serious mental disorders but with parents with serious disorders Note 1: Most types of long-term institutional care for people with disabilities provide mixed length of admission; exceptions are the apartments for supported living for people with disabilities and boarding houses for people with disabilities where beneficiaries can stay for more than two years, as well as hostels for adults where beneficiaries can stay for up to 36 months. Note 2: It is possible for private natural or legal persons to establish private (profit or non-profit) day centres, sheltered apartments, boarding houses, and hostels. The operation of these centres is subject to the issuance of a permit from the Ministry of Health.

Note 3: This table represents the status quo in 2015, and may not reflect entirely the situation at the time of drafting this factsheet in the end of 2018.



There are also various tourism services offered to people with disabilities across the country, including the following:

- Provision of social tourism coupon (Hellenic Tourism Organisation): seven-day subsidised holidays provided for people with at least 67% disability that have not been beneficiaries in the previous year;
- Social tourism (Workers' Organisation): eight-day holidays for people with at least 67% disability, who are required to pay a very little amount;
- Camping programme for people with disability (Ministry of Health and Social Support): children and adults with disability from 10 to 45 years of age, no charge¹⁹;
- Excursion programmes (Workers' Organisation): for people with at least 67% disability, one- three- and four-day excursions throughout the year;
- Bath therapy for people with disability (Ministry of National Defence): 20-day stay at healing baths for officers and soldiers, people with disabilities from the National Resistance, and officers and soldiers who became disabled during peace time while on duty; and
- Air therapy for people with disabilities (Ministry of National Defence): for officers and soldiers, people with disabilities from the National Resistance, and officers and soldiers who became disabled during peace time while on duty (Ministry of the Interior, Public Administration and Decentralisation, 2007)²⁰.

Furthermore, there are many charities, NGOs, and non-profit organisations that offer various cultural and recreational activities to people with disabilities (usually focussing on people with a particular disability). Such activities may include sports activities, excursions and camping holidays, arts and crafts, visits to exhibitions and museums²¹, music, drama, and dance. In order to finance their activities, these organisations rely on funds from the local authorities for short or long-term projects, EU funding, sponsorships from the private sector and companies, fund-raising events, and small contributions from participants.

FUTURE TRENDS

Under the Economic Adjustment Programmes that prioritise the stability of Greek institutions and the promotion of growth, competitiveness, and fiscal austerity, it is expected that important public resources will be privatised, in an effort to improve the efficiency of delivery of public goods and services (Strati, 2018b). This fact has already had an adverse impact on various economic sectors – particularly health and employment – and on vulnerable groups, such as people with disabilities (Rotarou and Sakellariou, 2017)²². Measures for the promotion of social inclusion, including disability equality, are planned for the near future, such as a National Mechanism for Monitoring, Evaluation and Coordination of Social Inclusion and Solidarity policy-making (by the Ministry of Labour, Social Security and Social Solidarity, and open

¹⁹During summer months, various municipalities offer camping activities as well. For example, for the 2018 summer period, fifteen municipalities offered such services to 13.000 people (8.000 children, 2.000 elderly, and 3.000 people with disabilities) (SofokleousIn, 2018).

²⁰For all these social activities programmes / services, people with disabilities need to fulfil certain prerequisites (low income, in particular) in order to be able to enjoy the benefits.

²¹The 'Culture Card' allows people with disability (at least 67%) and an accompanying individual for each blind person, person with mental disabilities or person in a wheelchair to enter free of charge to museums and archaeological sites, which fall under the competence of the Ministry of Education, Research, and Religious Affairs.

²²Nevertheless, despite the current crisis and the wide equality gaps among people with and without disabilities in Greece, there has been a decline in the unemployment rates and poverty risk for disabled people (16-64 years of age) as shown in 2015 EU SILC data, indicating that even under economic crises disability inequality can be lowered (Strati, 2018b). There are no more data available to see whether this trend has continued until now.

for submission until June 30th, 2020)²³, and the National Observatory for Disability (by the National Council of Disabled People – ESAEA, open for submission until December 31st, 2020)²⁴. Concerning tertiary education, the new law for Higher Education (Law 4485/2017) stipulates that a Centre for Lifelong Learning is to be established in every Higher Education institution; these centres will offer distance-learning programmes that will take into account the needs of persons with disabilities and/or special educational needs and ensure electronic accessibility of programmes (Art. 48, Par. 14) (Strati, 2018b).

CONDUCTED INTERVIEWS

Ioulieta Bolanou, occupational therapist, owner of 'Epafi' Children's Therapy Centre, Athens, October 2018 Katerina Veneri, Occupational Therapist, Child Mental Health Centre, 1st Attica Healthcare District, December 2018

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