



European Social **Policy Analysis** Network (ESPAN) Access for children in need to the key services covered by the European Child Guarantee

Greece

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Summary

On 14 June 2021, the Council of the European Union adopted a Recommendation establishing a "European Child Guarantee", with a view to guaranteeing access to six key services for "children in need":

- effective and free access to four services: high-quality early childhood education and care (ECEC); education and school-based activities; at least one healthy meal each school day; and healthcare; and
- effective access to two services: healthy nutrition and adequate housing.

The purpose of the present report is to assess the extent to which low-income children in Greece do indeed have effective (or effective and free) access to these services.

In Greece, public ECEC services are offered in infant and childcare centres as well as public pre-school settings. There is no universal legal entitlement to ECEC provided by infant and childcare centres, while attendance requires monthly fees that vary among municipalities. There are fee exemptions for households with low income, and subsidised places are offered for children fulfilling certain socio-economic criteria. As for pre-school settings, there is a universal legal entitlement for all children from age 4 and attendance is free. However, the lack of ECEC places, and the unequal distribution of ECEC provision, affect effective access to ECEC services, while in some cases cultural attitudes and complex bureaucratic procedures lead to a relatively low use of ECEC.

As for effective and free access to education, although all children have free access to public primary and secondary schools and to school textbooks, there are hidden costs which disproportionately affect low-income children. These relate to school supplies, participation in extra-mural activities, and transport. There are no cash benefits to help low-income children to meet educational costs. Low-income children do not have free access to school-based activities, and out-of-pocket costs constitute a barrier to low-income children's participation. There are differences between schools due to teacher initiative and engagement.

Regarding effective and free access to at least one healthy meal each school day, there is no statutory requirement for schools to provide meals to children. However, under the "School Meals" programme, students attending selected public primary schools receive free full healthy meals, though not all low-income children in the country are covered.

As to effective and free access to healthcare, all children in Greece have free access to vaccines, GPs and specialist care. Dental care is not covered in practice, and infant nursing services are only provided during stays in public hospitals. Low-income children have free access to prescribed medicines, though the income criterion used to determine eligibility is significantly lower than the national risk-of-poverty threshold. No cash benefits are provided to help meet healthcare costs, while the inadequacies of the public healthcare system impede effective access to healthcare for low-income children.

Regarding effective access for low-income children to healthy nutrition, this is mainly impeded by lack of affordability, lack of knowledge, and cultural and behavioural barriers. There is a limited number of means-tested measures that support access to healthy meals, though these are not solely aimed at low-income children. However, not all low-income children are effectively covered, as access and kind of provision depend on the area of residence.

Access to adequate housing is supported by a means-tested housing allowance provided to low-income people who live in rented residences as well as a few other measures related to energy support and protection of primary residences. Access to adequate housing for children is heavily impeded by the absence of social housing schemes.

Introduction

On 14 June 2021, the EU Member States unanimously adopted the Council Recommendation (EU) 2021/1004 establishing a "European Child Guarantee" (ECG).¹

The objective of the ECG is to offset the impact of poverty on children and to prevent and combat their social exclusion. To this end, it is recommended that Member States guarantee for "children in need" (defined as people **under 18** who are at risk of poverty or social exclusion – AROPE):

- effective and free access to four services: high-quality early childhood education and care (ECEC); education and school-based activities;² at least one healthy meal each school day; and healthcare; and
- effective access to two services: healthy nutrition and adequate housing.

According to the ECG Recommendation, *effective access* means "a situation in which services are readily available, affordable, accessible, of good quality, provided in a timely manner, and where the potential users are aware of their existence, as well as of entitlements to use them" (Article 3d). *Effective and free access* means "effective access" to the services, as well as free-of-charge provision – either by organising and supplying such services or by providing "adequate benefits to cover the costs or the charges of the services, or in such a way that financial circumstances will not pose an obstacle to equal access" (Article 3e).

The Recommendation directs the Member States to prepare action plans, covering the period until 2030, to explain how they will implement the Recommendation.³ These plans are to be submitted to the European Commission.

The purpose of the present report is to assess the extent to which children who are AROPE have effective and free access to four of the six services covered by the ECG and effective access to the other two (see above). Given that the eligibility criterion (or criteria) for accessing those services in individual Member States (at national and/or sub-national level, depending on how the service is organised) is/are not based on the EU definition of AROPE,⁴ the report focuses on access for **low-income children** to each of these services, using the national low-income criterion (or criteria) that apply (e.g. having a household income below a certain threshold or receiving the minimum income). Throughout this report, "low-income children" is to be understood as children living in low-income households.

In Greece, all six services covered by the ECG are primarily regulated at national level. Therefore, the report seeks to provide a general picture of the (effective/free) access for low-income children in the country.

¹ The full text of the ECG Recommendation is available at: https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=uriserv%3AOJ.L .2021.223.01.0014.01.ENG&toc=OJ%3AL%3A2021%3A223%3ATOC.

² According to the Recommendation (Article 3f), "school-based activities" means "learning by means of sport, leisure or cultural activities that take place within or outside of regular school hours or are organised by the school community".

³ Once they have been submitted to the European Commission, the plans are made publicly available online at: https://ec.europa.eu/social/main.jsp?catId=1428&langId=en.

⁴ According to the EU definition, children are AROPE if they live in a household that is at risk of poverty (below 60% of median income; hereafter AROP) and/or severely materially and socially deprived, and/or (quasi-)jobless. For the detailed definition of this indicator and all other EU social indicators agreed to date, see: https://ec.europa.eu/social/main.jsp?catId=756&langId=en. In 2021, EU Member States agreed a target to be reached by 2030: a reduction in the number of people AROPE in the EU by at least 15 million, including at least 5 million children.

The report is structured by service:

- effective and free access to high-quality ECEC;
- effective and free access to education and school-based activities;
- effective and free access to at least one healthy meal each school day;
- effective and free access to healthcare (e.g. free regular health examinations and follow-up treatment, and access to medicines, treatments and support);
- effective access to healthy nutrition;⁵ and
- effective access to adequate housing.⁶

1. Early childhood education and care (ECEC)

This section describes the situation regarding effective and free access for low-income children to ECEC services.

1.1 Mapping accessibility and affordability of ECEC

Table 1.1: Accessibility and affordability of ECEC

Childcare (usua	ally under age 3)	Pre-school setting (usually age 3 to compulsory school age)		
Accessibility	Affordability	Accessibility	Affordability	
NO	NO	ENT-ALL4years	FREE-ALL4years	

Note: "ENT-ALL4years" means a legal entitlement for all children from age 4. "NO" in the accessibility column means no entitlement or priority for low-income children. "FREE-ALL4years" means free for all children from age 4. "NO" in the affordability column means not free for low-income households. If the information differs between centre-based and home-based care, the information provided applies to centre-based care.

ECEC in Greece is offered in: (a) municipal infant centres (*Vrefikoi Stathmoi*) for children aged between 2 months and 2½ years, and childcare centres (*Paidikoi Stathmoi*) for children from age 2½ years to compulsory school age (4) – both come under the supervision of municipalities and are funded by the Ministry of Interior; and (b) public pre-school settings and kindergartens (*Nipiagogeia*) for children aged 4-5, under the responsibility of the Ministry of Education and Religious Affairs.⁷

As Table 1.1 shows, there is no universal legal entitlement to childcare provided by infant and childcare centres, and there is no priority access for low-income children. Attendance in public infant/childcare centres requires monthly board fees which are determined based on the family's income, while there are fee exemptions and/or reductions for families with low income. However, in the absence of centralised planning and uniform rules for the fees charged, local municipalities are autonomous in defining the income and social criteria for granting fee exemptions or reductions: as a result, these vary among the municipalities.

⁵ According to the Recommendation (Article 3g), "healthy meal" or "healthy nutrition" means "a balanced meal consumption, which provides children with nutrients necessary for their physical and mental development and for physical activity that complies with their physiological needs".

⁶ According to the Recommendation (Article 3h), "adequate housing" means "a dwelling that meets the current national technical standards, is in a reasonable state of repair, provides a reasonable degree of thermal comfort, and is available and accessible at an affordable cost".

⁷ It should be noted that ECEC in Greece is also offered by private (profit or non-profit) infant and childcare centres and private pre-primary schools.

Fee subsidies (taking the form of vouchers covering all or part of childcare costs) are provided for ECEC places in both public and private infant/childcare centres, within the framework of the programme "Promoting and supporting children's inclusion in pre-school education as well as school-age children, teenagers and people with disabilities access in creative activity centres". These vouchers are provided to children aged between 2 months and 4 years, provided their parents submit a successful application to the competent managing authority and meet specific socio-economic eligibility criteria, and to children with disabilities. The value of the vouchers depends on the ECEC structure category (i.e. infant centres, childcare centres, integrated care infant/childcare centres, creative centres for children, and creative centres for children with disabilities), the age of the child, and certain income-related eligibility criteria. A voucher that covers the full childcare costs ranges from €1,985 to €3,239 per year and €5,500 per year for children with disabilities, while the reduced voucher is €2,178 per year (EETAA, 2022).

To be eligible for a full voucher, a family's total gross annual income cannot exceed €27,000 when they have two children, while for a reduced voucher the respective income criterion is €33,000. These limits are increased by €3,000 for each additional child up to age 24, and are waived altogether for families of a child with a certified disability of at least 67%. The total eligible annual gross family income cannot exceed €36,000 for a full voucher and €42,000 for a reduced voucher, regardless of the family's size or composition. In all cases, parents must have submitted a tax declaration form in order for their children to be eligible. The allocation of the vouchers is determined by a specific rating scale which takes into consideration income criteria, family situation and social factors (i.e. living in poverty or being AROP based on the national threshold, single-parent families, divorced parents, large families, parents' employment status and family members with disabilities) (EETAA, 2022a). Priority is given to families who are living in poverty or who are AROP based on the national threshold.

As for pre-school settings, as shown in Table 1.1, there is a universal legal entitlement for all children from age 4, though low-income children do not have priority access. Attendance is free in public units for all children from age 4, including low-income children.

1.1.1 Conditions for qualifying as a "low-income child"

Not applicable.

1.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

Not applicable to pre-school settings, as access is free for all children aged 4 and 5. As for children under 4, as described in Section 1.1, low-income children are not entitled to free access to publicly funded childcare. Exceptions to this are children who benefit either from the fee exemptions provided by municipalities or from subsidised ECEC places. In the absence of centralised planning and uniform rules for the fees charged by municipalities, the income and social criteria set for the granting of fee exemptions vary among the municipalities. For example, for the 2022-2023 school year in the case of the municipality of Marousi in Attica region, no fees are charged for those families whose annual gross income (before taxes but excluding certain eligible expenses) does not exceed €17,000; whereas other municipalities, such as the municipality of Iraklio in Attica region and the municipality of Patras, set the annual gross income thresholds for the granting of zero fees at €10,000 and €25,000 respectively. On the other hand, no fee exemptions are granted in the case of the municipality of Thessaloniki but only fee reductions for certain categories, such as families with more than four children and single-parent families. Therefore, no comparison between the value of these criteria and the value of the national AROP threshold can be provided. Furthermore, there are no available data as to the number of children benefiting from fee exemptions provided by the

municipalities. Given this, no estimate can be provided of the overlaps between the groups of children benefiting from this intervention and AROPE children, though there are probably some children who fall into both categories. Additionally, no data are available regarding non-take-up among all children entitled to fee exemptions.

Subsidised ECEC places are provided to children fulfilling certain socio-economic eligibility criteria, as described in Section 1.1, under the programme called "Promoting and supporting children's inclusion in pre-school education as well as school-age children, teenagers and people with disabilities access in creative activity centres". The value of the lowest national income criterion for determining eligibility for these is €27,000 per year for a household of two adults and two children, which is significantly higher than the respective 2021 national AROP threshold (€11,028).⁸ According to the managing authority of the programme, for the 2022-2023 school year, 110,662 children were granted vouchers for infant care or childcare (EETAA, 2022b), though there is no information as to how many of these children actually used these vouchers to access ECEC services. Furthermore, there are no data available to allow an estimate of the overlaps between the groups of children benefiting from this intervention and AROPE children, though there are probably some children who fall into both categories. Additionally, no data are available regarding non-take-up among all children entitled to subsidised places, while no groups of children can be identified who are over-represented in the AROPE population but lack access to ECEC services.

1.2 Main barriers to effective and free access to ECEC for low-income children

1.2.1 Financial barriers

Although access to ECEC services for children aged between 2 months and 4 years is not free for low-income children, it could be considered quasi-free due to certain public interventions. As described in Section 1.1, there are fee exemptions and/or reductions for families with low income (though these vary among the municipalities) and (partial) subsidies, taking the form of vouchers. These interventions contribute to making ECEC services more affordable for all children, particularly for low-income children. However, there are no studies or data that have analysed whether the out-of-pocket costs for accessing ECEC are a financial barrier.

1.2.2 Non-financial barriers

Low-income children face a number of non-financial barriers to effective access to ECEC services in Greece. The most important barrier is a lack of ECEC places available, which can be particularly challenging for low-income households who cannot afford private ECEC. However, it should be pointed out that the issue of availability is a major problem for all children, irrespective of their economic status. Even in the case of free public ECEC services for children aged 4 and 5, for which there is a legal entitlement, there is an insufficient number of formal public ECEC places, which implies that all children may struggle to access ECEC services in their area. Moreover, alongside the lack of availability, there is an unequal distribution of ECEC provision. This is especially the case for low-income children residing in rural or remote areas, where there are few ECEC services available, as they may not be able to (or may have limited resources to) travel on a regular basis.

On top of these barriers, there are certain non-financial barriers that relate only to access to ECEC services for children up to age 4, for which attendance is not compulsory. In particular,

⁸ Eurostat, EU-SILC [ILC_LI01], downloaded on 17 March 2023.

there is a significant lack of ECEC places for this age group, especially in infant centres. This shortage is mainly due to the standards required for the establishment and operation of such centres (in terms of both infrastructure and personnel). Further to this, the absence of centralised planning and uniform rules for the fees charged by municipalities, especially as regards fee exemptions and reductions, creates disparities in the availability and affordability of ECEC services between municipalities. Additionally, even though the number of subsidised places offered has increased over recent years, demand continues to exceed supply. As a result, not all children who are granted a voucher, which can be used in both public and private ECEC centres, are able to use it, due to the lack of availability in their area of residence.

Moreover, there are some cultural attitudes that may influence whether families choose to use ECEC services or not. Some families do not use formal ECEC services because they or their relatives bear the responsibility of providing childcare, while others may have concerns about the quality or safety of ECEC services (ELSTAT, 2018; Hellenic Republic & Ministry of Labour and Social Affairs, 2022). Lastly, it must be noted that a lack of knowledge about the importance of the education services that are available, complex bureaucratic procedures, and language/communication barriers, can also have a negative effect on access to ECEC services, particularly for Roma, refugee and migrant children (UNICEF, 2021; Hellenic Republic & Ministry of Labour and Social Affairs, 2022).

1.3 Free meals provision for low-income children in ECEC

Not applicable to childcare (under age 4), as it is not free for low-income children. As for preschool settings (children aged 4 and 5), although access is free for low-income children, no free meals are provided; instead, parents are responsible for ensuring the provision of food to their children.

2. Education and school-based activities

This section describes the situation regarding effective and free access for low-income children to education and school-based activities.

Section 2.1 maps the main school costs in public primary and secondary education, distinguishing between the following:¹⁰

- compulsory basic school materials (schoolbag, pens, glue, scissors, etc.);
- compulsory school materials (textbooks, school supplies, notebooks, etc.);
- compulsory specific clothing (uniform, sports clothing);
- IT equipment requested by the school;
- sports equipment or musical instruments requested by the school;
- compulsory extramural activities (e.g. school trips, sport, culture) that are part of the curriculum;
- other compulsory fees or costs; and
- transport costs to or from school.

-

⁹ There are two different national legal regulatory frameworks that govern the licensing and operation of the two types of ECEC structures (public and private). These frameworks set a number of requirements, mainly concerning the fulfilment of certain criteria or minimum standards by ECEC providers (i.e. child-staff ratios, staff composition, minimum building standards, infrastructure and maximum number of places).

¹⁰ Tuition fees charged by private schools are not covered.

Section 2.2 briefly describes the cash benefits specifically intended to help meet educational costs.

Finally, Section 2.3 seeks to identify the main barriers that prevent low-income children from having effective and free access to school-based activities, as defined in the Council Recommendation establishing the ECG (see "Introduction" section). Given that the distinction between these activities and some of the activities covered above – especially the "compulsory extramural activities (e.g. school trips, sport, culture) that are part of the curriculum" – may not always be clear-cut, the focus of Section 2.3 is specifically on school-based activities that are not part of the curriculum.

2.1 Mapping the main school costs in public primary and secondary education

Table 2.1a: School costs of primary education (free for all/low-income children)

Basic material	Books	Clothing	IT	Sports or music equipment	Extra- mural activities	Other fees or costs	Transport
NO	ALL	NA	NA	NA	NO	NA	NO

Note: "ALL" means that this category is free for all children. "NO" means that most/all items in the category are not free for low-income children. "NA" (not applicable) means that this category is not requested/compulsory in the country.

In Greece, education (including pre-schooling, primary and lower secondary education) is compulsory for all children aged 4-15. All children have free access to public primary schools (without paying tuition fees) and all compulsory school textbooks are provided free of charge. However, as Table 2.1a shows, educational expenses concerning compulsory basic school materials (schoolbag, pens, glue, scissors, etc.), have to be met by parents. In the absence of a common school supply list for all schools in the country, teachers usually create a list of necessary supplies for the upcoming school year for each student, and parents are expected to purchase all the items included in the list. It is worth noting that these lists usually go beyond the necessary school materials that a pupil needs and include other supplies (stationery, papers, markers, etc.) that are needed to cover the overall needs of the school.

As regards specific clothing (uniform, sports clothing) and other sport or music equipment such as musical instruments, these are not compulsory: but, if they are requested by the school or teacher for specific purposes (e.g. school events, school parades),¹¹ parents are expected to fully cover the cost. Additionally, IT equipment is not compulsory in schools, while there are no other compulsory fees and costs related to education in public schools in Greece.

Moreover, as shown in Table 2.1a, costs for compulsory extra-mural activities (e.g. school trips, school visits, sport, culture) that are part of the curriculum are not covered for any child. Parents or guardians are therefore responsible for covering the costs, including transport expenses. This places an additional financial burden on parents, which is particularly significant for low-income households who may struggle to afford these costs. In addition, although the relevant legislation sets a maximum number of school-based activities per school year, the provision of such activities largely depends on the initiative and engagement of teachers in leading and organising them. Consequently, there can be substantial differences in access to these activities for children, with some schools offering more (and/or a wider range of) activities than others. Geographical disparities can also limit access to school-based

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¹¹ The frequency of these events differs between school units. However, it is noted that students' participation in these activities and events is optional.

activities, particularly for those living in remote or rural areas. These children may face a range of challenges, including limited availability of transport, longer travel times, and reduced access to resources – leading to reduced opportunities to participate. This can be especially problematic for low-income children, who may not have access to such activities outside school.

In addition, transport costs to and from school are not covered for any child, including low-income children. This is mainly due to the fact that enrolment in a specific school is contingent upon the child's permanent place of residence, which, according to the relevant legislation, must be within the school's district (i.e. reasonable walking distance from residence).

Table 2.1b: School costs of secondary education (free for all/low-income children)

Basic material	Books	Clothing	IT	Sports or music equipment	Extra- mural activities	Other fees or costs	Transport
NO	ALL	NA	NA	NA	NO	NA	NO

Note: "ALL" means that this category is free for all children. "NO" means that most/all items in the category are not free for low-income children. "NA" (not applicable) means that this category is not requested/compulsory in the country.

As Table 2.1b shows, the situation regarding school costs in secondary education in Greece is the same as for primary education. Thus, the description provided above for the costs of primary education also applies to secondary education.

Overall, the preceding analysis shows that, although all children attending public schools have free access to school textbooks, there are hidden costs associated with attending public primary and secondary schools. These costs relate mainly to the purchase of necessary school supplies and participation in extra-mural activities, which seem to disproportionately affect low-income children, thereby limiting their effective access to primary and secondary education.

2.1.1 Conditions for qualifying as a "low-income child"

Not applicable.

2.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

This is not applicable to books, as access is free for all children. It is also not applicable to basic materials and extra-mural activities, as there are no groups of children who have free access; while clothing, IT, and other fees or costs are not requested/compulsory in Greece.

As for transport costs, these are covered for children carrying heavy instruments and attending music and art secondary schools, children with disabilities attending special primary and secondary schools, and children residing more than 1.2 km from the school for primary education, and more than 2.5 km for secondary education. The latter concerns by and large students who live in remote or inaccessible areas of the country, due to the scarcity of schools in these areas. Nevertheless, the responsibility for providing transport to and from school for these children lies with the regional authorities, which must ensure children's free transfer. This can be done through the use of the public transport system (with special personalised student cards that are free of charge) or vehicles owned by the local authorities or public service provision contracts (see also Section 2.2).

However, there are no readily available data to allow the quantification of children who have free access to transport costs; and no estimate can be provided as to the overlaps between the groups of children who have free access to transport to and from schools and AROPE children – though there are probably some children who fall into both categories. Additionally,

no data are available regarding coverage and non-take-up; nor is there information as to groups of children over-represented in the AROPE population but lacking free access to transport costs. It is worth noting, however, that there are indications that children's transport to and from schools remains problematic, especially as regards children living in rural and remote areas, mainly due to a lack of transport means, inaccessibility of the area, time-consuming procurement processes and insufficient amounts provided (Greek Children's Ombudsman, 2019; UNICEF, 2021). The National Action Plan for implementing the 2021 Recommendation on the ECG acknowledges these issues (Hellenic Republic & Ministry of Labour and Social Affairs, 2022: 17).

2.2 Cash benefits whose specific purpose is to help meet educational costs

In Greece, there are no cash benefits whose specific purpose is to help all, low-income, or any other group of children to meet educational costs incurred in compulsory education. However, it should be noted that, if the competent regional authorities are unable to provide school transport for eligible children (described in Section 2.1.2) by any of the means available because it is either impossible or not financially profitable, a monthly allowance of €85 is provided to households with children who relocate to another area in order to ensure attendance at school; and partial reimbursement is provided by the regional authorities in cases where parents transport children to school by their own means. This amounts to €0.35 per kilometre and cannot exceed €1,500 per student per school year. Although data and studies analysing the adequacy of these allowances are not available, there are indications that the income support provided for transport to and from school is largely insufficient (Greek Children's Ombudsman, 2019; Hellenic Republic & Ministry of Labour and Social Affairs, 2022).

2.3 Main barriers to effective and free access to school-based activities for low-income children

2.3.1 Financial barriers

Low-income children do not have free access to school-based activities, and no financial support is provided to help households to meet the costs for children's participation in these activities. However, there are no studies or data available that have analysed whether the out-of-pocket costs for accessing school-based activities are a financial barrier for low-income children in Greece. Nevertheless, given that parents or guardians have to cover the total cost of school-based activities (transport, participation fee, materials, etc.), it may be argued that out-of-pocket costs for accessing these activities constitute a financial barrier to effective access for low-income children whose parents may struggle to afford these costs.

2.3.2 Non-financial barriers

The main non-financial barrier to effective and free access to school-based activities for low-income children relates to the fact that the organisation of these activities varies widely across the schools of the country. Similar to compulsory extra-mural activities, the provision of school-based activities largely depends on the initiative and engagement of teachers in leading and organising them. Consequently, there can be substantial differences in access to these activities for children, with some schools offering more, and/or a wider range of, activities than others.

3. Free meals at school

This section describes the situation regarding effective and free access for low-income children to at least one free healthy meal each school day.

3.1 Mapping free provision of school meals

In Greece, there is no statutory requirement for public primary and secondary schools to provide meals to children. This implies that all students, including low-income students, are expected to bring their own lunch or buy snacks from the school canteen. Despite this, a "School Meals" programme is implemented in selected public primary schools situated in various municipalities. It provides free full healthy meals to all children attending these schools (generally located in disadvantaged areas), aimed at covering children's nutritional needs, and at the same time promoting a Mediterranean diet. Children attending the selected schools, subject to the written consent of parents, receive a packed, hot full meal every day, which is delivered by private contractors or catering companies. In order to avoid stigmatisation, the programme covers all children attending the selected schools and not only those who belong to socially vulnerable groups.

Each school year, the Ministry of Labour and Social Affairs, in collaboration with the Ministry of Education and Religious Affairs, designates the schools included in the programme. Although the exact selection process is not specified, according to press releases from the competent ministries the selection process considers various social factors, such as the socioeconomic situation of the area, attendance of children belonging to vulnerable social groups, beneficiaries of the guaranteed minimum income (GMI), and children from households facing a high risk of poverty and/or severe material deprivation (Ministry of Labour and Social Affairs, 2022; Ministry of Education and Religious Affairs, 2020).

3.1.1 Conditions for qualifying as a "low-income child"

Not applicable: overall, access is not free for low-income children. As described in Section 3.1, access is not free for all low-income children, but only for children who attend selected public primary schools in which the School Meals programme is being implemented.

3.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

As described in Section 3.1, access to at least one free healthy meal each school day is not free for all low-income children in Greece. Only children who attend the selected public primary schools participating in the School Meals programme have access to school meals. According to the latest official data provided by Organisation for Welfare Benefits and Social Solidarity (OPEKA), for the 2022-2023 school year, the School Meals programme is being implemented in 1,629 (out of 4,378) primary schools in 133 out of 332 municipalities of the country, offering free meals to 217,267 children every school day (OPEKA, 2023). However, due to the lack of official disaggregated data, it is not possible to identify the number of children who are (or likely to be) AROPE among the total number benefiting from this programme. Given that the

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¹² It should be noted that school canteens do not sell full healthy meals.

¹³ The programme is implemented by the Ministry of Labour and Social Affairs, in collaboration with the Ministry of Education and Religious Affairs, and administered by the Organisation for Welfare Benefits and Social Solidarity (OPEKA), which is also responsible for outsourcing the catering service to private contractors or catering companies.

programme covers all children attending the selected public primary schools, non-take-up is unlikely, though there are no data available to confirm this. It is worth mentioning that low-income children attending schools not covered by the programme lack free access to school meals. In addition to this, as acknowledged in the National Action Plan for implementing the 2021 Recommendation on the ECG (Hellenic Republic & Ministry of Labour and Social Affairs, 2022), certain groups of children that are over-represented in the AROPE population, such as Roma children and children with a migrant or refugee background, are often not covered by the School Meals programme, due to insufficient and interrupted school attendance and higher school drop-out rates.

3.2 Main barriers to effective and free access to school meals for low-income children

3.2.1 Financial barriers

As described in Section 3.1, not all low-income children have effective and free access to school meals. However, there are no studies or data available analysing whether the out-of-pocket cost of such meals constitutes a financial barrier for them.

3.2.2 Non-financial barriers

The main non-financial barrier to effective access to at least one free healthy meal for low-income children in Greece concerns the non-universal national implementation of the School Meals programme. As already mentioned in Section 3.1, the programme is not implemented in all schools of the country; it is only addressed at children attending public primary schools (ages 6-12). As such, not all children are covered by the programme, while access to free school meals depends on the location of their residence. Even though the selection process for the schools covered by the programme takes into consideration social factors, the geographical disparities in its implementation mean that low-income children residing in areas not covered by the programme do not have access to school meals. In addition, bureaucratic delays in the public procurement process lead to subsequent delays in the launching of the programme and/or its smooth continuation, thus hindering effective access by low-income children to school meals for the whole school year.

4. Healthcare

This section describes the situation regarding effective and free access for low-income children to healthcare, focusing on vaccinations, care from a GP or infant nurses, specialist care, dental care (not orthodontics) and prescribed medicines.

4.1 Mapping the provision of free healthcare services and products

Table 4.1: Healthcare costs (free for all/low-income children)

Vaccination	GP	Infant nurses	Specialist care	Dental care (not orthodontics)	Prescribed medicines	
ALL	ALL	ALL	ALL	NO	POOR	

Note: "ALL" means that all services/products in the category are free for all children. "POOR" means that they are free for low-income children. "NO" means that most/all services/products are not free for low-income children.

As Table 4.1 shows, all children in Greece have access free of charge to the vaccines that are included in the national vaccination programme. The latter is formulated by a competent committee and is updated annually. Vaccination is covered by the National Organisation for the Provision of Health Services (EOPYY), which is a public corporate body that acts as the single purchaser of healthcare services, and the process can be completed free of charge to public local healthcare centres or paediatricians.

Moreover, all children have free access to care from GPs, infant nurses, and specialists. However, it is important to note that effective access to GPs and specialist healthcare for low-income children is hindered by the challenges that the public healthcare system in Greece faces (see also Section 4.3). As to access to care from infant nurses, it must be noted that these services are only provided during stays in public hospitals (public maternity hospitals after giving birth, and children's hospitals) and there are no such services available for free outside of a hospital setting.

Moreover, as Table 4.1 shows, there is no effective and free access for low-income children to dental care. Although legislation provides that all children are entitled to free dental care in public health centres and public hospitals, in practice there is no public coverage for dental care, and the population must pay for it out of pocket (Economou and Panteli, 2019). It is worth noting that Law 5015/2023 was adopted on 2 February 2023, making provision for income support, in the form of e-vouchers, in connexion with preventative dental care services to children aged 6-12. The "dentist pass" is funded by the recovery and resilience facility under the National Public Health Prevention Programme ("Spyros Doxiadis"), which is included in the National Recovery and Resilience Plan for Greece. However, no further information is available on the eligibility criteria, as the relevant ministerial decisions concerning all the detailed terms and conditions of this income support are still pending.¹⁴

Finally, prescribed medicines are free for low-income children. Although a 25% participation fee has been set, as a general rule, to be paid by insured people for medicines prescribed by a doctor, low-income families (including their children) are exempt from any co-payment.

4.1.1 Conditions for qualifying as a "low-income child"

This is not applicable to access to vaccinations, GPs, infant nurses, specialist care and dental care.

As for the conditions for qualifying as a low-income child for prescribed medicines, children have to fulfil specific income and assets criteria. In particular, to qualify as a low-income child for prescribed medicines the total net family income cannot exceed €4,800 per year for a family with two adults and two children (increased by €600 for each subsequent dependent member), while the total property's taxable value cannot be over €150,000 for an individual (increased by €15,000 for every additional household member). In addition, applicants must have submitted an income tax declaration for the previous tax year, while the total amount of bank deposits of the individual or of all the family members cannot exceed three times the corresponding annual income limit (e.g. €14,400 for a family with two children).

¹⁴ The relevant joint ministerial decision was issued on the 21st April 2023, i.e. after the finalisation of this report. It provides the detailed terms and conditions for the implementation of the programme. In particular, it explains that the programme provides an e-voucher worth €40 to all children aged 6-12 who legally reside in Greece. The voucher remains valid for six months, and covers part or all of the cost of a visit to a private dentist's office for a check of the child's oral hygiene, tooth fluoridation, cleaning and provision of oral hygiene information. The total budget is €29,816,086, funded by the Recovery and Resilience Facility. According to the latest available data (10 July 2023), approximately 129,000 applications have been submitted, although parents can still apply up to 22 October 2023. There is currently no indication of whether or not this programme will be renewed.

4.1.2 Relation between the group(s) of children who have free access and the AROPE population of children in the relevant age group(s)

Not applicable to access to vaccinations, GPs, infant nurses and specialist care, as access is free for all children. It is also not applicable to dental care as, in practice, there are no groups of children who have free access.

As for low-income children who are entitled to free access to prescribed medicines, it may be argued that the value of the income criterion used to determine eligibility is significantly lower than the 2021 national AROP threshold for a household of two adults and two children under 14 (i.e. €4,800 as against €11,028).¹⁵ In addition to those qualifying as low-income children for free prescribed medicines, children belonging to specific vulnerable social groups − such as beneficiaries of subsidiary protection, asylum-seekers, children residing in institutions, and low-income children with disabilities − are also granted free access to prescribed medicines.

However, there are no readily available data to allow the quantification of children who have free access to prescribed medicines; and no estimate can be provided as to the overlaps between the groups of children who have free access to prescribed medicines and AROPE children, though there are probably some children who fall into both categories. Additionally, no data are available regarding coverage and non-take-up, though it may be argued that other groups of children who are over-represented in the AROPE population lack free access to prescribed medicines. These include all children with disabilities, mental health issues and other special needs, Roma children and homeless children (UNICEF, 2021). The National Action Plan for implementing the 2021 Recommendation on the ECG typically includes these groups of children as being in need, although it does not specifically mention their access to prescribed medications free of charge.

4.2 Cash benefits whose specific purpose is to help meet healthcare costs

There are no cash benefits provided in Greece specifically to help meet healthcare costs, either for low-income children or any other group of children. This is largely because access to public primary (medical care and diagnostic examinations) and secondary (hospital treatment) healthcare services is free of charge for all children. However, it should be noted that the EOPYY provides partial compensation for certain costs, which are usually related to disabilities, to all insured people (not only to low-income children) (Konstantinidou *et al.*, 2022). It is also worth noting that the various income-support measures provided to low-income households with children, such as the child benefit, the rent subsidy and/or the GMI, could potentially be used to cover healthcare costs, given that there is no restriction on how the money can be spent. However, there is no evidence available as to the adequacy of these benefits, let alone the extent to which they cover out-of-pocket healthcare costs for low-income children.

4.3 Non-financial barriers to effective and free access to healthcare

The main non-financial barriers to effective and free access to healthcare relate to inadequacies characterising the public healthcare system in Greece, namely public underfunding, staff shortages and poor-quality provision. These issues undermine the effective

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¹⁵ Eurostat, EU-SILC [ILC_LI01], downloaded on 17 March 2023.

functioning of the whole public healthcare system and have a significant impact on the general population, especially on low-income children.

First of all, it must be pointed out that some services that are included in the health benefits package are not practically available, not only for low-income children but for all children (e.g. dental care, mental health services) (OECD/European Observatory on Health Systems and Policies, 2019). In particular, effective access to GPs is impeded due to the lack of available GPs, which is mainly because of their unwillingness to contract with the EOPYY. Despite efforts to reform the primary healthcare sector in recent years, ensuring an adequate supply of GPs continues to be a serious obstacle to the effective functioning of the whole primary healthcare system in Greece (OECD/European Observatory on Health Systems and Policies, 2019). Similarly, despite the fact that all children are entitled to free dental care in public healthcare units, the latter are severely understaffed, lacking dentists and specialised staff, and have limited capacity. Meanwhile, since there are no contractual arrangements with private sector dentists, no reimbursement is provided for dental care. Additionally, effective access to specialist care for low-income children can also be hindered due to the challenges faced by the public healthcare system. While all children are entitled to free access to specialist care, there are long waiting lists, which are often related to the shortage of specialist doctors. Although all children are faced with these challenges, their impact is undoubtedly greater for low-income children, whose parents may lack the resources to seek private healthcare alternatives. What is more, the compensation provided by the EOPYY for certain costs – such as spectacles, hearing aids, speech therapy, and psychotherapy - takes the form of reimbursement and is usually granted with severe delays (Greek Children's Ombudsman, 2019), which can be particularly challenging for low-income households who may not be able to afford these costs.

At the same time, given the continuous underfunding of public healthcare, there has been an increase in out-of-pocket payments, which is commonly acknowledged as creating barriers to healthcare access, especially for low-income population groups and their children. Public underfunding of healthcare also has a significant bearing on the widening of the gap between healthcare demand and service provision, long waiting lists, and the poor-quality provision of public healthcare services. This situation, in turn, implies that public healthcare provision is potentially short of meeting the specific healthcare needs of children, especially those in low-income or socially vulnerable groups (Ziomas *et al.*, 2018).

In addition, there is a profound imbalance in healthcare services provision, which is mainly due to the geographically uneven distribution of healthcare infrastructure and services, with the majority of healthcare-providers (both public and private) located in the urban areas of the country (mainly Athens and Thessaloniki). This is particularly the case with regard to children, especially children with disabilities and children with mental health problems; there is a significant lack of public mental health services for all children in Greece, especially in specialist health services for children with disabilities, while many geographical areas lack mental health services in general (Economou *et al.*, 2017; Ziomas *et al.*, 2018). Even in areas where public mental health services are available, there are long waiting lists, while access is often impeded due to the complex bureaucratic procedures involved in accessing these services.

Moreover, there are imbalances (in terms of both quantity and quality) among various health professions and specialisms, as well as inadequate human resource planning and uneven distribution of healthcare professionals across different regions and levels of care (Kaitelidou *et al.*, 2018; Economou and Panteli, 2019). There are shortages in specific specialisms (e.g. accident and emergency medicine, general practice, occupational medicine, geriatric medicine and intensive care), while paediatricians and healthcare services for certain illnesses/diseases (e.g. cancer) are missing altogether in rural areas and remote islands.

Following from the above, it may be argued that equity of access is undermined, particularly in regions where, due to the inability of public facilities to provide the necessary services, patients are forced to pay to use private services (Economou *et al.*, 2017; Ziomas *et al.*, 2018). This situation implies that access to healthcare is heavily dependent on the location of residence of the person in need. This tends, in turn, to increase both the cost and the travel times for those who are living in rural/remote areas, creating additional barriers to access to healthcare, especially for all those living on the islands and in isolated rural areas of the country, and more so for children.

Finally, it is worth noting that, on top of the barriers identified for the general population, Roma, refugee and migrant children are faced with additional barriers relating to inadequate information on access to services and on the functioning of the system, delays in obtaining the necessary documentation, administrative burdens, language and communication difficulties, geographical remoteness, social norms and in some cases negative stereotypes (UNICEF, 2021a; OECD/European Observatory on Health Systems and Policies, 2021).

5. Healthy nutrition

This section describes the situation regarding effective access for low-income children to healthy nutrition.

5.1 Main barriers to effective access to healthy nutrition

5.1.1 Financial barriers

The main financial barriers to effective access to healthy nutrition for low-income children in Greece are related to financial constraints. Many families in Greece, particularly those living on low incomes, may struggle to meet basic needs, including nutrition. Low-income households face great challenges in affording healthy and nutritious food for their children, as these types of foods tend to be more expensive than less healthy options. This affordability issue was highlighted in UNICEF's "Deep Dive" study (UNICEF, 2021) and confirmed by findings of focus groups conducted for the formulation of the National Action Plan for implementing the 2021 Recommendation on the ECG (Annexes xiii and xvi of the Hellenic Republic & Ministry of Labour and Social Affairs, 2022). It can be further supported by relevant Eurostat data showing that, in 2021, 35.4% of AROP households with dependent children in Greece were unable to afford a meal with meat, chicken, fish (or vegetarian equivalent) every second day, compared with 16.1% for the EU-27.16

Undoubtedly, this also relates to the inadequacy of social transfers. Although hard evidence is not available, it may be argued that the income support provided to households with children facing economic difficulties does not appear to be sufficient to ensure effective access to healthy nutrition. To illustrate this, a household consisting of two adults and two children with an annual gross income (before taxes but excluding social contributions) of up to €12,000 receives only €1,680 per year from the child benefit, which is a low amount to contribute to children's needs.

¹⁶ Eurostat, EU-SILC [ILC_MDES03], downloaded on 17 February 2023.

5.1.2 Non-financial barriers

Low-income children in Greece face several non-financial barriers that can hinder access to healthy meals. These relate mainly to a lack of knowledge, cultural factors, and behavioural and structural issues. In particular, some families may lack knowledge or education about healthy eating and balanced nutrition, which can make it difficult for them to make informed decisions about feeding their children. This issue is especially pronounced for groups such as Roma, refugee and migrant children, for whom cultural or social factors may also play a role in limiting access to healthy food. Evidence from the focus groups conducted for the formulation of the National Action Plan for implementing the 2021 Recommendation on the ECG (Annexes xiii and xvi of the Hellenic Republic & Ministry of Labour and Social Affairs, 2022) confirms that a lack of knowledge about what constitutes a healthy diet is among the main barriers to effective access to healthy meals, not only for low-income children but for most children in the country.

In addition, it may be argued that behavioural barriers may also undermine effective access to healthy nutrition. As a policy brief on child poverty and social exclusion in Greece highlighted (UNICEF, 2021b) "heavy family work-loads and inability to prepare a healthy meal at home on a daily basis [...], low educational level of women, poor dietary habits [...] are some of the factors associated with the poor dietary habits of children in Greece" (p. 19). Finally, it is worth noting that structural issues also hinder access, not only for low-income children but for all children, to healthy meals. This concerns, in particular, the absence of a comprehensive policy framework on nutrition at the national level. As acknowledged in the Deep Dive study (UNICEF, 2021) and in the National Action Plan for the ECG (Hellenic Republic & Ministry of Labour and Social Affairs, 2022), the very few policy measures implemented in various forms and under different eligibility criteria at the local level remain fragmented. As a result, not all children in need are covered, while access to the various measures implemented as well as the kind of provision depend on where the individual in need lives (see also Section 5.2).

5.2 Publicly funded measures supporting access to healthy nutrition

In Greece, low-income children can benefit from two measures that support access to healthy meals (apart from school meals).¹⁷ These measures are addressed at the general population, including low-income children. To begin with, individuals fulfilling specific criteria can benefit from the measures implemented under the Greek Operational Programme "Food and Basic Materials Assistance to the Most Deprived through the Fund for European Aid to the Most Deprived", which is heavily co-financed by the EU. The programme provides, among other things, food packages to the most deprived members of society, including low-income children, through social partnerships established at local and regional levels. Although the eligibility criteria may vary slightly depending on the region or local authority, individuals must generally: (1) be legal and permanent residents of Greece; (2) possess a social security number (AMKA) certificate; (3) be beneficiaries of the GMI; and (4) have requested to be included in the programme during their application to become eligible for the GMI. In practice, this means that beneficiaries have to fulfil the income and property criteria that apply to the GMI. These depend on the size and composition of the household. For example, for a household consisting of two adults and one child, the total gross income (before taxes but excluding social contributions) obtained during the six months preceding the submission of the application should not exceed €2,100, while the total property's taxable value should not be over €130,000. The above

¹⁷ School meals provided within school are covered in Section 3.

amounts are increased for each additional adult and dependent child in the household (Ziomas et al., 2017).

The second measure concerns the operation of social grocery stores at the local level as part of the "network of social structures for tackling poverty". Access to social grocery stores is granted based on specific income and social eligibility criteria, which vary from municipality to municipality. It should be noted, however, that GMI beneficiaries who meet the eligibility criteria can also be referred to social grocery stores under the second pillar of the GMI, which concerns access to social services and goods. 9

Overall, it is important to emphasise that, although the above-mentioned measures are beneficial in supporting access for low-income children to healthy meals (outside of school), their effectiveness is significantly affected by the lack of national co-ordination in their implementation. This means that the availability, eligibility criteria and type of provision vary widely depending on the area, since their implementation is highly dependent on the availability of resources and the level of commitment from local authorities. As a result, not all children in need are effectively covered, while access to these measures largely depends on where the individual in need lives.

6. Adequate housing

This section describes the situation regarding effective access for low-income children to adequate housing.

6.1 Publicly funded measures supporting access to adequate housing – Housing allowances

The rent subsidy is a means-tested housing allowance provided to low-income households who live in rented residences. The amount of the rent subsidy is set at €70 per month for a single-person household, increased by €35 per month for each additional household member (adult or child). For example, a household comprising two adults and two children receives €175 per month. The total amount of the rent subsidy cannot exceed €210 per month, irrespective of the composition of the household. Beneficiaries must have been legal and permanent residents of the country during the five years²⁰ preceding the submission of the application and must fulfil, cumulatively, certain criteria on income and assets. As to the income eligibility criteria, the total annual gross income (before taxes but excluding social contributions) of a single-person household cannot exceed €7,000; this amount is increased by €3,500 for each additional household member adult or child (e.g. €17,500 for a household with two children). The total eligible annual gross income cannot exceed €21,000, irrespective of the composition of the household (Ziomas *et al.*, 2019). Additionally, in order to qualify for this benefit, the property's total taxable value cannot exceed €150,000 for each person (increased by €15,000 for every additional household member) and the total amount of bank

¹⁸ This EU co-funded network was launched in 2012 and provided for the establishment and operation of a range of institutions, such as social pharmacies, social grocery stores, soup kitchens, municipal vegetable gardens, time banks, mediation offices, overnight shelters and day centres for homeless people.

¹⁹ The GMI is addressed at households living in extreme poverty and is based on three pillars: i) income support; ii) access to social services and goods; and iii) activation services.

²⁰ Exceptions to this are third-country nationals (who have not been granted refugee status and are not beneficiaries of subsidiary protection). In order to receive the rent subsidy, they must have legally and permanently resided in Greece over the 12 years prior to their application (instead of five) (Konstantinidou and Capella, 2020).

deposits or/and the current value of shares and bonds cannot exceed €7,000 per person (increased by €3,500 for every additional household member). On top of these criteria, beneficiaries are obliged to submit tax declarations every year, while the provision of the rent subsidy to households with children is contingent upon their enrolment in school and regular attendance by children of compulsory school age (Konstantinidou and Capella, 2020). Finally, it is worth noting that households reporting expenses that fall under the luxury living tax provisions and/or over €1,500 for private school tuition fees are not eligible for the rent subsidy. Although there are no studies or data available as to the adequacy of this allowance in covering housing costs for low-income households with children, it may be argued that the amount of the rent subsidy is particularly low in relation to rental prices (Siatista *et al.*, 2022).

Moreover, housing allowances are also provided in the context of the "Housing and Work for the Homeless" programme. This programme is currently implemented in 43 municipalities and is exclusively aimed at homeless people (including their children).²¹ It provides rent subsidies to beneficiaries for up to 24 months,²² covering basic expenses for household goods and utilities, as well as job subsidies for up to 12 months at a rate of at least 20% of adult beneficiaries. At the same time, it provides psycho-social support services to the beneficiaries for their smooth reintegration into the labour market and society. However, there are no studies or data publicly available as to the adequacy of the programme's provisions in covering housing costs for its beneficiaries.

In addition, there are some other measures which support access to adequate housing for low-income households (Ziomas *et al.*, 2020; Konstantinidou and Capella, 2022). These are as follows.

• The social residential tariff provides a discount on the electricity costs of beneficiaries' primary residence, up to a certain consumption limit, depending on the size and composition of the household and on meeting specific eligibility criteria. The discount only concerns electricity costs and not the other regulated charges imposed by the relevant legislation on residential consumers. More specifically, the social residential tariff is applied to the part of consumption up to the limit set for each beneficiary, provided consumption is higher than or equal to 200 kWh for each four-month period. Limits on consumption depend on the size and composition of the household. The limit is set at 1,400 kWh for a single-person household, increased by 200 kWh for each additional adult member and by 100 kWh for each additional dependent child. There is a maximum limit of 2,400 kWh, irrespective of the number of household members.

The beneficiaries of the social residential tariff are divided into two categories (A and B), subject to certain eligibility criteria. In particular, those beneficiaries who satisfy all income, property and residence eligibility criteria for the GMI scheme (as described in Section 5.2) benefit from the social residential tariff − category A. These beneficiaries are entitled to reduced tariffs (a discount of 0.075€/kWh), which leads to a total discount of 34-43% depending on their consumption. In addition, they are fully exempted from certain regulated charges (i.e. use-of-system and use-of-network charges) within their electricity consumption limits.

As to the beneficiaries of the social residential tariff – category B, they must fulfil, cumulatively, certain criteria on income and assets. In particular, to be eligible, the

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²¹ In particular, the programme is aimed at homeless families with children who: (a) are accommodated in transitional accommodation hostels and overnight shelters or who make use of homeless day centre services; (b) have been registered as homeless by municipal social services or social welfare centres; (c) are accommodated in hostels for women victims of violence and/or multiple discrimination; and (d) are accommodated in hostels for drug addicts and do not have access to a residence.

²² The monthly amount of the rent subsidy provided under this programme is up to €250 for a single-person household, up to €300 for two-person households and up to €350 for households with three or more people.

beneficiaries and their household members should have an annual gross income (before taxes but excluding certain eligible expenses) of up to €9,000 for a single-person household, while for each additional adult, this amount is increased by €4,500 and for each additional dependent child by €2,250 (e.g. €18,000 for a household with two adults and two children). The total eligible annual gross income cannot exceed €31,500, irrespective of the composition of the household. These amounts are increased by €8,000 in the case of a person with a certified disability of at least 67% residing in the household and by €15,000 for households with a person who requires mechanical support through the use of medical devices.

Moreover, the total taxable property value of a single-person household cannot be over €120,000, increased by €15,000 for each additional member of the household (adult or child), and the maximum total taxable value of the property cannot exceed €180,000. Households reporting expenses that fall under the luxury living tax provisions and/or expenses for private school tuition fees and for domestic staff are not eligible. The beneficiaries of the social residential tariff (category B) are entitled to reduced tariffs (a discount of 0.045€/kWh), which leads to a total discount of 20-26% depending on their consumption.

- The "vulnerable electricity customers registry" offers special protective measures, such as: protection against the electricity supplier disabling the electricity meter (electricity cut-off) due to outstanding debts during the winter period (November to March) and the summer period (July and August); the possibility of partial and interest-free payment of electricity bills; and longer deadlines for the payment of electricity bills and electricity cut-offs due to outstanding debts (Ziomas et al., 2020). According to the relevant ministerial decision, residential electricity customers may be included in the vulnerable electricity customers registry if they belong to one of the following categories: (a) customers already included in the social residential tariff; (b) households which include member(s) who need life support with medical devices (with the same income criteria applied to beneficiaries of the social residential tariff); and (c) customers who have reached the age of 70, provided that all other (if any) adult members of the household have reached this age limit (with the same income criteria applied for the social residential tariff, increased by €8,000; no property criteria are applied).
- The heating subsidy is a means-tested subsidy granted to eligible households to help them meet their energy needs for heating. The amount of the heating oil subsidy is €100-€800 per year depending on the beneficiary's area of residence and the size of their household. Beneficiaries receive the subsidy to help with the purchase of heating means, the value of which must be equal to (or higher than) twice the subsidy to which they are entitled. In order to qualify for the heating subsidy, beneficiaries must fulfil, cumulatively, certain income and property criteria. In particular, in order for a single-(unmarried) beneficiary to be eligible their total annual gross income (before taxes but excluding certain eligible expenses) cannot exceed €16,000; for married or contractually cohabiting beneficiaries the total income cannot exceed €24,000, increased by €3,000 for each child. For single-parent households, the total annual income cannot exceed €27,000, increased by €3,000 for each dependent child. Moreover, the total taxable value of the single (unmarried) beneficiary's property cannot be over €200,000, while the respective amount for married or contractually cohabitating beneficiaries cannot exceed €300,000.
- A one-off special assistance allowance for reconnections to electricity suppliers is available to eligible households. The amount is determined by the level of their debt and is paid directly to providers. In particular, the special assistance covers the entire debt of households with a total debt of up to €6,000, 75% of the debt of households with a total debt of €6,000-€9,000; 50% of the debt of households with a total debt of

€9,000-€12,000; and 30% of the debt of households with a total debt of more than €12,000. The outstanding balance has to be repaid by the household in interest-free monthly instalments.

6.2 Publicly funded measures supporting access to adequate housing – Social housing

6.2.1 Mapping the provision of social housing

There is no provision for social housing in Greece. The only substantial form of social housing policy was, until 2011, the housing schemes run by the Workers' Housing Organisation²³ (OEK), which were self-financed by special social insurance surcharges on wages partly paid by the employer and partly by the employee. These schemes were aimed exclusively at low-income workers/employees in the private sector, and included the provision of houses/apartments, housing benefits, rent benefits and low-interest loans. In 2012, the OEK was abolished²⁴ (Law 4062/2012) and, as a result, no public housing provisions have existed for low-income people since then, let alone for the general population.

It should be noted that, in September 2022, the government presented²⁵ a social housing strategy, "My House!",²⁶ which includes a number of new measures – though none is specifically targeted at low-income households with children. In this context, Law 5006/2022 was recently adopted (December 2022), which introduced some of the measures included in the strategy that are aimed at establishing forms of housing support for young people, though these are not yet implemented. In addition, it should be noted that a policy initiative concerning the renovation of 100 apartments (70 in the municipality of Athens and 30 in the municipality of Thessaloniki) for 250 beneficiaries is mentioned in the National Recovery and Resilience Plan (objective 3.4) (European Commission, 2021). According to the description of this measure, which is expected to be completed by the end of 2024, only renovation costs will be funded by the Recovery and Resilience Fund with the overall objective to develop a social housing policy for vulnerable groups. However, at present no information is available as to the beneficiaries, or the actual details, of this measure.

6.2.2 Main barriers to effective access to social housing

6.2.2.1 Financial barriers

Not applicable given the absence of social housing schemes in Greece.

6.2.2.2 Non-financial barriers

Not applicable given the absence of social housing schemes in Greece.

²³ The OEK was under the supervision of the Ministry of Labour, Social Security and Welfare, and financed by workers and employers' contributions.

²⁴ It should be noted that, since the abolition of the OEK, the Public Employment Service has undertaken the responsibility for the debt settlement of those workers who had taken low-interest loans under the OEK's relevant scheme.

²⁵ See: https://government.gov.gr/parousiasi-tis-stratigikis-kinonikis-stegasis-spiti-mou/ (in Greek).

²⁶ In Greek: Στρατηγική Κοινωνικής Στέγασης, "Σπίτι Μου!".

6.3 Publicly funded measures supporting access to adequate housing – Other measures

Apart from the measures described in Section 6.1, there are some other measures that support access to adequate housing, though they are not specifically targeted at low-income households with children.

Firstly, over-indebted households can use the provisions for debt restructuring (out-of-court debt settlement mechanism, non-performing insolvency code) under the insolvency framework introduced by Law 4738/2020 in October 2020. In this context, there are certain provisions for the protection of primary residences. In particular, households which use the out-of-court debt settlement mechanism and fulfil the eligibility criteria that apply for the rent subsidy (see Section 6.1) receive monthly subsidies on their loan for a period up to five years. This subsidy is equal to the monthly rent subsidy they would be entitled to if they were renting their dwelling (see Section 6.1).

Secondly, certain over-indebted households that cannot benefit from the debt restructuring provisions are eligible for full debt discharges. According to Law 4738/2020, primary residences are protected through a sale and lease-back scheme (a "Second Chance" arrangement) that allows vulnerable debtors who fulfil specific eligibility criteria to continue living in their primary residence but paying rent to a private sector legal entity selected by the state. However, although this scheme was supposed to enter into force in January 2021, the relevant ministerial decisions that will determine the details of this procedure are still pending. To accommodate for these delays, the government adopted in March 2022 an interim scheme, which was launched in mid-September 2022. This scheme provides, for a maximum of 15 months, a subsidy equal to the monthly rent subsidy people would be entitled to if they were renting their dwelling, on loans taken out by certified vulnerable debtors (under the new insolvency code) related to their primary residences.²⁷

²⁷ For more information see: http://www.keyd.gov.gr/epidothsh-stegastikoy/ (in Greek).

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