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NATIONAL REPORT GREECE

LGBTIQ Detainees

“Strengthening the rights of LGBTIQ detainees in the EU”



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LGBTIQ Detainees 'Strengthening the rights of LGBTIQ detainees in the EU'

NATIONAL REPORT GREECE

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PROJECT CONSORTIUM

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ABBREVIATIONS

| | |
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| Allocation / Placement | The decision in which specific detention facility a convicted person/ person in pre-trial detention is assigned to (e.g., male or female facility). Usually, the allocation is closely linked to the classification of the detainee, which includes a comprehensive risk assessment. This term is used interchangeably with “placement”. |
| Bisexual | A person who is physically, romantically and/or emotionally attracted to people of two (or more) sexes or genders. ¹ |
| Cisgender | A person who identifies with the gender that aligns with the gender assigned at birth. |
| Cisnormativity | The assumption that cisgender people, those whose gender identity matches their biological sex, are the norm or default, perpetuating the idea that other gender identities are abnormal or less legitimate. |
| Deprivation of liberty | Any form of detention or imprisonment or the placement of a person in a detention setting where a person is not free to leave at will, as ordered by a judicial, administrative or other authority. ² |
| Detainee | In the framework of this project, ‘detainee’ refers to persons who are deprived of liberty within the criminal justice context (including both pre-trial detention and imprisonment after conviction). |
| Gay | Primarily used to describe a man who is (physically, romantically and/or emotionally) attracted to other men; may also be used to describe both gay men and women. ³ |
| Gender | Gender can be understood as a socially constructed set of norms, roles and behaviours associated with being a man (or boy), woman (or girl), or other gender. |
| Gender identity | Each person’s deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth, including their personal sense of their body (which may involve, if freely chosen, modification of bodily appearance or function by medical, surgical or other means) and other expressions of gender, including dress, speech and mannerisms. ⁴ |

¹ Association for the Prevention of Torture (APT), Towards the Effective Protection of LGBTIQ Persons Deprived of Liberty: A Monitoring Guide (2018), page 17, <https://www.apr.ch/knowledge-hub/publications/towards-effective-protection-lgbti-persons-deprived-liberty-monitoring> (last accessed: 17 July 2025).

² See also: Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (9 January 2003), A /RES/57/199, Article 4, https://treaties.un.org/doc/source/docs/A_RES_57_199-E.pdf (last accessed: 17 July 2025).

³ APT, Towards the Effective Protection of LGBTIQ Persons Deprived of Liberty: A Monitoring Guide (2018), page 18, <https://www.apr.ch/knowledge-hub/publications/towards-effective-protection-lgbti-persons-deprived-liberty-monitoring> (last accessed: 17 July 2025).

⁴ Yogyakarta Principles, <https://yogyakartaprinciples.org/> (last accessed: 17 July 2025).



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| Gender expression | Describes how an individual publicly expresses or presents their gender. This may include behaviour, outwards appearance (e.g., hair, make-up, choice of clothes, body language, voice). ⁵ |
| Gender affirming surgery/ procedures | Also sometimes called “sex reassignment surgery;” this includes gender confirmation/affirmation surgery, i.e., a surgical procedure, bringing a person’s physical appearance and genitals into alignment with their gender identity. ⁶ |
| Gender-diverse | A person whose gender identity, including their gender expression, is at odds with what is perceived as being the gender norm in a particular context at a particular point in time, including those who do not place themselves in the male/female binary. ⁷ Transgender is a more specific form of gender-diverse. |
| Heteronormativity | The assumption that heterosexuality is the only (normal) or natural expression of sexuality, and that it is superior to other sexual orientations. |
| Homophobia | An irrational fear of, hatred or aversion towards lesbian, gay or bisexual people. |
| Intersex | People whose bodies do not have typically male or female sex characteristics due to variations in chromosomes, gonads, sex hormones and/or genitals. ⁸ Intersex people are born with physical sex characteristics (such as sexual anatomy, reproductive organs, hormonal patterns and/or chromosomal patterns) that do not fit typical definitions for male or female bodies. ⁹ Intersex is not about gender identity or sexual orientation. Intersex is a lived experience of the body. Many forms of intersex exist, mostly genetic in origin. |
| Legal recognition (gender) | The process of changing official documents to match a person's gender identity. |
| Lesbian | A woman who is (physically, romantically and/or emotionally) attracted to other women. |
| Misgendering | Referring to someone (especially a transgender person) using a pronoun or form of address that does not reflect their gender identity. |
| Non-binary | A gender identity that is outside the male/female gender binary, i.e., that does not conform to binary beliefs about gender which indicate that all individuals are exclusively either male or female. |

⁵ APT, Towards the Effective Protection of LGBTIQ Persons Deprived of Liberty: A Monitoring Guide (2018), page 18, <https://www.apr.ch/knowledge-hub/publications/towards-effective-protection-lgbti-persons-deprived-liberty-monitoring> (last accessed: 17 July 2025).

⁶ See also: European Union Agency for Fundamental Rights (FRA), <https://fra.europa.eu/en/publication/2017/mapping-minimum-age-requirements-concerning-rights-child-eu/access-sex-reassignment-surgery> (last accessed: 17 July 2025). The term “gender reassignment” should not be used, as the gender is chosen by the person.

⁷ See also: Independent Expert on sexual orientation and gender identity, The struggle of trans and gender-diverse persons, https://www.ohchr.org/en/special-procedures/ie-sexual-orientation-and-gender-identity/struggle-trans-and-gender-diverse-persons#_ftn1 (last accessed: 17 July 2025).

⁸ United Nations Development Programme (UNDP), The Sustainable Development Goals: Sexual and gender Minorities, https://www.undp.org/sites/g/files/zskgke326/files/publications/SDGs_SexualAndGenderMinorities.pdf (last accessed: 17 July 2025).

⁹ See also: Office of the High Commissioner for Human Rights (OHCHR), Background Note on Human Rights Violations against Intersex People (24 October 2019), <https://www.ohchr.org/en/documents/tools-and-resources/background-note-human-rights-violations-against-intersex-people> (last accessed: 17 July 2025).



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| Queer | An umbrella term for persons whose identity does not fit into a binary classification of sexuality and/or gender, ¹⁰ i.e., sexual and gender identities that are not cisgender and heterosexual. |
| Sex¹¹ | The classification of a person as having female, male and/or intersex sex characteristics. A person's sex is a combination of a range of bodily sex characteristics. A person's sex may or may not be aligned with their gender identity. |
| Sex characteristics | Each person's physical features relating to sex, including genitalia and other sexual and reproductive anatomy, chromosomes, hormones, and secondary physical features emerging from puberty. ¹² |
| Sexual orientation | Each person's capacity for profound emotional, affectional and sexual attraction to, and intimate and sexual relations with, individuals of a different gender or the same gender or more than one gender. |
| Transgender / Trans | A person whose gender identity does not align with the sex they were assigned at birth. |
| Transphobia | An irrational fear of, hatred or aversion towards transgender people. |

¹⁰ European Commission, LGBTIQ Equality Strategy 2020-2025 (12 November 2020), https://commission.europa.eu/strategy-and-policy/policies/justice-and-fundamental-rights/combating-discrimination/lesbian-gay-bi-trans-and-intersex-equality/lgbtiq-equality-strategy-2020-2025_en (last accessed: 17 July 2025).

¹¹ Committee against Torture (CAT), Ninth annual report of the Subcommittee on Prevention of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (22 March 2016), CAT/C/57/4, <https://docs.un.org/en/CAT/C/57/4> (last accessed: 17 July 2025).

¹² See also: Yogyakarta Principles, Principle 25, <https://yogyakartaprinciples.org/> (last accessed: 17 July 2025).



GLOSSARY

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| Allocation / Placement | The decision in which specific detention facility a convicted person/ person in pre-trial detention is assigned to (e.g., male or female facility). Usually, the allocation is closely linked to the classification of the detainee, which includes a comprehensive risk assessment. This term is used interchangeably with “placement”. |
| Bisexual | A person who is physically, romantically and/or emotionally attracted to people of two (or more) sexes or genders. ¹³ |
| Cisgender | A person who identifies with the gender that aligns with the gender assigned at birth. |
| Cisnormativity | The assumption that cisgender people, those whose gender identity matches their biological sex, are the norm or default, perpetuating the idea that other gender identities are abnormal or less legitimate. |
| Deprivation of liberty | Any form of detention or imprisonment or the placement of a person in a detention setting where a person is not free to leave at will, as ordered by a judicial, administrative or other authority. ¹⁴ |
| Detainee | In the framework of this project, ‘detainee’ refers to persons who are deprived of liberty within the criminal justice context (including both pre-trial detention and imprisonment after conviction). |
| Gay | Primarily used to describe a man who is (physically, romantically and/or emotionally) attracted to other men; may also be used to describe both gay men and women. ¹⁵ |
| Gender | Gender can be understood as a socially constructed set of norms, roles and behaviours associated with being a man (or boy), woman (or girl), or other gender. |
| Gender identity | Each person’s deeply felt internal and individual experience of gender, which may or may not correspond with the sex assigned at birth, including their personal sense of their body (which may involve, if freely chosen, modification of bodily appearance or function by medical, surgical or other means) and other expressions of gender, including dress, speech and mannerisms. ¹⁶ |

¹³ Association for the Prevention of Torture (APT), Towards the Effective Protection of LGBTIQ Persons Deprived of Liberty: A Monitoring Guide (2018), page 17, <https://www.apr.ch/knowledge-hub/publications/towards-effective-protection-lgbti-persons-deprived-liberty-monitoring> (last accessed: 17 July 2025).

¹⁴ See also: Optional Protocol to the Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (9 January 2003), A /RES/57/199, Article 4, https://treaties.un.org/doc/source/docs/A_RES_57_199-E.pdf (last accessed: 17 July 2025).

¹⁵ APT, Towards the Effective Protection of LGBTIQ Persons Deprived of Liberty: A Monitoring Guide (2018), page 18, <https://www.apr.ch/knowledge-hub/publications/towards-effective-protection-lgbti-persons-deprived-liberty-monitoring> (last accessed: 17 July 2025).

¹⁶ Yogyakarta Principles, <https://yogyakartaprinciples.org/> (last accessed: 17 July 2025).



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| Gender expression | Describes how an individual publicly expresses or presents their gender. This may include behaviour, outwards appearance (e.g., hair, make-up, choice of clothes, body language, voice). ¹⁷ |
| Gender affirming surgery/ procedures | Also sometimes called “sex reassignment surgery;” this includes gender confirmation/affirmation surgery, i.e., a surgical procedure, bringing a person’s physical appearance and genitals into alignment with their gender identity. ¹⁸ |
| Gender-diverse | A person whose gender identity, including their gender expression, is at odds with what is perceived as being the gender norm in a particular context at a particular point in time, including those who do not place themselves in the male/female binary. ¹⁹ Transgender is a more specific form of gender-diverse. |
| Heteronormativity | The assumption that heterosexuality is the only (normal) or natural expression of sexuality, and that it is superior to other sexual orientations. |
| Homophobia | An irrational fear of, hatred or aversion towards lesbian, gay or bisexual people. |
| Intersex | People whose bodies do not have typically male or female sex characteristics due to variations in chromosomes, gonads, sex hormones and/or genitals. ²⁰ Intersex people are born with physical sex characteristics (such as sexual anatomy, reproductive organs, hormonal patterns and/or chromosomal patterns) that do not fit typical definitions for male or female bodies. ²¹ Intersex is not about gender identity or sexual orientation. Intersex is a lived experience of the body. Many forms of intersex exist, mostly genetic in origin. |
| Legal recognition (gender) | The process of changing official documents to match a person's gender identity. |
| Lesbian | A woman who is (physically, romantically and/or emotionally) attracted to other women. |
| Misgendering | Referring to someone (especially a transgender person) using a pronoun or form of address that does not reflect their gender identity. |
| Non-binary | A gender identity that is outside the male/female gender binary, i.e., that does not conform to binary beliefs about gender which indicate that all individuals are exclusively either male or female. |

¹⁷ APT, Towards the Effective Protection of LGBTIQ Persons Deprived of Liberty: A Monitoring Guide (2018), page 18, <https://www.apr.ch/knowledge-hub/publications/towards-effective-protection-lgbti-persons-deprived-liberty-monitoring> (last accessed: 17 July 2025).

¹⁸ See also: European Union Agency for Fundamental Rights (FRA), <https://fra.europa.eu/en/publication/2017/mapping-minimum-age-requirements-concerning-rights-child-eu/access-sex-reassignment-surgery> (last accessed: 17 July 2025). The term “gender reassignment” should not be used, as the gender is chosen by the person.

¹⁹ See also: Independent Expert on sexual orientation and gender identity, The struggle of trans and gender-diverse persons, https://www.ohchr.org/en/special-procedures/ie-sexual-orientation-and-gender-identity/struggle-trans-and-gender-diverse-persons#_ftn1 (last accessed: 17 July 2025).

²⁰ United Nations Development Programme (UNDP), The Sustainable Development Goals: Sexual and gender Minorities, https://www.undp.org/sites/g/files/zskgke326/files/publications/SDGs_SexualAndGenderMinorities.pdf (last accessed: 17 July 2025).

²¹ See also: Office of the High Commissioner for Human Rights (OHCHR), Background Note on Human Rights Violations against Intersex People (24 October 2019), <https://www.ohchr.org/en/documents/tools-and-resources/background-note-human-rights-violations-against-intersex-people> (last accessed: 17 July 2025).



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| Queer | An umbrella term for persons whose identity does not fit into a binary classification of sexuality and/or gender, ²² i.e., sexual and gender identities that are not cisgender and heterosexual. |
| Sex²³ | The classification of a person as having female, male and/or intersex sex characteristics. A person's sex is a combination of a range of bodily sex characteristics. A person's sex may or may not be aligned with their gender identity. |
| Sex characteristics | Each person's physical features relating to sex, including genitalia and other sexual and reproductive anatomy, chromosomes, hormones, and secondary physical features emerging from puberty. ²⁴ |
| Sexual orientation | Each person's capacity for profound emotional, affectional and sexual attraction to, and intimate and sexual relations with, individuals of a different gender or the same gender or more than one gender. |
| Transgender / Trans | A person whose gender identity does not align with the sex they were assigned at birth. |
| Transphobia | An irrational fear of, hatred or aversion towards transgender people. |

²² European Commission, LGBTIQ Equality Strategy 2020-2025 (12 November 2020), https://commission.europa.eu/strategy-and-policy/policies/justice-and-fundamental-rights/combating-discrimination/lesbian-gay-bi-trans-and-intersex-equality/lgbtiq-equality-strategy-2020-2025_en (last accessed: 17 July 2025).

²³ Committee against Torture (CAT), Ninth annual report of the Subcommittee on Prevention of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (22 March 2016), CAT/C/57/4, <https://docs.un.org/en/CAT/C/57/4> (last accessed: 17 July 2025).

²⁴ See also: Yogyakarta Principles, Principle 25, <https://yogyakartaprinciples.org/> (last accessed: 17 July 2025).



EXECUTIVE SUMMARY

The purpose of this report is to provide an overview of the situation and the multifaceted challenges faced by LGBTIQ detainees in Greece. It outlines both the general and prison-specific legal frameworks and policies in relation to the rights and treatment of LGBTIQ individuals in detention. In addition, the report examines how these legal standards and policies are implemented in practice, identifying significant gaps and inconsistencies that affect the everyday lives of LGBTIQ detainees.

Experts and stakeholders participating in the research conducted in the context of the LGBTIQ detainees project, agree that prison issues in Greece are often overlooked and do not receive the attention they merit based on the severe fundamental rights violations taking place within the country's prisons. Moreover, there is a general lack of awareness regarding detainees' rights, even among involved professionals and institutions. Our research revealed important gaps in lawyers' knowledge of in-prison complaints mechanisms and other relevant proceedings and a lack of interest on what goes on after a sentence is imposed by the criminal courts. The legal aid scheme is underfunded; remunerations are delayed and do not cover key expenses (such as interpretation and translation services for consultations within prisons). Bar Associations have also been shown to have very limited awareness of the legal matter that relates to the penitentiary system, as well as their potential role in, for example, supporting litigation or administering the legal aid scheme in a way that accounts for the specific needs of detainees – both remanded and convicted.

The systemic issues notoriously plaguing the Greek penitentiary system, repeatedly reported by the Council of Europe's Committee for the Prevention of Torture (CPT), include poor material detention conditions, overcrowding, understaffing, unequal access to healthcare, and many more. These affect the entire prison population but disproportionately impact vulnerable detainees, including LGBTIQ detainees. Multiple intersecting identities, demographic characteristics, such as nationality, disability, education and socio-economic status, compound on the challenges faced by all detainees and/or create the conditions for rights violations that are specific to each individual. It is important to keep in mind that the LGBTIQ identity may be, and often is, intersecting with additional vulnerabilities, such as foreign nationality (and, e.g., lack of knowledge of the Greek language), especially keeping in mind that more than half of Greece's prison population consists of foreign nationals.

A key issue we faced in attempting to map the situation of LGBTIQ detainees in Greece was the distinct absence of relevant data, both official and research-based. The Ministry for Citizen Protection which has competence over prisons, as well as the Ministry of Justice before it, do not keep disaggregated data on sexual orientation, gender identity and characteristics. Research participants highlighted the challenges of collecting and processing this type of data, including in relation to the General Data Protection Regulation (GDPR), as well as in terms of the safety of detainees. Academic research, already poor in terms of the penitentiary system in general, is entirely lacking when it comes to LGBTIQ issues in prisons. During our research we faced distinct



challenges in identifying experts with cross-disciplinary knowledge on both topics. The same holds true for civil society: CSOs either focus on prison issues or on LGBTIQ rights; never both. An exception to the above is the situation of transgender women detainees, as a consequence of the establishment of a special unit within the Korydallos women's facility in 2021. The unit hosts both convicted and remanded trans women who have not undergone the procedure for the legal recognition of their gender. Some data is also available on HIV+ detainees, which is relevant for the present research to the extent that they intersect with LGBTIQ identities.

Despite these limitations, we were able to identify some key areas of concern related to the fundamental rights and well-being of LGBTIQ detainees and collect insights, solutions and recommendations from a wide array of stakeholders. The main and most urgent issues identified include access to quality, LGBTIQ-specific health care, including mental health care, and timely access to medication (especially for HIV+ detainees); access to a lawyer and effective legal remedies; equal access to meaningful activities and contact with the general prison population and the outside world; the use of isolation as a security measure and the conditions of solitary confinement; and the need for appropriate, specialized training on LGBTIQ issues for all professionals working in prisons, including medical staff and guards.



PROJECT OVERVIEW AND METHODOLOGY

The project [LGBTIQ Detainees - Strengthening the Rights of LGBTIQ detainees in the EU](#) was conducted from April 2024 to September 2025 by the Ludwig Boltzmann Institute of Fundamental and Human Rights in cooperation with partner organisations in Italy, Greece and Hungary. The overarching aim of the project was to strengthen the rights of LGBTIQ detainees. To this end, desk research, interviews and focus groups were conducted with various stakeholders to analyse the situation of LGBTIQ detainees in the four partner countries, as well as in other EU member states. The main focus was to identify challenges, gaps and promising practices related to detention conditions, treatment and care of LGBTIQ detainees. The analysis covers both the national legal and policy framework and its practical implementation.

A dedicated National Coalition was established to support the project and ensure that the views, voices and needs of LGBTIQ detainees were adequately represented throughout the project. Additionally, the National Coalition helped integrate interdisciplinary perspectives. The National Coalition included the following members: Christiana Genata, Stergios Matis, Maria Papadimitraki, Katerina Pournara.

This report is based on the analysis of primary and secondary sources as well as empirical data. The legal analysis relied on relevant laws, ordinances, decrees and relevant case law. The empirical findings were gathered through qualitative, semi-structured interviews, with the goal of collecting insights and experiences that illustrate challenges as well as promising practices.

In total, 12 interviews were conducted with LGBTIQ persons who had experienced detention and experts. The interviews took place between September 2024 and July 2025 and were conducted by members of the project team.

In order to better reflect the perspective of those people whose situation is to be improved and whose rights are to be strengthened by the project results, a total of 3 interviews were conducted with individuals who belong to the LGBTIQ community and have direct experience of detention (an HIV+ detainee, identifying as a cisgender, gay man, a former HIV+ detainee at a women's correctional facility, identifying as a cisgender, lesbian woman, and a former detainee in multiple facilities, identifying as a third country national, transgender woman). It should be emphasised that this is not a representative sample, but rather the interviews aim to gather insights and trends from the perspective of the people concerned. The interviewees were of legal age and came from different parts of the country. The interview participants were reached through the National Coalition members and professionals working in prisons.

The semi-structured interview guide used to conduct interviews with LGBTIQ persons with experience of detention reflected the main focus of the project. The focus was deliberately only on collecting the personal experiences of the interview participants, not on verifying or evaluating them. The duration of the interviews ranged from 45 to 75 minutes. When conducting and analysing the interviews, special care was taken to anonymise all data relating to the interview participants.

In addition, 9 expert interviews were conducted with stakeholders such as legal experts and practitioners, officials and personnel of correctional facilities (correctional officers and experts



working in the social services of penitentiary facilities), CSO and NGO staff, the Greek NPM (hosted in the Ombuds Institution).

The findings were further informed by discussions at a National Roundtable held on 14 November 2024, which brought together 13 experts from relevant fields, including representatives of the Ministry for Citizen Protection, the NPM, the Greek National Human Rights Institution (NHRI), the Athens Bar Association, four NGOs with access to prisons, one NGO specializing in the rights of LGBTIQ persons, and the National Centre for Public Administration and Local Government as a training provider for public sector employees. Lastly, the report benefited from feedback and comments provided by the members of the National Coalition.



OVERVIEW OF GENERAL SITUATION REGARDING THE RIGHTS OF LGBTIQ PERSONS IN GREECE

National definitions

The acronym most used in Greece for the LGBTIQ community is *ΛΟΑΤΚΙ*, meaning Lesbian, Gay, Bisexual, Transgender, Queer, and Intersex, with *ΛΟΑΤ* being an earlier version of the acronym, thus failing to acknowledge the full spectrum of gender identities, non-normative sexual orientations and the diversity in intersex embodiments, including queer people. Both acronyms are often used today with the addition of the “plus” symbol (*ΛΟΑΤΚΙ+*, *ΛΟΑΤ+*) for brevity, in order to denote inclusion of all persons under the queer umbrella.

Although the law does not specifically define the relevant terms, the National Strategy for the Equality of LGBTIQ+ persons (2021-2025) ²⁵ adopted the *ΛΟΑΤΚΙ+* acronym, considering it the most inclusive, and defining it as follows:

Lesbian: A woman who is sexually and/or emotionally attracted to women.

Gay/Homosexual: A man who is sexually and/or emotionally attracted to men.

Bisexual person: A person who is sexually and/or emotionally attracted to more than one gender.

Trans or transgender persons: an umbrella term that includes people whose gender identity differs from the gender assigned to them at birth. Trans people may have heteroerotic, homoerotic or bisexual sexual orientation, while gender identity is in no way related to sexual orientation.

Intersex persons: those born with sex characteristics (such as chromosomes, genitalia and/or hormonal structure) that do not strictly belong to either of the two dominant sexes or belong to both at the same time²⁶.

Queer: refers to people whose self-consciousness is far from the norms of heteronormativity and gender binaries.

LGBTQI+: an acronym of the words Lesbian, Queer, Gay, Bisexual, Trans, Queer, Intersex, with the + symbol describing any other identity beyond these groupings.

The National Strategy²⁷ also includes definitions on sexual orientation (emotional and/or sexual attraction towards the opposite sex, the same sex or both dominant sexes); gender identity (the internal and personal way in which a person experiences their own gender, regardless of the gender registered at birth); cisgender or cis (people who feel intimate and authentic to the gender they were born with); non-binary (people who feel they do not belong or do not wish to be

²⁵ National Strategy for LGBTIQ+ equality, available in Greek, at [Εθνική Στρατηγική Για Την Ισότητα Των ΛΟΑΤΚΙ+](#).

²⁷ European Commission, (2024), Report on the implementation of the LGBTIQ Strategy 2020-2025 available at https://commission.europa.eu/document/download/d9e23ccc-4032-41d0-b208-68650103ef8a_en?filename=Report%20LGBTIQ.pdf



categorized within the gender dominant binary); sex characteristics (defined as chromosomal, genomic and anatomical facial characteristics); and gender expression (the set of characteristics concerning behaviour, manners, representations, related to the way a person positions and expresses his/her gender and how it is perceived by his/her surroundings).

Focusing on the definitions comprising the ΛΟΑΤΚΙ+ acronym, these present many similarities to those commonly used at the international level but also depart significantly in some respects. For the purposes of this report, the definitions provided by ILGA Europe are used as the baseline for comparison.²⁸

In the last 10 years, several LGBTIQ organizations and initiatives in Greece have contributed significantly to the development and dissemination of inclusive terminology relating to sexual orientation, gender identity, and LGBTIQ experiences. These efforts have supported the standardization of language, improved public understanding, and promoted inclusive practices across various sectors.

In 2019, the organization Colour Youth – LGBTQ Youth Community of Athens launched a publicly accessible Glossary of LGBTIQ Terminology,²⁹ which provided detailed, inclusive definitions of key concepts such as trans, intersex, non-binary, gender identity, and sexual orientation. This glossary remains available online and continues to serve as a reference point for community members, educators, and professionals.³⁰

That same year, Colour Youth also published two key resources: The “Guide for New Trans Individuals”³¹ (Οδηγός για Νέα Τρανς Άτομα), offering foundational information about gender identity, transition, gender dysphoria, and the social and legal aspects of being a trans person in Greece. Also in 2019, the PARADISO project published Basic Guidelines for Providing Health Services to LGBTIQ Individuals,³² focusing on terminology and practices relevant to inclusive healthcare. This document emphasized the importance of accurate use of terms like gender identity, sexual orientation, trans, and intersex in medical settings.

In 2021–2022, the organization Intersex Greece released the foundational information hub “Intersex 101”,³³ comprising translated resources on key terms such as intersex, variations in sex characteristics, bodily autonomy, and medical pathologization as well as answering frequently

²⁸ See ILGA Europe Glossary, accessible at <https://www.ilga-europe.org/about-us/who-we-are/glossary/>.

²⁹ Theofilopoulos, Th., & Paganis, F. (2019) contributed "Basic Concepts and Guidelines for Media Professionals and Students" (pp. 16–60) within The LGBTQ+ Community and the Media: A Guide for Media Professionals, edited by Th. Theofilopoulos (Colour Youth, Athens). This chapter provides inclusive terminology and media-focused recommendations.

³⁰ Colour Youth - Κοινότητα LGBTQ Νέων Αθήνας. Ορολογίες. Ανακτήθηκε από: <https://www.colouryouth.gr/terms/>.

³¹ Paganis, F. (2019) released A Guide for New Trans People – Essential Information on Gender Identity Issues (Colour Youth, Athens), detailing clear, accessible definitions and practical guidance.

³² PARADISO (2019) published Basic Guidelines for Providing Health Services to LGBTQI+ Individuals, available via Polysyntrofikotita, which outlines inclusive terminologies in healthcare contexts.

³³ More information available at <https://intersexgreece.org.gr/intersex-101/>



asked questions. This initiative marked an important step toward visibility and rights for intersex individuals in Greece.

This progressive documentation and dissemination of terminology has been vital in establishing a shared, inclusive language that reflects the experiences of LGBTIQ people in Greece. The work of LGBTIQ organizations & communities, continues to shape the way LGBTIQ issues are understood, respected, and addressed across social, legal, and institutional domains. Community sources play a pivotal role in expanding and refining the meaning of key terms—embedding respectful and affirming usage across media, healthcare, and public discourse.

Glossary

| Term | National definition | ILGA definition | Differences |
|-------------------|--|--|--|
| Lesbian | A woman who is sexually and/or emotionally attracted to women. | A woman who is sexually and/or emotionally attracted to women. | N/A |
| Gay | Gay/Homosexual: A man who is sexually and/or emotionally attracted to men | Refers to a person who is sexually and/or emotionally attracted to people of the same gender. It traditionally refers to men, but other people who are attracted to the same gender or multiple genders may also define themselves as gay | The outdated term “homosexual” is used in the national definition, while the term gay is mentioned only in relation to men. The ILGA definition refers to persons and mentions that other people besides men may also identify as gay |
| Bisexual | A person who is sexually and/or emotionally attracted to more than one gender | A person who is emotionally and/or sexually attracted to persons of more than one gender | N/A |
| Trans/transgender | An umbrella term that includes people whose gender identity differs from the gender assigned to them at birth. Trans people may have heteroerotic, homoerotic or bisexual sexual orientation, while gender identity is | An inclusive umbrella term referring to people whose gender identity and/or gender expression differ from the sex/gender they were assigned at birth. It may include, but is not limited to: people who identify as transsexual, transgender, transvestite/cross-dressing, androgyne, polygender, genderqueer, agender, gender variant, gender non-conforming, or with any other gender identity | The national definition, perhaps redundantly, clarifies that gender identity is different to sexual orientation, while it doesn't refer to gender expression. On the other hand, the ILGA definition also contains the different identities which may fall under |



| | | | |
|-----------|--|--|--|
| | in no way related to sexual orientation. | and/or expression which does not meet the societal and cultural expectations placed on gender identity | the umbrella of trans, which is missing from the national definition |
| Intersex | Those born with sex characteristics (such as chromosomes, genitalia and/or hormonal structure) that do not strictly belong to either of the two dominant sexes or belong to both at the same time. | Intersex individuals are born with sex characteristics (sexual anatomy, reproductive organs, hormonal structure and/or levels and/or chromosomal patterns) that do not fit the typical definition of male or female. The term “intersex” is an umbrella term for the spectrum of variations of sex characteristics that naturally occur within the human species. The term intersex acknowledges the fact that physically, sex is a spectrum and that people with variations of sex characteristics other than male or female exist. | The national definition refers to “dominant sexes”, while ILGA refers to male and female, describing the traditional gender binary which does not necessarily correspond to the diversity of the intersex spectrum. Ilga also emphasises that the term underlines the fact that not only gender, but also biological sex is a spectrum |
| Queer | Refers to people whose self-consciousness is far from the norms of heteronormativity and gender binaries. | Previously used as a derogatory term to refer to LGBTI individuals in the English language, queer has been reclaimed by people who identify beyond traditional gender categories and heteronormative social norms. However, depending on the context, some people may still find it offensive. Also refers to queer theory, an academic field that challenges heteronormative social norms concerning gender and sexuality | The definitions per se are identical; however, the ILGA definition also draws attention to the history of the term and its potential uses |
| LGBTI(Q+) | LGBTQI+: an acronym of the words Lesbian, Queer, Gay, Bisexual, Trans, Queer, Intersex, with the + symbol describing any other identity beyond these groupings. | LGBTI: Acronym for lesbian, gay, bisexual, trans and intersex people | The national definition includes the term queer, omitted by ILGA, and also uses the + symbol to include other identities. |



Overview of the general situation of LGBTQI+ rights in Greece

The legal framework

Greece scores high in terms of the legal protection, fundamental rights and freedoms recognized to LGBTIQ persons by law.³⁴ According to the ILGA mapping, Greece scores particularly high in equality and non-discrimination (97.91%), as well as in the civic space available to CSOs with a relevant remit (83.33%). In the rest of the categories examined (family, hate crime and hate speech, legal gender recognition, intersex bodily integrity), it scores over 60%, except for asylum (33.33%), which seems to be a key problem area.

A comprehensive legal framework is in place, promoting equality in most risk areas related to the rights and freedoms of LGBTIQ persons. Despite not containing specific provisions on LGBTIQ rights, the Greek Constitution guarantees equal treatment and rights for all citizens (Art.4) as well as the freedom to develop one's identity (Art. 5). Moreover, its definition of family and marriage (Art 21) is phrased in a way that does not exclude same sex couples. There are no provisions in either the Constitution or the ordinary law criminalizing acts associated with LGBTIQ persons.

Since 2014, Greece has taken significant legislative steps to strengthen the legal protection and recognition of LGBTIQ+ rights, adjusting the national framework to European and international human rights standards. This alignment reflects a potential societal shift and political will to combat the discrimination against LGTBTIQ persons in Greece and to promote equality. More specifically the following legal provisions and reforms have shaped the landscape of LGBTIQ+ rights in Greece the recent years:

1. Combating Hate Speech and Hate Crimes (Law 4285/2014)³⁵

Law 4285/2014 marked a critical moment in the legal approach to hate crimes in Greece. Law 4285/2014 is primarily focused on combating racism and xenophobia through the criminal justice system. It amends existing legislation, specifically Law 927/1979, to align with the EU Framework Decision 2008/913/JHA. The law criminalizes public incitement to violence or hatred based on race, colour, religion, national or ethnic origin, sexual orientation, gender identity, or disability. This legislation broadened the scope of pre-existing protections for LGBTIQ individuals in Greece by explicitly including sexual orientation and gender identity to the grounds for the perpetration of hate speech and hate-motivated criminal acts.³⁶

³⁴ See Rainbow Map, ILGA Europe, accessible at <https://rainbowmap.ilga-europe.org/>, where Greece scores the highest out of the consortium countries and well above the EU average, with a score of 70.78%.

³⁵ Greece, Law 4285/2014, Combating Hate Speech and Hate Crimes ([Καταπολέμηση της ρητορικής μίσους και των εγκλημάτων μίσους](#))

³⁶ Greece, Greek Transgender Support Association, Press Release, An important victory for the trans community: First conviction for incitement to violence and hatred based on gender identity (Δελτίου Τύπου, Μία ιδιαίτερα σημαντική νίκη για τη τρανς κοινότητα: Η πρώτη καταδίκη για δημόσια υποκίνηση σε βία ή μίσος για λόγους ταυτότητας φύλου), 4-11-2022, last accessed on 27-01-2023.

3 Greece, ZackieOh Justice Watch, Day 18: Arguments of the Police Defense and the court's decision, (Ημέρα 18η: Αγορεύσεις υπεράσπισης αστυνομικών και απόφαση του δικαστηρίου), 3-05-



2. Civil Partnership Rights Extended to Same-Sex Couples (Law 4356/2015) ³⁷

Civil partnership was first introduced in the Greek legal framework in 2008, but it explicitly excluded same-sex couples, which led to the European Court of Human Rights finding a violation of the right to private and family life, in conjunction with the right not to be discriminated against on grounds of gender and sexual orientation, ³⁸ following an appeal by Greek activists. ³⁹ taking account of the Court's judgement, Greece adopted Law 4356/2015, extending the scope of civil partnership agreements to same-sex couples. The reform was an essential step toward legal recognition of same-sex relationships and offered same-sex partners many of the rights and protections previously afforded only to different-sex couples in areas such as inheritance, taxation, and social security. However, certain family law rights, such as joint adoption and parenting, were not fully recognized under this framework at the time.

3. Equal Treatment in Employment and Beyond (Law 4443/2016) ⁴⁰

Law 4443/2016 represents a significant consolidation and strengthening of Greece's anti-discrimination framework by consolidating and strengthening anti-discrimination protections with the incorporation of several key EU directives, including the Directive 2000/43/EC on racial equality, the Directive 2000/78/EC on equal treatment in employment and occupation and the Directive 2014/54/EU on facilitating the free movement of workers.

One of the most important developments under Law 4443/2016 is the explicit prohibition of discrimination based on sexual orientation, gender identity, sex characteristics, and gender expression. These grounds of discrimination are clearly protected in crucial areas such as employment, education, and access to goods and services, reflecting a commitment to safeguarding LGBTIQ individuals against unfair treatment. This inclusion aligns Greece with contemporary European human rights standards and recommendations, such as those from the Council of Europe on combating discrimination against LGBTIQ persons.

And finally, the Greek Ombudsman⁴¹ is recognized as the national equality body responsible for a) Investigating complaints of discrimination, including those based on sexual orientation and gender identity, b) Issuing recommendations to public and private entities to promote compliance

2022, last accessed on 27-01-2023.

³⁷ Greece, Law 4356/2015, Civil Partnership Rights Extended to Same-Sex Couples, ([ΝΟΜΟΣ ΥΠ' ΑΡΙΘ. 4356 ΦΕΚ Α'181/24.12.2015](#))

³⁸ Case of Vallianatos and Others v. Greece, Applications nos. [29381/09](#) and [32684/09](#), 7 November 2013; see also Louise Brown, Greece's exclusion of same-sex couples from civil unions breaches prohibition of discrimination and right to privacy and family life. More information available at Human Rights Law Center at [Greece's exclusion of same-sex couples from civil unions breaches prohibition of discrimination and right to privacy and family life](#)

³⁹ Renee Maltezou, Georgia Kalovyryna (2023) *Greece allows civil partnership for same-sex couples*, available at [Greece allows civil partnership for same-sex couples](#), December 2023

⁴⁰ Greece, Law 4443/2016 (Government Gazette, Series I, No 232), [Law 4443/2016 against discrimination at work and employment](#)

⁴¹ FRA, 2023, Franet National contribution to the Fundamental Rights Report 2023, Greece available at [Franet National contribution to the Fundamental Rights Report 2023, Greece](#)



and c) finally providing an accessible and effective institutional mechanism to protect individuals facing discrimination.⁴²

4. Legal Recognition of Gender Identity (Law 4491/2017)⁴³

In October 2017, the Greek Parliament voted in favour of a new law, which recognizes gender identity as a protected aspect of an individual's personality and, therefore, allows the selection of one's legal gender⁴⁴. Law 4491/2017 "*Legal Recognition of Gender Identity, National Mechanism for Devising, Monitoring and Evaluation of Action Plans for the Children's Rights and other provisions*" is legislative milestone that promotes the right of individuals to have their gender identity legally recognized. It allows any person over the age of 17 to change their legal gender without requiring prior medical interventions such as surgery or hormonal treatment. This law positioned Greece among the more progressive European countries in terms of gender recognition. However, significant limitations remain—e.g. for minors over the age of 15, who require court approval and parental consent, and for trans parents, whose parental rights and recognition remain restricted in practice. At the same time, it is important to mention that the judicial procedure for gender data correction is lengthy and costly, creating barriers for low-income trans individuals.

5. Foster Care Rights for Same-Sex and Single LGBTIQ+ Individuals (Law 4538/2018)⁴⁵

Law 4538/2018 expanded the legal right to become a foster parent to all married couples, those in civil partnerships, and single individuals, without discrimination based on sexual orientation. As a result, same-sex couples and single LGBTIQ+ persons gained the right to participate in foster care processes, consequently acknowledging their capacity to provide safe and supportive homes for children. While this marked progress toward family equality, full adoption rights remained limited until 2024.

6. Penal Code Reforms Addressing Discriminatory Motives (2019 Criminal Code)

The revised Criminal Code, enacted in 2019, introduced harsher penalties for crimes committed with a discriminatory motive, explicitly including sexual orientation, gender identity, and sex characteristics as aggravating circumstances. This measure reinforced the state's commitment to addressing bias-motivated crimes and acknowledged the specific vulnerabilities faced by LGBTIQ+ people.

7. Blood Donation Policy Reform (Joint Ministerial Decision 900/2022)

⁴² More information available at Hellenic Ministry of Labor and Social Security official website at [Equal Treatment at Work](#)

⁴³ Greece, (2017) LAW 4491/2017, Legal Recognition of Gender Identity ([Νομική αναγνώριση της ταυτότητας φύλου](#))

⁴⁴ Haroula Constandinidou, (2017), Legal recognition of gender identity in Greece, International Family Law Journal Pages 257-310 available at <https://www.cslawfirm.gr/en/legal-recognition-of-gender-identity-in-greece/>

⁴⁵ Greece, Law 4538/2018, Measures for the promotion of the institutions of adoption and adoption and other provisions. ([Μέτρα για την προώθηση των Θεσμών της Αναδοχής και Υιοθεσίας και άλλες διατάξεις.](#))



A Joint Ministerial Decision 900/2022 abolished the discriminatory clause that excluded individuals who had been in same-sex relationships from donating blood, bringing Greece into closer alignment with modern medical standards and non-discriminatory health policies. The reform incorporated observations of the Ombudsman in relation to equal treatment in Greece, as reflected in his 2021 Report, which highlighted the issue as a discriminatory practice on the ground of sexual orientation.⁴⁶ Specifically, the donation form provided to prospective blood donors required them to fill in information on any same-sex sexual relationships they may have had since 1977, as part of their medical history. Persons answering in the affirmative were automatically excluded from donations.

This important development towards equality and non-discrimination was unfortunately undone by decision of the Council of the State, the supreme court for administrative cases in Greece, published in April 2025. Specifically, the court found that the 2022 Ministerial Decision lacked the appropriate scientific backing to ensure the protection of public health and the health of blood recipients. It follows that, until and if the Ministry of Health reissues the Decision, including the appropriate reasoning, gay men and lesbians are once again excluded from donations.⁴⁷

8. Ban on Conversion Therapy (Law 4931/2022)

Law 4931/2022 introduced a partial ban on so-called “conversion therapy”⁴⁸ a pseudoscientific and harmful practice aimed at “changing” an individual’s sexual orientation or gender identity. The law prohibits conversion therapy when performed for profit, particularly on minors or, for adults, without the individual’s consent. However, it falls short of a full ban: it does not cover non-profit providers, religious entities, or cases where adults give express consent—raising concerns about loopholes and the potential for continued harm, particularly in unregulated settings.

9. Protection of Intersex Individuals from Non-Consensual Medical Procedures (Law 4958/2022)

In 2022, Greece introduced the Law 4958/2022 for the rights of intersex children and the conditions for undergoing medical procedures and therapy for the partial or complete alteration of gender characteristics, making it one of six Member States to do so. Law 4958/2022 represents a significant milestone in the protection of intersex persons, since it prohibits medical interventions aiming to alter the sex characteristics of intersex minors unless they give informed consent, which is legally permitted from the age of 15. The Law 4958/2022 acknowledges the right of bodily

⁴⁶ Ombudsman, Special Report on Equal Treatment, 2021, accessible in Greek at <https://www.translationembassy.com/wp-content/uploads/2023/01/synigoros-isi-metaxeirisi-ekthesis-2021-gr.pdf>.

⁴⁷ See Positive Voice, <https://positivevoice.gr/10826#:~:text=%CE%A4%CE%BF%20%CE%A3%CF%85%CE%BC%CE%B2%CE%BF%CF%8D%CE%BB%CE%B9%CE%BF%20%CF%84%CE%B7%CF%82%20%CE%95%CF%80%CE%B9%CE%BA%CF%81%CE%B1%CF%84%CE%B5%CE%AF%CE%B1%CF%82%20%CF%83%CF%84%CE%B9%CF%82.%CE%B1%CF%80%CF%8C%20%CF%84%CE%B7%CE%BD%20%CE%B1%CE%B9%CE%BC%CE%BF%CE%B4%CE%BF%CF%83%CE%AF%CE%B1%2C%20%CE%BC%CE%AD%CF%87%CF%81%CE%B9%20%CF%84%CE%BF>.

⁴⁸ Reuters, (2022), **Greece bans LGBTQ conversion therapy** ([Greece bans LGBTQ conversion therapy](#)), 11 May 2022



autonomy for intersex individuals and prevents medically unnecessary and potentially traumatic procedures. According to Article 1 para. 2 of Law 4958/2022, aspires to introduce a legal framework which will safeguards the fundamental rights of intersex children. Furthermore, Articles 17-20 of Law 4958/2022 contain provisions for altering gender characteristics of intersex children and states that children over 15 years only need the consent of their parents or legal guardians to undergo a gender-related medical procedure whilst children under the age of 15 may only undergo medical procedures following an authorization by the competent County Court. The amendment of birth records can be achieved only following a judgment of the same court.⁴⁹

10. Marriage Equality and Parental Rights Reform (Law 5089/2024)

In 2024, Greece enacted Law 5089/2024,⁵⁰ a landmark reform establishing civil marriage equality. This law allows same-sex couples to marry and amends the Civil Code to use gender-neutral language, particularly in areas relating to adoption. As a result, same-sex couples now have access to joint adoption and second-parent adoption rights, significantly improving family law protections and recognition for rainbow families.

However, the law does not address discrimination in religious marriages and stops short of granting full reproductive rights. Access to medically assisted reproduction and surrogacy remains unequal; Same-sex couples and single LGBTIQ+ individuals are still excluded from many assisted reproduction programs and surrogacy is not available to male same-sex couples. In addition, trans parenthood is not explicitly protected or recognized, and legal ambiguities—such as those in Law 4491/2017, which prohibits a child's surname from changing because of a parent's legal gender change—undermine the full realization of parental rights for trans individuals.

Despite notable progress over the past decade, significant gaps and challenges remain in Greece's legal protection and recognition of LGBTIQ+ rights. While laws now cover key areas such as marriage equality, anti-discrimination, and legal gender recognition, practical implementation and societal acceptance vary. In addition, the law itself fails to cover crucial areas such as full reproductive rights, the rights of trans parents, and a comprehensive ban on conversion practices.⁵¹ In fact, we also saw backsliding in areas where progress was made, notably in terms of blood donations, as analysed above.

⁴⁹ FRA, 2023, Franet National contribution to the Fundamental Rights Report 2023, Greece available at [Franet National contribution to the Fundamental Rights Report 2023, Greece](#)

⁵⁰ Kyveli Zachou, 2024, **Embracing Equality: Greece's New Marriage Legislation Recognizes and Protects Same-Sex Couples**, ([Embracing Equality: Greece's New Marriage Legislation Recognizes and Protects Same-Sex Couples](#)). 30 October , 2024

⁵¹ Maria Louiza Deftou, (2024) **Greece Achieves Marriage Equality: What About Full Parental Rights for LGBTIQ Persons?** ([Greece Achieves Marriage Equality: What About Full Parental Rights for LGBTIQ Persons?](#)) 11 April 2024.



LGBTIQ Policy

The main policy document on the rights of LGBTIQ persons in Greece is the National Strategy for the Equality of LGBTIQ+ persons (2021-2025), the first of its kind adopted in the country's history. The strategy was drafted by a committee of experts, Judge Linos-Alexandre Sicilianos, former president of the European Court of Human Rights, presiding, and composed of academics and representatives of the civil society, active in the area of LGBTIQ rights. It follows the structure of the European Commission's LGBTIQ Equality Strategy and is also divided into four main axes:

1. Tackling discrimination against LGBTIQ+ persons
2. Ensuring the safety of LGBTIQ+ persons
3. LGBTIQ+ inclusive societies
4. Initiatives for the promotion of LGBTIQ+ equality at the global level.

The Strategy contains chapters on education and vocational training, employment, health, blood donation, LGBTIQ asylum seekers, safety of LGBTIQ persons, policing and detention at the police station, hate speech, conversion therapies, social policy, family, civil marriage and family relations, legal gender recognition, intersex issues, mainstreaming LGBTIQ rights in foreign policy, and LGBTIQ visibility actions. It goes beyond the declaration of general principles and proposes concrete actions in various key areas, without, however, being overly detailed as regards the ways in which the proposed measures should be implemented in practice. Furthermore, despite stating that *"the bases for the implementation of the Strategy's core recommendations should be set by 2023"*, the drafting Committee did not set a specific timeline for the various actions included in its report, nor did it define which of the Strategy's recommendations constitute its core.

LGBTIQ rights in practice

Despite the seemingly positive environment concerning the LGBTIQ community in Greece, the overall climate across society, the media, including social media, as well as religious and public institutions, may generally be characterized as hostile.

Some progress in recent years was documented, hate speech propagated through the media, including national TV, is a common occurrence. Today, abusive speech is directed especially toward persons under the trans umbrella, including non-binary persons and cross-dressers, as well as toward drag performers. The most frequent offences include the use of offensive/outdated terms (e.g. transvestite), misgendering and deadnaming. One of the most common "journalistic errors" is also the reporting of the sexual orientation/identity of LGBTIQ people accused of criminal acts.⁵² TV programmes frequently provide a platform to persons with known prejudices against the LGBTIQ community, most notably religious leaders, expressing views such as "homosexuality is a sin and a perversion", and conflating being gay with paedophilia and bestiality.⁵³ LGBTIQ-

⁵² Maragoudaki Dafni, (2022) LGBTQ+ and the media: a difficult relationship that is nevertheless ([ΛΟΑΤΚΙ+ και ΜΜΕ: Μια δύσκολη σχέση που όμως](#)). 07 June 2022

⁵³ Lifo Newsroom, 2023, New homophobic attack by Metropolitan Seraphim: "There is no such thing as homosexuality, it is acting" [Νέα ομοφοβική επίθεση του μητροπολίτη Σεραφείμ: «Δεν υπάρχει ομοφυλοφιλία, είναι ηθοποιία»](#).



phobia is also rampant online and in social media, including in posts made by political and religious leaders.⁵⁴ A prominent case which ended up before the European Court of Human Rights concerns former Metropolitan (Archbishop) Ambrosios, who expressed on his personal blog extreme views,⁵⁵ deemed by the Greek criminal courts to constitute hate speech and incitement to violence. The Metropolitan was convicted and sentenced to five (5) months in prison (suspended), while the ECtHR found his application before it inadmissible, commenting that *“the applicant was attempting to deflect Article 10 of the Convention from its real purpose by employing the right enshrined in that Article for ends which are clearly contrary to the values of the Convention”*.⁵⁶

The Greek Ombudsman has raised several concerns highlighting the discrimination faced by LGBTQI+ individuals, bringing to light how deeply rooted stereotypes continue to persist in many areas of Greek society—reinforcing systemic exclusion and inequality for the community. In 2022, the Ombudsman also addressed discrimination against trans individuals in police recruitment. A complaint from the Greek Transgender Support Association revealed that “transsexualism” was still listed as a disqualifying mental illness for entry into the Hellenic Police Academies. The Ombudsman condemned this as direct discrimination based on gender identity and called for its removal from the list of disqualifying conditions. However, there has been no confirmation of any policy change.

Additionally, the Ombudsman successfully intervened to remove homophobic content from a high school textbook used in vocational schools. The material falsely linked homosexuality to higher rates of STDs. Following the intervention, the Institute of Educational Policy and the Ministry of Education agreed to revise the book, with the updated version scheduled for distribution in the new school year.

Hate crime against members of the LGBTIQ community is also a major concern and seems to be on the rise in recent years. The Racist Violence Recording Network has recorded 36 cases of violent crime connected to the LGBTIQ identity of the victim in 2021, 38 cases in 2022, and 61 cases (almost double compared to previous years) in 2023.⁵⁷ These incidents continued in 2024, in particular during the months leading to and following the discussion of the bill on marriage

⁵⁴ See for example tweets by the leader of the parliamentary party Greek Solution and MP Kyriakos Velopoulos, concerning Nemo, the winner of the 2024 Eurovision winner, Nemo: <https://avmag.gr/oi-transfovikes-anartiseis-tou-kyriakou-velopoulou-enantion-tou-nemo3/>.

⁵⁵ “Well, spit on these disgraced people! Denounce them! They are not human! They are abominations of nature! Mentally and spiritually diseased! They are people with a mental disorder!”

⁵⁶ Application no. 47833/20 Amvrosios-Athanasios LENIS against Greece, Third Section Decision, accessible at [https://hudoc.echr.coe.int/eng#/%22itemid%22:\[%22001-226442%22\]](https://hudoc.echr.coe.int/eng#/%22itemid%22:[%22001-226442%22]).

⁵⁷ Annual reports accessible in Greek at

<https://rvrn.org/el/category/%ce%b5%cf%84%ce%ae%cf%83%ce%b9%ce%b5%cf%82-%ce%b5%ce%ba%ce%b8%ce%ad%cf%83%ce%b5%ce%b9%cf%82/>.



equality and the months following its adoption.⁵⁸ In 2023, the brutal murder of trans Cuban refugee Anna Ivankova⁵⁹ was aggravated by transphobic media coverage and repeated misgendering, including in the statements provided by the Greek police. Participants in the LGBTIQ Detainees research have partially attributed this rise in hate speech and hate crime on the increased visibility and legal recognition of LGBTIQ rights, which is consistent with the global reactionary trends observed in recent years (e.g., anti- “woke culture”, anti-feminist groups, etc.).

The 3rd EU LGBTIQ Survey, conducted by FRA (2024),⁶⁰ indicates that Greece is close to or above EU average in most metrics. Indicatively, 36% of respondents avoid often or always certain locations for fear of being assaulted; 45% felt discriminated against in some aspects of their life; 13% had been attacked in the 5 years before the survey, while 54% were harassed the year before the survey (same as EU average); and finally, 13% felt discriminated against in healthcare in the year before the survey (EU average is 14%).

Trans people do, in principle, have access to an array of gender affirming procedures, including hormonal replacement therapy and gender affirmation surgeries of any type. Unfortunately, the process to receive such treatment is pathologized and requires the conquering opinion of a certified psychiatrist. In the case of Greece, while legal frameworks have improved, access to gender-affirming healthcare still involves significant barriers. Trans people frequently must navigate psychiatric evaluations and lengthy bureaucratic procedures before receiving hormone therapy or surgery. Moreover, there remains a lack of specialized healthcare providers, long time to wait for their treatment for public hospitals and if they choose private ones the cost is not covered by public health insurance.⁶¹

The World Health Organization as of June 2018 has issued the new ICD-11 classification list removing gender identity from mental disorders, considering it now as a condition ‘related to sexual health’ and replacing it with the term ‘gender incongruence’ to cover hormone replacement and/or gender reassignment procedures. However, Greece has not yet incorporated ICD-11 nor has it abolished the corresponding categories. Certificates are therefore no longer necessary, but the framework in Greece is still unclear. According to ILGA’s Annual Review of the Human Rights Situation of Lesbian, Gay, Bisexual, Trans, and Intersex People (2024), access to trans-specific healthcare, especially for those uninsured or without private insurance remains very difficult.

⁵⁸ See for example, attack against 2 trans people by a mob of 150 in Thessaloniki, in March 2024 <https://www.athensvoice.gr/epikairota/ellada/841035/omofovia-sti-thessaloniki-epithesi-se-trans-kai-fasismos/>.

⁵⁹ https://tgender.gr/press-release-the-gtsa-denounces-the-murder-of-a-trans-woman-the-dissemination-of-false-information-about-the-victim-and-calls-on-the-state-to-take-all-the-necessary-measures-for-the-complete/?fbclid=IwZXh0bgNhZW0CMTEAAAR1h_5_9i4SASy9uX96KkSslJQBfPiByz2TdT264cpEMITP0V PbTKCjDtmk_aem_QjLTTRvy7rCZo_YF5XykLw.

⁶⁰ FRA, (2024) LGBTIQ equality at a crossroads: progress and challenges, available at [LGBTIQ equality at a crossroads: progress and challenges](#).

⁶¹ <https://www.colouryouth.gr/wp-content/uploads/2020/03/%CE%9F%CE%94%CE%97%CE%93%CE%9F%CE%A3-%CE%93%CE%99%CE%91-%CE%9D%CE%95%CE%91-%CE%A4%CE%A1%CE%91%CE%9D%CE%A3-%CE%91%CE%A4%CE%9F%CE%9C%CE%91.pdf>



Specifically, despite the fact that social insurance currently covers hormonal replacement therapy, it does not cover any gender affirmation surgeries, which must be paid out of pocket. The Transgender Support Association continues to call for depathologisation, access to healthcare for trans migrants and refugees, insurance coverage, and other required advancements.⁶²

In terms of societal attitudes, a recent survey (June 2024) commissioned by ETERON - Institute for Research and Social Change and King's College London,⁶³ with 2074 respondents from across Greece, revealed that 60.1% of respondents agreed or rather agreed with the bill on marriage equality, against 37.4% who disagreed or rather disagreed. By contrast, 59.9% disagreed or rather disagreed with allowing same sex couples to adopt, against 36.7% who agreed or rather agreed. Moreover, 69.9% responded they did not believe that trans persons in Greece lead a decent life, against 17.1% who mentioned that they do.

⁶² See, e.g., <https://avmag.gr/to-syd-gia-to-antiepistimoniko-synedrio-tou-segm-me-ti-stirixi-tis-iatrikis-scholis-athinon/>.

⁶³ Accessible in Greek at <https://eteron.org/wp-content/uploads/2024/06/new-presentation-gender-divide-1.pdf>.



LEGAL AND POLICY FRAMEWORK REGARDING THE SITUATION OF LGBTIQ DETAINEES

RELEVANT LAWS AND POLICIES

Greece has adopted several anti-discrimination laws that explicitly prohibit unequal treatment based on sexual orientation, gender identity, and sex characteristics that also apply for the protection of LGBTIQ persons in prison. Specific provisions on their protection can be found in the Greek Penitentiary Code. One of the more specific and progressive aspects of the Greek legal framework is found in the Greek Penitentiary Code is Article 3 which provides that *“any discriminatory treatment of detainees, in particular on grounds of ... gender or gender identity or sexual orientation shall be prohibited”*, while *“special treatment shall be reserved for detainees, when justified by their legal or factual situation, such as ... persons who are married or have been in a civil partnership ... or for reasons of gender identity , if it is in favour of the detainee and in order to meet the individual needs arising from the situation in which he or she finds himself or herself”*. In addition, allowing for “special treatment” when justified by a person’s legal or factual circumstances, including gender identity, as long as it benefits the individual and addresses their specific needs within the prison system, provides a crucial legal basis for protecting the dignity and safety of LGBTIQ detainees. Recent developments in practice reflect attempts to implement these legal protections. This policy has been applied at facilities such as the Korydallos Women’s Prison by making possible for trans women who are incarcerated to request transfer to women’s prisons.

However, the visibility of and care for LGBTIQ detainees seems to be exhausted in trans women. In addition to the lacklustre legal framework, important barriers to equal treatment persist in practice. Intimidation and fear of violence discourage detainees from being out, especially in male prisons. This results in a distinctive lack of data, which became particularly obvious during the research conducted for this project. Neither specialised NGOs/CSOs, the NPM, the NHRI or the competent Secretariat within the Ministry for Citizen Protection were able to provide any data on the number of gay, lesbian, bisexual, intersex, queer or, indeed trans men, detained in Greek prisons, the conditions of their detention, any violence or abuse they may be faced with, either from fellow detainees or by the correctional personnel, the exercise of their rights in practice, the number and outcome of relevant complaints, etc. Female prisons seem to foster a more tolerant environment when it comes to openness about the inmates’ sexuality and to afford more liberty to lesbian couples. Nevertheless, as this practice is not institutionalised, it is open to arbitrariness and inequalities both across prisons and within the same facility. The above, as well as the relevant information included in this chapter, were derived from personal testimonies provided in the context of the conducted interviews as well as anecdotal information shared by professionals working with detainees.

Apart from the general provisions prohibiting discrimination based on gender identity and sexual orientation, and the and the abovementioned specific provisions and regulations on the treatment of transgender detainees, LGBTIQ+ individuals in Greek prisons are usually subject to the same rules as the general prison population. However, it is important to recognize that the prison system



was historically designed with cisgender, heterosexual men in mind.⁶⁴ As a result, the structure and daily function of prisons often fail to consider or address the specific needs and realities of people of other genders and sexual orientations.

The assumption that all detainees are cisgender and heterosexual reinforces a system where other identities remain invisible or underserved. It is therefore crucial to shed light on the diverse experiences within the prison system and to begin acknowledging and addressing the realities of LGBTIQ+ individuals in custody.

This section of the report aims to outline the general legal and institutional provisions that apply to all detainees, while also collecting data and insights on the specific situations and challenges faced by LGBTIQ+ persons in Greek prisons.

Detention conditions

Ensuring dignified living conditions for detainees involves many provisions that address basic needs such as the provision of three nutritionally adequate meals per day, access to clean drinking water, and proper facilities for personal hygiene, and the ability to wash clothes and utensils, along with access to hygiene products. It also includes adequate sleeping arrangements, including a bed, mattress, and bedding, as well as sufficient personal space in cells or dormitories. Additionally, detainees should have regular opportunities for physical exercise, recreation, and daily outdoor time.

With prison expenditures amounting to only 0.1% of Greece's GDP,⁶⁵ field research confirms that detention conditions are far from ideal, the actual state of conditions in Greek prisons deviates markedly from the expectations set forth in national and international legal and human rights frameworks, which prescribe minimum standards aimed at ensuring the humane treatment and dignity of detainees. In addition, individuals from lower-income backgrounds, particularly those lacking a support network, face disproportionate hardships and systemic challenges, further highlighting the urgent need for systemic reform.

Available data on the occupancy rate in Greek prisons show that there is significant overcrowding (meaning that the rate exceeds the 100%) Greek prison occupancy reached 101% in 2023, down 2 points from 2022. In 2013, the occupancy rate of Greek prisons reached 128%—the highest level recorded in the previous 12 years—meaning that 2,807 more inmates were held than the system's official capacity. Between 2008 and 2021, prison occupancy in Greece dropped below 100% only twice, in 2015 and 2016, when it fell to 97% following the implementation of Law 4322/2015. From 2016 onward, however, the occupancy rate steadily increased until 2020.

⁶⁴ Milioni, Stella-Olga, 2017, Health and healthcare of female detainees in Greece, available in Greek at <https://freader.ekt.gr/eadd/index.php?doc=42125&lang=el#p=31>

⁶⁵ Dionysis Kullolli, 2023 Prisons and detainees: Prisons, number of detainees, demographic characteristics, overcrowding, government expenditure. More information available at <https://www.greeceinfigures.com/fylakes/>



| Date | Occupancy | Capacity | Greece | EU |
|------|-----------|----------|--------|--------------------|
| 2019 | 9935 | 10891 | 110% | 102% |
| 2020 | 10175 | 11379 | 112% | 96% |
| 2021 | 10175 | 11030 | 108% | 98% |
| 2022 | 10175 | 10526 | 103% | 106% |
| 2023 | 10163 | 10242 | 101% | 103% ⁶⁶ |

In many prisons the average free space within cells is less than 3 m² per detainee (Korydallos, Diavata, Larissa, Alikarnassos, Chios, Corfu, Ioannina, Komotini, Tripoli, Trikala, Nafplio, Kos, etc.), i.e. below the minimum threshold established by the CPT for violations of Article 3 ECHR.⁶⁷ Additionally, poor natural lighting, inadequate heating, lack of hot water, poor sanitation, etc. are aggravating factors leading to, at time, volatile conditions. In view of the lack of specialised facilities – with the exception of trans women – LGBTIQ detainees are subjected to the same conditions as the general prison population. However, as mentioned earlier in the report, they often face additional challenges due to their specific vulnerabilities – with safety being the primary concern.

Detention conditions may be different for trans women. According to the Penitentiary Code, women live in women's penitentiary facilities or in special sections of other facilities and are prohibited from communicating with detainees of other categories. Trans women who have had their gender identity legally recognised are placed in women's penitentiary facilities. Trans women who have not had their gender identity legally recognised may request to be transferred to women's penitentiary facilities (from the male prisons) by decision of the Central Committee for the Transfer of Detainees (CCTP); the relevant requests are considered as a matter of priority. We are not aware of any such transfer taking place so far.

Trans women may, however, also request their transfer to the newly established specialized unit for trans women who have not undergone legal gender recognition, which was created in 2021 within the remanded women's ward at the Korydallos penitentiary facility. The unit hosts trans women who were hitherto held in the Corfu penitentiary facility under inhuman conditions, as well as trans women who were detained subsequently.⁶⁸ Both remanded and convicted women are held there, despite the international standard of separation of the two categories. It has a capacity of five cells designed for individual detainees, in accordance with international standards in relation to size and amenities. The CPT has found the material detention conditions in the trans women unit to be a great improvement towards compliance with international standards. However, it also considers that a clear framework for the treatment of transgender persons, in accordance

⁶⁶ More information available at: https://www.datawrapper.de/_/iO3xA/

⁶⁷ Konstantinos Tsitselikis, 2021, The rights of detainees in Greece: International commitments and jurisprudence, (Τα δικαιώματα των κρατουμένων στην Ελλάδα: διεθνείς δεσμεύσεις και νομολογία), 31 October 2021.

⁶⁸ For the regime previously applicable to trans women (convicted or in remand) see Report to the Greek Government on the ad hoc visit to Greece carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) from 22 November 2021 to 1 December 2021, available at <https://rm.coe.int/1680a7ce96>.



with Principle 9 of the 2017 Yogyakarta Principles plus 10, is still missing.⁶⁹ Such a framework should address both the policies towards the placement and management of transgender persons in prison and should include clear protocols with regard to such issues as searches, use of force, staffing, healthcare and treatment (hormone treatment or gender affirming surgery), and association and access to activities together with cis detainees. In its 2022 ad hoc visit, the CPT found that detainees in the trans unit were offered few opportunities for recreational activities and had limited access to much needed psychological support.

Trans women in the Korydallos special unit are held in isolation from the general prison population and do not socialise with cis detainees, apart from rare occasions, e.g., holiday celebrations. According to the field research, those held in individual cells complain that they are forced to endure isolation between 20:00 and 08:00 hours, when the cells are locked. Crucially, the isolation from the general prison population, in combination with the understaffing of prisons, including in relation to medical personnel, psychologists, social workers, etc., leads to the *de facto* exclusion of trans detainees from essential services. The lack of recreational activities and educational opportunities was confirmed by the field research. The interviewee underlined that the trans women didn't have any option for recreational activities or sports, and this had a severe impact on their physical and mental health.

Participants in the project research activities with inside knowledge of the prison system report that the new ward represents a vast improvement in terms of detention conditions, including the size of the cells, sanitation, and support from prison staff. In general, trans detainees are held in individual cells, although, in some cases, two detainees may share a cell, depending on the number of detainees in the unit (currently seven), and sleep in bunk beds. The cells are equipped with a shower and toilet that ensure privacy. Notwithstanding the improvements, the CPT considers that a clear framework for the treatment of transgender persons who are detained in prison, in accordance with Principle 9 of the 2017 Yogyakarta Principles plus 10, is still missing.

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Despite the consensus across our research participants that the new unit represents a vast improvement in terms of detention conditions for trans women, our research revealed some important issues that persist. In particular, as the ward is located at the basement of the Korydallos prison, there is no natural light, whereas in terms of sanitation, the sewage system has occasionally spilled. In addition, one interviewee complained that the overall size of the unit is small, leaving little space for meaningful activities outside cells. The yard was described as "tiny", only fitting approximately two persons at a time. Moreover, the same interviewee mentioned sanitation issues (bed bugs), poor food quality, and also addressed the lack of gender affirming

⁶⁹ Report to the Greek Government on the ad hoc visit to Greece carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) from 8 to 11 November 2022, available at <https://rm.coe.int/1680ac59d6>.

⁷⁰ Report to the Greek Government on the ad hoc visit to Greece carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) from 8 to 11 November 2022, available at <https://rm.coe.int/1680ac59d6>.



facilitations, such as allowing makeup, hair products, razors, etc. However, other research participants noted that the new unit is *“probably the nicest place to be if you had to be in a Greek prison”* and even mentioned that other detainees (e.g., gay men) have requested to be transferred there.



EDUCATION AND TRAINING

Guidelines on the treatment of LGBTIQ detainees

The Ministry for Citizen Protection (General Secretariat for Anti-crime Policy), which has competence over prisons in Greece, has issued in 2024 Guidelines on the treatment of LGBTIQ detainees, with the objective to *“protect the human rights of all detainees, in particular LGBTIQ+ detainees, and to treat them in a way that safeguards them and improves the daily lives of detainees as well as prison officers”* in line with the National Strategy for the Equality of LGBTIQ+ persons.⁷¹ The Guidelines are addressed to prison staff and aim to equip them with the knowledge and tools to interact positively with detainees from diverse backgrounds and to raise their awareness on issues of sexual orientation and gender identity, expression, and characteristics, in order to uphold the dignity of LGBTIQ+ detainees. The 30-page document contains chapters on the International, European and National frameworks and standards relating to the treatment of LGBTIQ persons, a glossary of terms and relevant bibliography.

At the international level, the Guidelines refer to the 2006 Yogyakarta Principles (specifically, Principle 9 on the protection of persons deprived of their liberty from violence, discrimination and other harm on grounds of sexual orientation, gender identity, gender expression or sex characteristics). It is hard to explain why they leave out the 2017 Additional Principles and State Obligations on the Application of International Human Rights Law in Relation to Sexual Orientation, Gender Identity, Gender Expression and Sex Characteristics (YP+10).

European standards referred to include the ECHR, the Charter of Fundamental Rights, the TEU, the TFEU, and the LGBTIQ Equality Strategy 2020-2025. In addition, the relevant segment includes a mention of Recommendation CM/Rec(2010)5 of the Council of Europe Committee of Ministers to member states on measures to combat discrimination on grounds of sexual orientation or gender identity, erroneously referring to it as a recommendation of the European Commission.

In terms of the national framework, the Guidelines mention the Constitution and its provisions on human dignity, liberty of the person to freely develop their identity and enjoy the protection of their life, honour, and personal freedom regardless of their individual characteristics, the right to religious freedom (unclear why relevant), the right to private and family life, and the right to employment (also of unclear relevance). They omit the constitutional provision safeguarding equality. Moreover, they refer to Law 4285/2014 on Combating racism, Law 4356/2015 on civil partnership, Law 4443/2016, which in terms of LGBTIQ persons only concerns equality in employment, Law 4491/2017 on the legal recognition of gender identity, the Penitentiary Code, and the National Strategy for the Equality of LGBTIQ+ persons. It is unclear precisely when the Guidelines were drafted. The relevant entry on the website of the General Secretariat on Anticrime Policy was made on October 8, 2024. However, they do not seem to be updated with relevant developments adopted in the course of the present year: they erroneously mention that the legal change of one's gender and name in accordance with Law 4491/2017 requires them to be

⁷¹ Accessible in Greek at <https://www.ggap.gov.gr/odigos-metacheirisis-loatki-kratoumenon/>.



unmarried, a provision which was abolished in February 2024, while they also fail to mention Law 5089/2024 on marriage equality, also published in February.

Training of penitentiary officers

Penitentiary officers in Greece did not receive specialized, structured training until very recently. The first cycle of training of the School of Correctional Officers took place in Eleonas, Thebes, On Monday 30 January 2023. Joint Ministerial Decision 11762/2024 was issued in May 2024, determining the organisation, administration, content, place and duration of the basic training of employees of the secondary education category (DE), of the branch DE Guarding of Penitentiary Institutions. The proposed training programme comprises theoretical modules (prison and penal legislation, ethical rules, detainees' rights, crisis management, etc.) as well as practical skills (self-defence and self-protection).

Modules relevant to LGBTIQ detainees include:

1. External monitoring by national, European and international bodies and committees (Ombudsman - National Mechanism for the Prevention of Torture and Ill-treatment, CPT, ECHR, etc.), taught within the module Basic Principles of Criminal Justice (6 hours).
2. Core values and ethical rules in European and international legal texts (4 hours), including Recommendations of the Council of Europe, European Prison Rules and the United Nations Standard Minimum Rules for the Treatment of Detainees (Nelson Mandela Rules).
3. Inclusion, its meaning and consequences (6 hours), taught within Chapter 2 on the Treatment of detainees and fundamental rights (24 hours), and including Mental health and prevention of self-destructive behaviour, Special characteristics and needs of vulnerable groups of detainees (persons with disabilities, suffering from addiction, LGBTIQ detainees, minors, etc.), and Cultural diversity and intercultural communication in prisons.
4. The mission and role of prison staff (hours 6), also taught within Chapter 2 on the Treatment of detainees and fundamental rights (24 hours), and including Protection of detainees' rights and The contribution of prison staff to the social reintegration of detainees.
5. Health issues (11 hours), including Dealing with pandemics, infectious and sexually transmitted diseases and health care for vulnerable groups of detainees (disabled persons, drug addicts, minors, etc.).
6. Rights and obligations of prison staff as public servants (6 hours), including Rules of conduct and official behaviour and Personal data protection, use of media and social media.
7. Risk assessment (6 hours), including Factors increasing the vulnerability of detainees.
8. Cross-professional cooperation (6 hours), including with Educators and representatives of civil society.

According to the Ministerial Decision, following these courses is mandatory. The training programme has a total duration of one hundred and eighty-four (184) hours, of which one hundred and sixty-eight (168) are teaching hours, while the remaining sixteen (16) hours are reserved for the assessment of the trainees, through final examinations. Although the Decision establishes a framework for the assessment of trainees, it does not specify what the options are for the prison staff that fail the exams.

The courses are taught by competent teaching staff, which may include university professors, members of the judiciary, specialists, executives of ministries and various organisations (school's of Citizen Protection, Ministry of Justice, Ministry of Health, Ministry of Education, Religious Affairs

and Sports, the Centre for Security Studies, the Ombudsman, KETHEA, the Organisation Against Drugs - OKANA, etc.) with knowledge and teaching experience relevant to the modules of the School's curriculum.

While introductory training for all correctional officers is undeniably important and widely recognized as a good practice, findings from field research underscore the critical need for ongoing capacity-building initiatives targeting prison staff horizontally. Initial training, although valuable, is not sufficient to address the evolving challenges and complexities encountered in prison.

Moreover, a recurring theme was the importance of effectively bridging theory with practical application. While theoretical frameworks are introduced during training sessions, their relevance to the daily realities of prison work is not always clear. This disconnect often results in skepticism regarding the applicability of theoretical models, particularly in environments where institutional constraints—such as understaffing, overcrowding, and limited financial or material resources—severely limit what can be realistically done.

Training provided by the National Centre for Public Administration and Local Government

The National Centre of Public Administration and Local Government (EKDDA) is the national strategic agent for the development of the Human Resources of the Public Administration and Local Government, implementing life-long training actions. EKDDA coordinates the Institute of Training – INEP and its decentralized structure in Thessaloniki. INEP designs and materializes a wide spectrum of accredited training programs aiming at the implementation of specific public policies, at the improvement of the Public Administration effectiveness, as well as at the quality of the services to citizens.

All training programs are free of charge for the trainees or their services, they are aligned with the operational goals and the organizational changes of each service or institution, and they are designed after the processing of requests and the identification of training needs. INEP's curricula are updated with new titles within articulated thematic fields. More than 1.800 synchronous and asynchronous training programmes are delivered annually throughout the country, attended by an average of 35.000 Public Administration and Local Government employees.

EKDDA lists training programmes for the enhancement of human rights within public administration, including the rights of LGBTIQ persons, in accordance with the relevant national strategies. Accordingly, it offers a permanent course, delivered remotely over two days (morning or evening) titled “Safeguarding equality and the rights of the members of the LGBTIQ community within public administration” and delivered remotely. For their delivery, they reached out to external experts from the civil society, who are not permanently employed by the EKDDA. Other courses offered within the thematic of Fundamental Rights and Social Policy may also touch on relevant issues, such as the courses on gender-based violence, the Charter of Fundamental Rights, courses related to healthcare services, etc.

The specialised courses take place over two consecutive days. According to one of the trainers, who participated in the present research, they comprise of a theoretical part outlining basic definitions and legal obligations, as well as a practical part with experiential exercises, working



groups and video presentations with testimonials, as well as guidelines on how to interact with LGBTIQ persons (good practices, do's and don'ts, etc.). However, a big part of the training is spent to familiarise participants with basic notions, such as the difference between sexual orientation and gender identity, and there isn't enough time for more in-depth discussions. In sum, the courses offer an introduction to LGBTIQ issues and following one cannot certify that participants have gained the capacity to appropriately interact with LGBTIQ persons.

Despite the overall high quality of the EKDDA courses, participation is voluntary. The trainer interviewed mentioned that, to their knowledge, they have not delivered training to any penitentiary officers.



SITUATION FOR LGBTIQ DETAINEES

SEXUAL ORIENTATION AND GENDER IDENTITY IN DETENTION

It is important to highlight at the outset that there is very limited available data for LGBTIQ detainees, making it difficult to understand the situation both in and outside prison⁷². Few EU Member States collect data on detainees' SOGIESC, and even when they do, it may not reflect reality, as many individuals choose not to disclose their identity due to fear of discrimination. Gender data are limited to binary categories—female and male—with available information based solely on biological sex. In 2023, there were 497 female prisoners in Greece, representing 4.9% of the total prison population."

Data, when available, is often partial, limited to specific facilities or only covering transgender detainees. Greece does not collect data on LGBTIQ detainees. With the exception of the seven trans women held in the specialized unit of the Korydallos prison, there is no other official data available, relating to the gender or sexual orientation of prisoners nor do prisons collect relevant data, including of trans prisoners who have completed the process for the legal recognition of their gender identity. This complete lack of data is exacerbated by the reluctance to be out due to safety concerns, which is particularly acute in male prisons.

During the initial admission process into correctional facilities, inmates are provided with the opportunity to communicate their personal needs and disclose relevant information about themselves. This typically occurs during intake assessments and meetings with key institutional personnel, including correctional officers and social workers. Findings from field research reveal a significant gap between the theoretical framework of inmate assessment and the lived experiences of LGBTIQ individuals in these settings. Despite the procedural availability of this opportunity, many prisoners refrain from disclosing information about their sexual orientation or gender identity.

One of the most salient conclusions that can be drawn from this analysis is the paradox of visibility and invisibility experienced by LGBTIQ individuals in custodial settings and even when individuals do disclose their identity, the lack of institutional follow-up or formal data collection processes renders this information effectively obsolete from a policy or practice perspective.

LGBTIQ detainees often remain invisible, partly because sexuality is understood as a taboo. Prison guidelines tend to ignore sexual conduct, and this hinders proper health and safety measures, including access to sexual and reproductive health services, information provision and early identification of STDs. In addition, understanding that LGBTIQ persons are not a homogenous group is essential. The experience of imprisonment can be very different for each person and collecting data and information that takes this into account is key in understanding the challenges that they might face in different situations (including e.g. those related to body searches and regulations regarding the placement, are very much connected to the gender identity of a detainee, and not the sexual orientation) and in policy development in order to

⁷² Rainbow Map, ILGA Europe, accessible at <https://rainbowmap.ilga-europe.org/>.



overcome those. This absence of formal recognition not only impedes the development of targeted support measures but also reflects a broader institutional reluctance to engage with sexual and gender diversity in meaningful terms. The result is an environment where the needs of LGBTIQ inmates remain largely unacknowledged, further entrenching their marginalization within the carceral system.

PLACEMENT AND ALLOCATION

Legal framework

The initial placement of detainees in specific penitentiary facilities is decided by the Department for the Execution of Sentences of the convicting Court, or by the prosecutor in smaller courts, in accordance with their legal and actual status. Allocation factors include the age (minors/adults), gender, and whether the person in question is convicted or in remand. There is no structured individual needs and risk assessment mechanism, although the Court should, in principle, give priority to the facility closest to the residence of the detainee's family members. However, this may not always be the case due to overcrowding or security concerns. The type of crime may also affect placement. For example, since 2024, the Tripolis and Grevena prisons have been converted to special penitentiary facilities hosting exclusively sex offenders and persons who have profited from sexual exploitation, as well as persons in pre-trial detention for these crimes. Moreover, the Domokos penitentiary facility generally hosts persons convicted of serious crime (e.g., operating a criminal network or terrorist organisation, etc.). The final placement of each detainee is decided after their initial admission and upon their examination by the prison doctor and social services, taking into account their personal and legal status. Sex characteristics and sexual orientation are not considered for the allocation of detainees.

As already mentioned, trans women who have legally transitioned are placed in female facilities. Trans women who have not had their gender legally recognised may request to also be placed in female facilities or to be transferred in the special unit operating within the Korydallos ward for women in pre-trial detention. In practice trans women who have not had gender-affirming genital surgery are placed in the trans unit or in male facilities until and if they request their transfer. As there is currently no specialized unit to host trans men. According to the Penitentiary Code, trans men may request their transfer to penitentiary facilities for men under the same procedure as trans women. Their petitions are also examined as a matter of priority by the Central Committee for the Transfer of Detainees. In practice, according to the field research, there are no known cases of trans men who have requested such transfer. Trans men who have had their gender identity legally recognized, are placed in penitentiary facilities for men. There are no specific provisions for non-binary and other gender-diverse persons. Moreover, upon admission, detainees may request to be placed in a different penitentiary facility for reasons relating to respect for their rights on the basis of their gender identity and gender expression (not their sexual orientation).

Application in practice

Our research showed that, during the placement process, trans individuals experience discriminatory behaviours, especially misgendering. Penitentiary personnel address them with their legal name that does not correspond to their gender identity without conducting further

assessment, resulting in placements that do not align with the person's gender identity. However, we have encountered cases where the penitentiary facility acknowledged the detainee's trans identity and assisted her to apply for her transfer to the special trans unit.

In addition, detainees may request to be transferred to a different penitentiary facility, as well as to the Korydallos special treatment facilities (the Agios Pavlos Hospital and the psychiatric hospital for male detainees), for health-related reasons. This provision used to be particularly relevant to detainees living with HIV/AIDS, who were all transferred to the Agios Pavlos hospital. However, following a CPT recommendation, HIV positive persons are now placed across the prison estate, in accordance with general allocation criteria and are to receive treatment in their place of detention. In practice, this has created serious deficits, to the detriment of detainees' health, as analysed below, in the section on healthcare. Transfers are decided by the Central Committee for the Transfer of Detainees (CCTP), which may decide to hear the detainee through teleconference, if considered relevant for the purpose of providing clarifications or expressing their views. If a CCTP decision is rejected, the detainee may file a new one no sooner than three months after the rejection. If the CCTP rejects the detainee's request twice on its merits, the detainee may appeal the decision before the Court for the Execution of Penalties.

BODY SEARCHES

Legal framework

Upon admission to the penitentiary facility, detainees are subjected to body searches and searches of their personal belongings. These should be carried out in a private space and must be done in a manner that does not violate their dignity. Body searches are conducted by at least two (2) officers of the same sex as the detainee. Transgender persons are asked which gender they wish to be searched by. If there is reasonable cause to justify an endoscopic or x-ray examination, this is carried out only by a medical doctor on the order of the competent judicial authority. Sexual orientation is not taken into account. The same process is followed for all detainees, regardless of LGBTIQ status.

Application in practice

Detainees report that it is generally a humiliating process. There is no real privacy in the search room, and prison personnel may come and go during the search. Detainees are stripped and asked to "bend over and cough". Searches are performed each time a detainee enters a penitentiary facility, even if they were temporarily transferred for medical reasons.

"The process is utterly humiliating. [Body searches] are conducted in a separate room; however, there is no privacy. The door remains open and guards come and go during the process."

— Interviewee

ACCESS TO HEALTH CARE

Legal framework

The Penitentiary Code provides that prison directors guarantee access to healthcare for all detainees, at a level equivalent to that of the general population. mandates that detainees are



escorted to the doctor at the latest on the next working day following their admission. This practically means that the law allows for more than 24 hours to elapse between admission and first screening, contrary to international standards. The doctor examines the detainee and, if it is determined that they have a health problem, the appropriate treatment is ordered, or a request is filed for them to be examined by a medical specialist. The health screening should be repeated every six months.

According to the law, detainees may have access to medical care from personnel within the penitentiary facility, request to be examined by their own doctor at their own expense or make use of remote medicine technologies if detained in remote and difficult to reach areas. The penitentiary code also provides that “exceptionally”, where there is no in-house medical personnel, the healthcare needs of the facility are covered by external medical practitioners (doctors, nurses, dentists, etc.), stationed in medical facilities in the area, contracted specifically for this purpose. As show below, these provisions are not respected in practice.

Application in practice

Imprisonment can significantly affect both the physical and mental health of individuals. Detainees often have greater healthcare needs due to the conditions of confinement, including the impact of their detention to their rights and freedoms, the obligatory cohabitation with a large number of persons, often within a confined and overcrowded environment, and the sanitary conditions in each detention facility. Having access to high-quality, specialised healthcare services plays a key role in how detainees understand and manage their health and shapes the way that they understand their health status.

Healthcare in prison starts with the initial screening process, upon admission of the detainee in the facility. During this screening, the detainee is tested for various communicable diseases and is asked about their medical history and related needs. Following this stage, an appropriate treatment plan is ordered or the detainee is referred to a medical specialist. The screening process upon admission can enable the identification of medical needs early, save time, and improve the use of available services. Doctors in all penitentiary facilities have at their disposal uniform medical protocols, drawn up by a committee of health specialists, established by the Council of Europe, within the framework of the "Strengthening the Health Care of Detention Establishments in Greece" project, and approved by the Ministers for Health and Citizen Protection. However, as noted by the CPT, in its Report to the Greek Government on the ad hoc visit to Greece carried out by the European Committee for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (CPT) from 22 November 2021 to 1 December 2021,⁷³ with the exception of the Korydallos prison, in the other prisons visited, medical screening simply consisted of asking questions on the basic medical history and taking blood pressure, no further physical examination taking place, including screening for transmissible diseases such as Hepatitis B and C, HIV and Tuberculosis. In addition, many detainees had not been seen by a doctor for more than a week after admission and some had no entries in their medical file. Screening for infectious

⁷³ Accessible at <https://rm.coe.int/1680a7ce96>.



diseases is not routinely carried out and a physical examination only takes place if the detainee raises a medical issue, despite the law providing for routine screenings every six (6) months.

This pattern is repeated across healthcare provision in Greek prisons. Access to adequate healthcare is far from guaranteed – let alone healthcare equivalent to that afforded to the general population, as mandated by the penitentiary code and the relevant international standards. The extreme shortages of medical staff and resources, along with the centralization of many health services in Athens, creates major barriers, especially for detainees placed in facilities far from large urban centres. This is exacerbated by the abolishment of the in-house doctor system and its replacement with a rotation system relying on neighbouring medical centres, whereby doctors of various specialties visit the penitentiary facilities on specific days. This system is contrary to the law, which allows for it only in exceptional circumstances. It also has proven to be completely ineffective in practice, and has been shown to have a detrimental effect to the health of detainees, who, in many cases, must be transferred to Athens to receive proper treatment, face long wait periods to see a doctor or rely on health professionals who lack the necessary specialization for their conditions.

These deficiencies are particularly acute in the case of HIV+ prisoners, a group that often intersects with LGBTIQ identity, increasing the vulnerability of the concerned individuals. Our research has shown significant gaps in this area. The decentralisation of HIV care and subsequent transfer of HIV+ prisoners from the Agios Pavlos hospital in Korydallos prison, pursuant to the relevant CPT recommendation has created more problems than it resolved. Prisoners held far from major cities (mainly Athens and Thessaloniki) do not have access to specialised immunology labs or to medical personnel with appropriate training to provide them with the appropriate care. Consequently, they need to be transferred to Korydallos any time they need to be examined. In terms of specialised medical personnel, it should be noted that there is only one doctor in the entire prison system who specialises in HIV/AIDS, assigned to the Korydallos hospital, with obvious implications in terms of their availability, workload and burnout. Another issue, reported by research participants, has to do with the transfer of medical files. Despite the fact that, according to the Penitentiary Code, each prisoner is provided with an individual health card, which “follows” them when transferred, the field research indicates that gaps in the relevant process often lead to medical records not being shared with the new physician for data protection reasons.

Another major issue concerns delays in the delivery of medication. The field research confirmed that medication is provided only for one month, despite requests by patients to have two-month prescriptions filled in. This is due to financial and logistic reasons, as it is uncertain whether a patient will remain in a specific penitentiary facility or be transferred/released. One interviewee reported that HIV-positive detainees often face delays in accessing their medication. The procedures to request treatment are slow, and in her case, she went without medication for two months. More broadly, there are multiple reports of HIV-positive individuals in detention not receiving continuous access to medication or specialized medical care. Delays of 10-15 and even up to 20 days in the refilling of the monthly prescriptions, are a frequent occurrence, meaning that patients receive a month’s worth of medication and then stay off medication for an average of two weeks. Participants in the research reported that their personal health suffered from these gaps in



treatment and their antigens have increased. One interviewee reported that they feel as though *“the state is waiting for us to die to space one bottle of medicine”*.

Within this disappointing framework, one good practice has emerged from the field research in relation to the provision of medication. It concerns the issuing of a temporary social security number for prisoners, allowing those who do not fulfil the criteria for an ordinary social security number (many non-nationals, who constitute approximately half of the prison population) to have access to medication. This procedure works efficiently, according to participants, and has benefited thousands of prisoners so far.

Similar issues are observed for other serious illnesses. Prisoners with chronic illnesses ⁷⁴ may request to be treated by their own doctor, at their own expense and under the supervision of the prison doctor. The financial requirement and the limited availability of medical personnel render this option mostly nominal.

Gender-affirming medical care for trans prisoners is provided to some extent, albeit with important gaps. Hormone replacement therapy is currently available to detainees, although shortages in medication, among other issues, are recorded in relation to both the prison population and more broadly, for trans people across Greece. ⁷⁵ According to the field research, if a trans person was undertaking hormonal treatment prior to their incarceration, they should, in principle, be able to continue this treatment without delay once admitted to a penitentiary facility, even if they do not provide any relevant documentation, provided that there is an entry for prior prescription of such therapy in their medical records. However, initial delays were also reported, which required the intervention of NGOs active in the field to be resolved. If a trans person wishes to begin hormonal therapy while already in prison, they need to complete certain sessions with a psychiatrist who will then give permission to start the treatment. The same process is required for non-incarcerated trans people. Interestingly, a trans research participant mentioned that trans women may find it easier to commence transition within the penitentiary facility, as there are shorter waiting times. However, a psychologist working in prison mentioned that they haven't had a case where someone started transitioning within prison, as this would be very taxing from a psychological perspective. Trans detainees do not have access to gender affirming surgeries within prisons, despite the relevant CPT recommendation. In any case, these surgeries are not covered by the public healthcare system and trans persons must pay for them out of pocket in private healthcare providers.

⁷⁴ A chronic illness is a health condition that may come from a medical issue or an accident and includes at least one of the following: it lasts for an unknown or indefinite time with no known cure, can come back or get worse, is permanent, requires long-term care, ongoing medical checkups and tests, or needs rehabilitation or special education to recover. People with HIV/AIDS are also included under this definition and are protected from discrimination at work, in line with ILO Recommendation 200 (2010). In short, chronic illness refers to a person's long-term health condition.

⁷⁵ Between January and March 2023 the Ministry of Health has blocked the prescription of ARVEKAP (active ingredient tryptorelin) for people on hormone therapy, while the medication remains certified and available in the EU (this drug acts as a hormone blocker) <https://orlandolgbt.gr/apokleismos-trans-atomon-apo-simantiko-farmako-ormonotherapeias-me-apofasi-toy-ypoyrgeioy-ygeias/>.



Mental healthcare within Greek prisons is also severely neglected and psychiatric facilities for prisoners have received damning comments from the CPT and other actors.⁷⁶ The Korydallos Psychiatric Hospital is the only establishment in Greece for detainees with a mental disorder, either convicted or in remand, resulting in chronic and severe overcrowding. In addition, despite past legislative attempts and the Greek NPM's recommendations to transfer competence over the hospital to the ministry of health, the full integration of the Psychiatric Hospital is still pending.⁷⁷ The CPT in its 2022 ad hoc visit on 8-11 November 2022,⁷⁸ found that the hospital operated with a *“woeful lack of staff, notably nurses and prison officers”*, and that prison officers working with patients lacked any specialized training.

The treatment offered to patients is based almost exclusively on pharmacotherapy, with no genuine occupational therapy activities, or facilities for them to take place. Detainees often lack continuous or adequate access to psychotherapy, psychiatric care, or psychosocial support. As one interviewee noted, many detainees use psychiatric medication as a coping mechanism to escape the harsh reality of prison life and to remain compliant. Typically, they have a single session with a psychiatrist and are then left to rely solely on medication. Overreliance on medication is particularly problematic in the case of trans women. An interviewee with lived experience within the Korydallos trans unit mentioned that whenever a trans detainee requested mental healthcare, they were simply given medication as they were viewed as mentally ill due to their trans identity. This attitude was confirmed first hand by our researcher when interviewing prison staff who were open about viewing trans detainees as *“poor souls”* in need of psychiatric help. This is indicative of the negative impact of pathologisation to the health of trans persons.

Astonishingly, there is no resident psychiatrist within the Korydallos facility. Instead, patients are treated by visiting psychiatrists in rotation, as is the case for physical illnesses. The psychiatric hospital, (currently hosting 239 patients, according to official statistics),⁷⁹ is staffed by only one fully trained nurse, assisted by three custodial officers performing nursing duties, two psychologists and four social workers. There is no occupational therapist, nor a pharmacist, despite the preponderance of pharmacological treatment. Unsurprisingly, given how thinly stretched the personnel is, a review of medical files by the CPT revealed an absence of treatment plans – confirmed by discussions with patients and staff – as well as a poor system of record keeping. It also found that the Hospital does not systematically apply an internationally recognised diagnostic system which would facilitate an understanding of the patient population and be helpful

⁷⁶ See *ibid.* 18.

⁷⁷ Further steps for the Hospital's integration in the NHS were made with Law .5129/2024 (article 6.4), which provides that Korydallos Psychiatric Hospital for Prisoners is part of the NHS entities which are integrated in the National Network of Mental Health Services. However, the details of this integration are left to a JMD, which, had not been issued while this paper has been drafted.

⁷⁸ *Ibid.* 18.

⁷⁹ Accessible in Greek at <https://www.ggap.gov.gr/statistika-stoixeia-kratoumenon/>.



for when patients are discharged or transferred to another hospital. Material detention conditions, including hygiene, were found to be incompatible with the treatment and welfare of patients.

Despite the fact that a legal provision in the Penitentiary Code mandates the establishment of a psychiatric unit in the Thebes Women's prison, no action has been taken hitherto in that direction, including the issuing of the Common Ministerial Decision required by law to proceed.⁸⁰ Currently, there is an estimated 200 women prisoners with mental health issues that do not have access to care due to the lack of a psychiatric department for women across the country, rendering this an issue of equal treatment between men and women detainees.

Suffice it to say that, under these conditions, there is no specialized training and care available to LGBTIQ prisoners with mental health issues, tailored to their specific needs. Furthermore, trans women held in the special unit of Korydallos prison also have limited access to psychological support from the psychologists and social workers of the prison's social services, as well as to specialised rehabilitation programmes for persons suffering with addiction, such as those provided by the KETHEA Therapy Centre for Dependent Individuals across Greek prisons. A prison psychologist who participated in the research mentioned that there is no allotted time for her to visit the trans unit within her daily work schedule, and that she does so after-hours on unpaid time. Moreover, a KETHEA representative confirmed that, although their staff can visit the transgender unit, detainees do not have access to their community-based programmes which constitute the core of their methodology. These findings are also echoed in the last inspection of the Greek NPM in Korydallos Female Prison in 2024. Furthermore, the trans prisoners who were interviewed, during the Greek NPM's inspection, expressed feelings of isolation and insecurity for health emergencies during the night. This was also expressed by a trans interviewee and highlighted that the lack of recreational activities and mental health support increased the feeling of isolation leading trans women to stay alone without any cause or daily routine. Finally, the feeling of isolation is also fortified by not participating in the activities that cis women can enjoy.

In relation to self-harm and suicide prevention, the Prison Council composed of the prison's director (presiding), the most senior social worker and the most senior specialist (lawyer, psychologist, agronomist, sociologist or teacher) of the facility concerned, is competent to take appropriate measures including precautionary isolation or restraint in cases of *"attempted suicide, ingestion of objects dangerous to health, communicable diseases, psychogenic reactions to detention, mental illness or other disturbance of mental functions"*, after a doctor's opinion. No other course of action is specified. There are no specialized safeguards in place for LGBTIQ detainees.

Specific issues concerning prisoners with HIV/other commutable diseases

⁸⁰Athena Linou, 2023, *A pertinent question from Lino: Immediate need for the establishment of a Psychiatric Department for women prisoners at the Women's Correctional Facility of Eleonas Thebes* available in Greek at [Επίκαιρη ερώτηση Λινού: Άμεση ανάγκη ίδρυσης Ψυχιατρικού Τμήματος γυναικών κρατουμένων στο Σωφρονιστικό Κατάστημα Γυναικών Ελαιώνα Θηβών](#).



Prisoners with HIV have access to healthcare and medication for their condition by law. However, structural, horizontal issues related to healthcare in prisons in general, often lead to inconsistent and unequal treatment. Greece has been convicted on a number of occasions on grounds of its treatment of HIV positive prisoners, who used to be held at the Korydallos special health centre under inhuman conditions (overcrowding, uncontrolled admission of new patients often suffering from communicable diseases, dilapidated facilities, shortages in medicines, etc.).⁸¹ As a result, the CPT recommended that prisoners with HIV be spread across the prison estate. Compliance with this recommendation, however, has led to practical gaps in their treatment. As already mentioned, respondents to the field research reported that there is only one specialized medical doctor, appointed to the Korydallos prison. In addition, as the majority of prisons mostly relies on visiting doctors for healthcare services⁸², prisoners with HIV, held in other facilities, receive treatment from visiting doctors from local clinics, based on a rotation system.

As mentioned in the previous section, in practice many prisoners do not receive initial screening for communicable diseases, including viral Hepatitis and HIV. There have been reports in frame of the field research that the relevant protocols in place are not implemented. Limited access to appropriately equipped labs in the vicinity of the penitentiary facility creates additional issues, especially for the facilities located far from the Ministry of Health checkpoints. Usually, samples need to be transferred to Athens or Thessaloniki in order to be processed, creating delays. There are no specialized provisions or policies on sexual and reproductive health care, overall, as well as in relation to LGBTIQ detainees. Relevant actions are mainly implemented by the civil society.

The NGO Positive Voice carries out HIV and hepatitis B and C screening for prisoners in Thessaloniki, in cooperation with the Association of Liver Patients "Prometheus". Moreover, from 2017 to 2019, they implemented training cycles for prisoners on sexual health issues at the Women's Prison of Thebes and the Rehabilitation Centre for Drug Addicts in Eleonas Prison, as well as at the prisons of Avlonas and Chalkida, whereby small groups of prisoners voluntarily attended weekly meetings, in order to pass on the knowledge to the rest of the prisoners through daily cohabitation and communication. The topics of the training approached issues related to sexually transmitted diseases such as HIV/AIDS and hepatitis B and C, their modes of transmission, prevention, treatment, social stigma and other parameters. In addition, in 2018 - 2019, in cooperation with the Ministry of Justice and the General Secretariat for Anticrime Policy, the NGO implemented an information programme for prison personnel in 12 detention facilities throughout Greece.

From 2016 to 2019, in cooperation with the General Secretariat for Anticrime Policy, Positive Voice also provided free condoms in prisons. This was an initiative aimed at promoting prevention of

⁸¹ See, for example, the landmark ECtHR case of *Martzaklis and others v. Greece* (Application no. 20378/13), concerning 13 applicants with HIV held at Korydallos.

⁸² See also the Greek Ombudsman's Annual Special Report 2022-2023 as National Preventive Mechanism Against Torture & Ill-treatment (p.65), available here: <https://www.synigoros.gr/en/category/ekdoseis-ek8eseis/post/annual-special-report-2022-2023-or-national-preventive-mechanism-against-torture-and-ill-treatment>.



sexually transmitted diseases (STDs) in a context that presents significant specificities and challenges. The Positive Voice representative participating in the Greek National Coalition of the LGBTIQ Detainees project mentioned that they met resistance from the prisoners themselves, who “resented the implications” tied to the need for condoms. However, the project was successful in distributing a large number of condoms during the years it ran.

“I am receiving my medication for one month and then have to wait for two weeks for it to be refilled. I don’t know why they do it. Sometimes it feels like the state is waiting for us to die to space one bottle of medicine”

— Interviewee

HARASSMENT AND VIOLENCE

Legal framework

Harassment and violence within the prison are, of course, prohibited by law. The penitentiary personnel is responsible for maintaining order through prevention and management of incidents. Furthermore, harassment and violence between detainees constitute disciplinary offences:

- Physical violence is a class A disciplinary offence which can incur a penalty of 1 to 10 days in a disciplinary cell, (punitive) transfer to a different facility, a ban of up to a year from engaging in work or participating in vocational training, as well as 51 to 100 penalty points (relevant for conditional release, granting of leaves, and beneficial calculation of days of sentence served);
- Harassment is a class B disciplinary offence which can incur a penalty of a ban of up to six months from engaging in work or participating in vocational training, as well as 51 to 100 penalty points.

The Statute for the operation of detention facilities also provides for measures aiming at the protection of victims. Specifically, it provides that in exceptional circumstances, when it is found that a detainee requires special treatment due to, in particular, differences with fellow detainees, self-destructive tendencies, health problems or “sexual particularities” (sic), and provided that the necessary infrastructure and staffing are available, the prisoner may be placed in a disciplinary cell by decision of the Prison Council. The cell must be systematically monitored, including by electronic means, provided that the prisoners under protection are informed of this monitoring. The placement is made with the consent or subsequent approval of the supervising prosecutor or doctor, as appropriate. In exceptional cases, the prisoner may be placed in a special protection ward by the chief guard or the shift supervisor, and the Prison Council shall be informed and give its approval ex post.

Application in practice

The CPT considers that Greek prisons do not provide a safe and secure environment for prisoners, in general.⁸³ Instances of inter-prisoner violence, including severe injuries resulting in

⁸³ Ibid. 17.



hospitalization, continue to occur, albeit appearing reduced in recent years. However, much of the inter-prisoner violence and intimidation remains unreported, as prisoners do not believe that prison staff can offer them substantial support, including due to chronic understaffing. The CPT's delegation in its ad hoc visit from 22 November 2021 to 1 December 2021, received multiple allegations of intimidation and violence perpetrated by other prisoners and many prisoners continued to possess make-shift knives for self-protection. Complaining was still considered unthinkable, according to the persons met, as victims not only expected that no action would be taken officially but also feared reprisals from other prisoners.

This climate of intimidation and mistrust of the prison authorities was confirmed in the field research, with participants reporting fear of violence and harassment as a primary deterrent factor for LGBTIQ prisoners to be out to any degree within the prison, and consequently a major factor for the lack of relevant data. Examples of blackmail, including financial, were cited.

Another critical factor highlighted by the research in relation to harassment is the complex power dynamics that exist within the prison "ecosystem". Within the Korydallos trans unit, relations between the prisoners are overall good. However, interviewees reported that fights can and do occur, as tensions within the trans community are often transferred into prison (*"some detainees know each other from outside prison and have previous animosity"*). The power dynamics are not only shaped by gender identity—which is often concealed for safety as explained in previous sections—but also by socio-economic status. Intersectionality plays a significant role, as individuals who are marginalized along multiple axes (e.g., being gay and financially disadvantaged) are at higher risk of harassment and in many cases even exploitation.

Prisoners without financial resources become easy targets for sexual exploitation or are coerced into performing unpaid labour, such as cleaning or laundry, for more powerful prisoners. As one interviewee starkly put it, *"a lifer will buy herself a slave"*. This risk becomes even higher when the prisoner is a foreign national, and their relatives or close contacts do not possess a Greek AFM (tax identification) number—an essential requirement for depositing money into prison accounts. As a result, they are unable to receive financial support directly from their families. In such cases, they may resort to asking other inmates or intermediaries to receive the funds on their behalf. This practice, however, carries significant risks, including the imposition of informal "fees" or, in some instances, the complete loss of the money. Field research also revealed that prison staff are often aware of these exploitative practices but do not always intervene.

These findings underscore how intersecting forms of marginalization—based on gender identity, poverty, and social status—contribute to patterns of abuse, and how institutional inaction can further entrench these inequalities.

In the absence of relevant protocols, as highlighted by the CPT, there is an informal practice of placing LGBTIQ prisoners in isolation⁸⁴ to preserve their safety. Many times, this is the result of

⁸⁴ On the inhumane conditions in disciplinary cells, see also the Greek NPMs annual report 2022-2023, p.(109, 113, 160)available here: <https://www.synigoros.gr/en/category/ekdoseis-ek8eseis/post/annual-special-report-2022-2023-or-national-preventive-mechanism-against-torture-and-ill-treatment>.



the prisoner's request. However, in addition to this practice being contrary to the Yogyakarta Principles +10, it will usually raise concerns related to the violation of the right to be free from torture an inhuman or degrading treatment due to the abhorrent conditions in the isolation cells. Specifically, the field research indicates that the cells are filthy and often infested with cockroaches; the "bed" is made of concrete; there is little to no natural light and no artificial lighting; and the detainees are not able to contact prison personnel, even in situations of emergency. There was indirect testimony from an interviewed detainee who stated a prisoner died due to not being able to alert anyone in a case of a medical emergency.⁸⁵

On a more positive note, interviewees generally reported that penitentiary personnel treat them with respect and that they have not experienced any physical violence by them. This is corroborated by the CPT reports. A lesbian former detainee who was held in Thebes reported excellent relations with the personnel, who treated them as "*part of the same community*" and often looked the other way, allowing personal relationship to form, including cell transfers for couples. However, things are different for trans women (no data exist in relation to trans men), who have reported experiencing disrespectful treatment from penitentiary personnel, most commonly misgendering (using their official name and pronouns), as well as irony. During our research we have personally witnessed this attitude, with interviewed personnel referring to trans women detainees with the pronouns "it" or "he" and their legal surname – which, in Greek, is gendered.

"In the beginning [of my detention] I was approached by a detainee who was there a long time. He threw his closes at my feet. I asked him 'what are these' and he said 'you will do my laundry. ... I reported him to the prosecutor'"
— Interviewee

ACCESS TO JUSTICE

Legal framework

A number of different judicial and quasi-judicial bodies have competence to address complaints filed by prisoners. Complaints may be filed on grounds of individual as well as general detention conditions and for restrictions or violation of detainees' rights. In addition, appeal mechanisms are in place for detainees to contest unfavourable decisions, including those reached in the frame of disciplinary proceedings.

The key authorities with competence to receive complaints filed by detainees are as follows.

I. The Prison Council. The Prison Council is composed of the director of the facility, as its chairman, the most senior social worker and the most senior expert scientist (lawyer, psychologist, sociologist or teacher) working in the facility, as members. The council may call the supervising

⁸⁵ On the inhumane conditions in disciplinary cells see also the Greek NPMs annual report 2022-2023, p.(109, 113, 160)available here: <https://www.synigoros.gr/en/category/ekdoseis-ek8eseis/post/annual-special-report-2022-2023-or-national-preventive-mechanism-against-torture-and-ill-treatment>.



prosecutor as well as the concerned detainee to be present in its sessions. The chief warden may also be present without voting rights during both regular and ad hoc sessions of the Council, including, as reported by detainees, during complaint procedures.

The Prison council has competence over:

- i) Complaints against unlawful acts or orders in the first instance
- ii) Security measures taken in the context of disciplinary proceedings (handcuffing, solitary confinement and any other measures necessary to maintain or restore order in the penitentiary facility).

II. The supervising prosecutor. The supervising prosecutor acts as the “competent member of the judiciary” in all cases provided for in the Penitentiary Code and the Statute for the Operation of Penitentiary Facilities. In the context of their supervisory duties:

- i) they cooperate with the facility’s director and heads of units and make recommendations on matters relating to the serving of sentences
- ii) they (or their deputy) exercise adjudicating and disciplinary powers, in particular, as they relate to the upholding of all relevant laws and regulations in force – including on the individual detention conditions of the prisoners – and to the enforcement of security measures
- iii) they chair the Disciplinary Board, which is responsible for hearing disciplinary offences and for granting regular (not applicable for pre-trial detainees) and educational leaves of absence
- iv) they grant extraordinary leaves of absence for family, professional or other urgent and unforeseen needs
- v) they participate, upon invitation or on their own initiative, in the hearings of the Prison Council
- vi) they may appeal against the decisions of the Prison Council before the Court for the Execution of Sentences at their discretion
- vii) they order appropriate measures where a prisoner is not in a condition to consent or refuses to consent to a medical procedure deemed necessary for his health by their doctor
- viii) they may undertake any other action provided for in special regulations and monitor compliance therewith.

III. The Court for the Execution of Sentences. The Court for the Execution of Sentences is a special division of the three-member court of misdemeanours with local jurisdiction at the place of the execution of sentences in Athens, Thessaloniki, Piraeus, Patras, Larissa and Heraklion, or the plenary of the Court in other, smaller jurisdictions. It has power to lift – to the extent possible – any negative effects of the unlawful act for the prisoner. The Ministry of Citizen Protection (competent on prison matters) must ensure that the prison authorities comply with the Court’s decisions immediately.

The Court for the Execution of Sentences has competence over:



- i) Appeals against decisions of the Prison Council on complaints related to individual detention conditions
- ii) Complaints lodged by current or former detainees against general detention conditions and the order of all appropriate measures to ensure compliance with the relevant standards, as well as the award of monetary compensation
- iii) Appeals against disciplinary sanctions and decisions concerning the rejection of requests for leave.

The **Ombuds Office**, hosting the Greek National Preventive Mechanism, may interview detainees in the frame of their monitoring activities and include their testimonials in their reports on the detention conditions and the overall operation of the penitentiary facilities. However, the NPM does not have the competence to receive formal complaints nor do they undertake to forward the complaints they may be made privy to during their visits to the penitentiary facilities to other competent (judicial or otherwise) authorities.

A. Complaints against individual detention conditions

Detainees have the right to file complaints in cases of unlawful acts or orders against them, provided that no other remedy is available to them in accordance with the Penitentiary Code. The complaints are filed before the Prison Council by the prisoners themselves, in writing, and within a “reasonable time” from the time the act took place. Detainees may appeal before the Court for the Execution of Sentences fifteen (15) days from receiving notification of the decision rejecting their complaint or within one month from the time they filed their complaint, if the Prison Council did not issue a decision.

This mechanism does not provide for legal assistance for the prisoner during this procedure. This includes representation before the Council but may also concern the drafting of the complaint itself, if the detainee does not have a lawyer, for example if they lack the funds to afford one and they are not aware of their rights to legal aid or a legal aid lawyer has not yet been appointed to them. In these cases, they must draft and submit their complaint on their own, in writing, without any (formal) support from the prison authorities. Matters are worse in cases where prisoners lack the necessary education to write a complaint or in cases where they do not understand or are not able to write in the Greek language, as translation and interpretation services are usually unavailable and fellow inmates are enlisted to fill in this gap in the vast majority of cases. This issue is particularly acute in Greece, where approximately half of the prison population consistently comprises non-nationals.

In addition to the above procedure, detainees also have the right to report to the prosecutor assigned to supervise the penitentiary facility on any issue related to their detention conditions and the exercise of their rights, in accordance with Article 567 of the Code of Criminal Procedure (former Article 572). They may submit a request to this effect and meet with the prosecutor during their weekly visits.

B. Complaints against general detention conditions

In light of the multiple condemning decisions by the ECtHR and the mounting pressure by other Council of Europe, including the CPT and Committee of ministers, as well as from EU bodies to



introduce an effective remedy for detainees to be able to complain of general detention conditions, the Greek State amended the Penitentiary Code in 2022 and established in Article 6A an new complaint mechanism to this effect.

The new provision concerns detention conditions that violate Article 3 ECHR, i.e. that are inhuman or degrading or that amount to torture. If the complaint is successful, the Court may order all appropriate measures at its discretion to ensure compliance with the relevant living standards. These measures include changing the space where the detainee is held to an appropriate one within the same facility. If this is not feasible for any reason, including the internal structure of the facility or the fact that no such appropriate spaces are available, the detainee may be transferred to the prison hospital or another public hospital or to another detention facility, on priority. As already mentioned, in cases where this transfer is not feasible, LGBTIQ detainees often request to be placed in isolated wards or even in “disciplinary cells” (i.e., solitary confinement).

The Court may also award – in addition or instead of the above measures - monetary compensation for the moral damage suffered, at the amount of five (5) to thirty (30) euros per day of violation, depending on the gravity of the violation, as well as a beneficial calculation of the time of detention. Former detainees may also file complaints for reasons related to general detention conditions within four (4) months from the date of their release. The Court’s decision is not subject to an appeal and must be enforced immediately. The Greek Ombudsman, in its capacity as the NPM, is notified of all decisions related to the implementation of this remedy.

CSOs have expressed concerns that the provision was adopted to placate international concerns and would be difficult to implement in practice.⁸⁶ The first few years following the adoption of this measure unfortunately confirm these fears.⁸⁷ According to data provided by the Ombudsman during our research (November 2024), 226 complaints have been filed since the introduction of the remedy in 2022. Of those, the courts have assessed approximately half (115 decisions have been issued so far), showcasing severe delays with an obvious and immediate impact on the detainee concerned. Furthermore, of the 115 decisions issued, only 9 have been in favour of the detainee, ordering a mix of measures, including transfers to a different facility and monetary compensation. The rest of the complaints were rejected. This issue has been addressed several times by the higher courts, which have issued opinions aimed at sensitizing the judiciary to the need to properly implement the new remedy.

C. Appeals against decisions of the Central Committee of Transfers

A Central Committee for the transfer of prisoners operates within the Ministry for Citizen Protection, with competence to decide on all matters related to the transfer of prisoners, except those that concern the criminal investigation or the appearance of the detainee before a court or other public authority. The Committee examines requests for transfers both by prison authorities

⁸⁶ See <https://www.hlhr.gr/wp-content/uploads/2022/10/%CE%A3%CE%A7%CE%95%CE%94%CE%99%CE%9F-%CE%9D%CE%9F%CE%9C%CE%9F%CE%A5-%CE%A3%CE%A9%CE%A6%CE%A1%CE%9F%CE%9D%CE%99%CE%A3%CE%A4%CE%99%CE%9A%CE%9F%CE%A3-%CE%95%CE%BB%CE%95%CE%94%CE%91.pdf>.

⁸⁷ See also the Greek NPM’s relevant remarks on the implementation of Article 6A in [greece-criminal-detention-2024-country-study_en.pdf](#) (pp.64 -65). The Greek NPM notes, among other, that no appeals have been submitted for Korydallos II Prison and the Korydallos Psychiatric Hospital up until 15.04.2024.



and by the detainees themselves, including requests to transfer for personal reasons, which, as mentioned, may be particularly relevant for LGBTIQ detainees.

Application in practice

Access to a lawyer and effective legal representation within prisons has emerged as a key issue. The number of lawyers with adequate knowledge of prison issues is extremely small. Identifying lawyers who are knowledgeable on both prison issues and LGBTIQ rights is even more difficult. Things are harder when the detainee must rely on legal aid due to financial reasons. Although it is reported that accessing legal aid is not particularly complicated (a request must be filed with the prison social service, which is then forwarded to the appropriate Bar), chronic problems of the legal aid system, including the lack of specialization requirements and safeguards, as well as the lack of incentives for lawyers to participate in the scheme (limited funds, minimal remuneration with severe delays, etc.).

The above deficiencies are exacerbated by the fact that access to remedies and complaint mechanisms within prisons relies on the initiative of the detainee, who must be aware of their rights and formulate their complaint in writing without the assistance of a lawyer. This is particularly problematic for detainees that do not speak the language or have learning difficulties. In addition, confidentiality of hearings within the prison (e.g., before the supervising prosecutor) is not guaranteed, as prison personnel may also be present. The high number of foreign nationals in Greek prisons highlights a significant need for interpretation services—an issue that affects all incarcerated individuals, including those from the LGBTIQ+ community. Language barriers can severely limit prisoners' ability to communicate with staff, express their concerns, and understand their rights. During field research, two interviewees reported not speaking Greek at the time and experiencing difficulties in communicating with prison staff. One participant shared that she voiced her needs in English to a social worker, who then asked her a few questions and subsequently provided her with access to non-food items. She didn't receive any information on her rights.

The diversity of the prison population, combined with limited interpretation services, creates an environment where individuals are at heightened risk of not receiving the support they need. In many cases, prison staff rely on fellow inmates to act as informal interpreters—a practice that may compromise accuracy and confidentiality and potentially could enable exploitation and abusive relationships.

LIFE IN PRISON

LGBTIQ detainees can have a hard life in prison, depending on their individual circumstances. It is important to take account of their various intersecting identities and the diversity within the group itself. Those “passing” as cisgender and heterosexual are less likely to encounter overt discrimination within the prison environment. Conversely, those who are visibly gender non-conforming or openly express non-heteronormative identities often navigate a more precarious environment. While some forms of institutional protection exist, these are frequently conditional and tied to expectations that such individuals should not “provoke” or “display” their sexuality and it's in their hands to avoid conflict.



Participants in the field research were clear that coming out in prison comes with distinct risks, including harassment, violence, extortion, and intimidation. As a result, most avoid sharing their LGBTIQ identity. This is especially true for gay men, who prefer to identify as bisexual, if necessary. They are more likely to face mockery when their gender expression leans more feminine, as well as isolation and marginalization, including being placed in special wards to avoid the risk and /or danger. Things seem to be better in women's facilities. An interviewee identifying as lesbian described amore lax environment where, although LGBTIQ issues may not be discussed overtly, there is however a general tolerance when it comes to interpersonal relationships within the prison.

Treatment by correctional officers varies but there have been reports of mocking and harassment. Trans women are often the target of such harassment, being regularly misgendered and viewed as mentally ill.

Contact with the outside world is achieved through visitations, telephone/web calls and leaves of absence.

The framework for visitations in Greek prisons is generally strict and applies uniformly, regardless of a prisoner's gender identity or sexual orientation. In practice, visitation rights are typically granted only to first-degree relatives. Married and registered partners and the children of LGBTIQ detainees are permitted to visit under the same provisions as spouses and children of cis and hetero detainees. However, practical circumstances render this possibility more complicated, especially for fear of bullying, intimidation, or physical violence from other detainees. Hypothetically, a legally married individual can receive visits from their spouse, and according to our field research, we did not encounter any cases where someone was denied such visits due to their marital status. However, most of the interviewees were unmarried and, as a result, were unable to see their partners during visitations.

This raises important questions about the treatment of unmarried same-sex couples, particularly before the legal recognition of same-sex marriage in Greece. It is unclear whether non-married same-sex partners have been denied visitation rights solely due to their legal status and if individuals in same-sex relationships have chosen not to declare their partners as visitors out of fear of stigma or discrimination.

Conjugal visits are not regulated – and therefore not allowed in practice for either same- or different-sex couples. The previous government undertook a relevant initiative, whereby an appropriate space was created in the Grevena prison. However, this was never institutionalised, as the necessary Ministerial Decrees to launch it were never signed. Under the previous administration, there have been reports of prison staff “looking the other way” in some cases. An interesting case was shared during the field research, whereby a female detainee requested for her partner to be moved to the same cell as her, and their request was in fact granted.

Finally, it is important to note that in addition to the Korydallos trans unit, there are only two women's prison facilities in Greece—one for remanded prisoners in Korydallos and one in the town of Thebes. This limited geographical distribution means that not all prisoners have equal access to visitations, as their families may live far from these facilities and there is no option for



them to move closer. In such cases, distance creates a significant barrier, especially in the absence of provisions to facilitate or compensate for long-distance visits.

The field research confirmed that prisoners receiving visits from relatives living abroad are granted an additional hour of visitation time, in line with what the law provides. While this exception provides some relief, it underscores the lack of broader, systematic measures to ensure equitable access to family contact for all incarcerated individuals—particularly those placed far from their support networks.

Detainees may not carry cell phones. However, they have access to stationary phones operating through phone cards. The prison provides a stipend for calls (approximately 4 Euros/month), which is, however, a very small amount and does not suffice for appropriate communication, especially for detainees who need to call abroad. In addition, it is reported that long-time detainees may “hoard” phone time, not allowing others to use the phone during the allotted time.

Finally, prisoners are entitled to absence leaves, provided they fulfil certain conditions, including percentage of sentence served, good behaviour, etc. These include regular leaves, educational leaves and extraordinary leaves (for urgent personal matters such as hospitalization of a close relative, funerals, etc.).



RECOMMENDATIONS

Overall, the policy framework on LGBTIQ detainees is severely lacking. The key policy instrument in this area remains the National Strategy for the Equality of LGBTIQ+ persons, which does not contain any specific recommendations on actions concerning prisons.

The Guidelines on the treatment of LGBTIQ prisoners, implementing the National Strategy within the penitentiary system, are assessed as an ineffective tool that does not offer any real guidance to the penitentiary personnel. Their content is confined to the relevant legal provisions and policy framework, without any examples of their application in practice. The Guidelines are incomplete and inexhaustive, failing to mention important safeguards. Finally, they are of poor quality, containing glaring mistakes and omissions, and have not been updated with important developments. They fall short of international standards on LGBTIQ rights (e.g., they mention that the legal recognition of gender identity is conditional upon the person requesting it being unwed), as well as standards on the development of human resources in the public sector (see, e.g., European Network of Public Employment Services Practitioner Toolkit on Knowledge Management), and capacity building methodologies in general.

A structured training regime for penitentiary officers, other than on the job training, has only recently been established (the fourth class of trainees is currently receiving training), and remains to be appraised. Mandatory training modules on LGBTIQ detainees seem adequate in theory, but do not offer any practical guidance based on real life scenarios. The training methodologies used are antiquated and have been shown to be ineffective for adult learning. Good practices in adult/professional training (such as applying principles of aligned curricula, training models based experiential learning, etc.) are not applied.

Recommendations:

Improve Data Collection and Research

- Establish systematic, disaggregated data collection mechanisms focusing on the experiences and needs of LGBTIQ detainees, ensuring that all identities within this umbrella are adequately represented (not just trans women).
- Prioritise participatory research methodologies that involve LGBTIQ persons directly and in a safe manner. Uphold strict standards of confidentiality, privacy, and personal data protection, especially for prisoners, who face intersecting vulnerabilities and specific risks.
- Develop channels of communication and encourage data-driven legislation and policy making.
- Improve access to prisons for civil society for monitoring, reporting and advocacy purposes.

Develop Policies for LGBTIQ prisoners

- Develop targeted, knowledge-based policies on the rights and treatment of LGBTIQ prisoners that incorporates the 2017 Yogyakarta Principles plus 10, setting clear, time-bound objectives.
- Establish clear procedures and guidance for the placement and management of transgender detainees and include clear, detailed protocols on key operational areas,



including searches, use of force, staff assignments, access to healthcare (including hormone therapy and gender-affirming surgery), and the right to participate in activities and social interaction alongside cis prisoners.

- Research and pilot initiatives such as separate facilities or units for LGBTIQ detainees other than trans women.

Improve Detention Conditions and Enforce Legal Protections

- Undertake general measures to improve detention conditions and address systemic failures that impact on all detainees.
- Address concerns in relation to sanitation, available space and access to meaningful activities in the unit for trans women.
- Tackle isolation from the general prison population (either in the trans unit or in special wards/disciplinary cells) through supervised joint activities and awareness-raising/empathy-building programmes for the general prison population.
- Implement legislative provisions that remain unenforced, such as specifying special measures for the treatment of LGBTIQ detainees.

Dignity-affirming measures

- Ensure respectful placement and admission decisions that prioritize the safety and dignity of LGBTIQ detainees and encourage them to be forthcoming about their identities and specific needs. These may include appropriate facilities that ensure privacy, avoidance of invasive procedures (potentially through the use of technology – such as body scanners).
- Greek prison system should integrate a participatory approach to better understand how individuals define their own dignity and what forms of support are meaningful to them. This involves directly engaging with LGBTIQ prisoners and their communities to shape policies that reflect their lived experiences and needs. For example, trans women interviewed during the research emphasized that access to personal care items—such as conditioner, body lotion, and makeup products—significantly contributes to their sense of dignity, self-worth, and overall wellbeing.
- Raise awareness, inform and sensitise both staff and detainees on using respectful language and avoiding misgendering and deadnaming.

Guarantee Inclusive, People-centred Healthcare Services

- Ensure that all LGBTIQ detainees have access to comprehensive, non-discriminatory, and inclusive healthcare services.
- Provide uninterrupted access to critical medications, particularly for individuals living with HIV or with other chronic conditions; reconsider the dispersion of HIV+ detainees to multiple facilities as unrealistic within the current system in Greece.
- Ensure that legal provisions related to healthcare are properly applied: this includes the exceptional resort to external medical personnel, which has now become the norm at least for doctors and specialists, the establishment of a mental health ward for women, etc.
- Address the understaffing of prison healthcare and emphasise adequate in-house care, including by specialists; minimize reliance on external healthcare providers, especially when this leads to delays in access or confidentiality risks for LGBTIQ detainees.



- Combat the pathologisation of trans detainees through appropriate training and awareness-raising, as well as treatment protocols.
- Prioritise mental health support services over exclusive reliance on pharmacotherapy.
- Ensure that trans detainees held in the special unit of Korydallos have access to mental healthcare and support, as well as rehabilitation services.
- Reinststate the free and confidential distribution of condoms and other safer sex supplies within all detention facilities.
- Provide regular, confidential testing and counselling services for **sexually transmitted infections (STIs)**, including HIV.
- Incorporate sexual health education and harm reduction strategies into detainee health services.

Provide Mandatory, Specialized Training

- Develop and implement **compulsory, ongoing training** for all penitentiary staff, including correctional officers, healthcare providers, and psychologists, with a specific focus on:
 - Human rights and anti-discrimination law
 - Gender diversity and LGBTIQ rights
 - De-escalation and trauma-informed practices
- Ensure that training emphasises practical scenarios and incorporates the perspectives of LGBTIQ detainees.
- Ensure that training materials and guidelines are accurate, comprehensive, and up-to-date.

Address Self-Harm Without Isolation

- Develop and implement a non-punitive protocol for identifying and responding to self-harm risks, tailored to the specific vulnerabilities of LGBTIQ individuals.
- Refrain from using solitary confinement as a protective measure or disciplinary response for individuals at risk of self-harm.
- Provide mental health support and peer-led support mechanisms as alternatives to isolation.

Access to Justice

- Ensure LGBTIQ detainees are provided with clear information on their rights while in detention, including in written form, and that they are allowed to keep with them any letters of rights they are provided with.
- Ensure that information about rights is accessible to detainees that do not speak Greek, as well as detainees with disabilities; ensure the availability and high quality of translation and interpretation services in detention, including in sign language.
- Ensure that detainees have access to resources that will allow them to better understand their rights (such as relevant books, online resources, material produced by CSOs, etc.)
- Address chronic deficiencies in the legal aid system, including specialisation of lawyers on prison issues and procedures, scope of legal aid and speedy remuneration of lawyers.



- Consider the establishment of the “prison lawyer”, serving as a focal point to inform detainees of their legal rights and ensure access to legal aid, helping bridge the gap between them and legal support services.

Cross-sectoral Cooperation and Awareness-raising

- Promote collaboration among state authorities, local governments, and civil society organisations to develop and deliver educational programs and meaningful activities inside prisons.
- Raise awareness on (LGBTIQ) detainees’ rights among the general public.
- Empower LGBTIQ detainees through access to peer networks, support groups, and legal rights education.



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ANNEX: QUOTES FROM INTERVIEWS

“They put me in solitary confinement ‘for my protection,’ but no one ever asked me what I needed or wanted. I felt like I was being punished for who I am.” — Transgender detainee, [Country]

“The guards mocked me when I asked for hormone treatment. One of them even said, ‘This isn’t a beauty clinic.’ I haven’t received my medication in months.” — Trans woman, detained in a male facility

“I’m afraid to report the abuse because I don’t trust anyone inside. The last time I spoke up, I was threatened by other inmates.”

— Gay male detainee, [Country]

“When my partner tried to visit me, the staff refused, saying we weren’t a ‘real couple.’ They don’t recognize same-sex relationships.”

— Lesbian detainee, [Country]

“An NGO helped me understand my rights and connected me to a lawyer. Without them, I would have never made it through the process.”

— LGBTIQ detainee supported by civil society





LGBTIQ Detainees 'Strengthening the rights of LGBTIQ detainees in the EU'



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