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2nd BIENNIAL PROGRESS REPORT ON THE IMPLEMENTATION OF THE EUROPEAN CHILD GUARANTEE



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FOREWORD

The Council Recommendation establishing the European Child Guarantee (ECG) was adopted in 2021 within the framework of the Action Plan of the European Pillar of Social Rights¹. Subsequently, in September 2022, Greece's National Action Plan (NAP) for the European Child Guarantee was prepared and submitted to the European Commission with the objective of ensuring access to essential services for children at risk of poverty or social exclusion. In accordance with the Recommendation, §11 "Governance and Reporting", point (f), Member States are required to submit a report to the Commission, every two years, on the progress in implementing the Recommendation, in line with their National Action Plans. Accordingly, in September 2024, the 1st Biennial Progress Report on the implementation of the ECG was prepared and submitted to the European Commission.

The preparation of the present Progress Report was based on the European Commission document entitled "2026 Biennial Progress Reports on Implementation of the ECG – Annotated Outline ».

With regard to the methodology followed for the preparation of the Report, the following stages were implemented:

1st stage: Dissemination of a standardised questionnaire to the liaison officers of the competent Ministries for completion. Specifically, a questionnaire template was circulated requesting responses to open-ended questions regarding:

- (a) the main reforms implemented during the reference period in the areas of early childhood education and care, primary and secondary education, healthcare, nutrition and housing, which are linked to the ECG,
- b) the relevance of these reforms to the respective Recommendation on the ECG and
- c) funding data relating to the implementation of the measures included in the NAP.

2nd stage: Transmission of the European Commission's draft assessment to the representatives of the competent Ministries for the submission of comments and corrections.

3rd stage: Organisation of a meeting (11/02/2026) between the National Coordinator and the representatives of all competent Ministries, with the aim of coordinating and timely collecting the required data for the preparation of this Report.

4th stage: Continuation of the systematic recording and monitoring process of policy measures within the Information System (IS) by the representatives of the Ministries.

In accordance with the proposed thematic sections of the European Commission document, the 2nd Biennial Progress Report is structured into nine (9) Sections:

Section 1: Presents the main economic and social trends from 2021 onwards, as well as the main reforms related to the Child Guarantee.

Section 2: Outlines the current state of the supporting policy framework and the territorial dimension of social exclusion.

Section 3: Presents the progress in the implementation of policy measures by service sector.

¹ <https://op.europa.eu/webpub/empl/european-pillar-of-social-rights/en/>

Section 4: Describes the sources of funding and the amounts allocated for the implementation of the measures of the NAP, as well as the impact and effectiveness of expenditure and additional resources in achieving the objectives of the ECG.

Section 5: Analyses progress and interprets changes in the indicators of the national and European monitoring framework.

Section 6: Describes the participation of network members in the governance of the ECG.

Section 7: Formulates proposals to address potential gaps in the identification of children in need and their access to essential services.

Section 8: Presents the Information System for the ECG, developed by the National Coordinator, as a good practice.

Section 9: Sets out the main conclusions of the Report.

1. INTRODUCTION, CONTEXT AND MAIN REFORMS

1.1. Introduction

The European Recommendation on the Child Guarantee, as already highlighted in the 1st biennial progress report, served as the starting point for establishing continuous and systematic cooperation among central government bodies and, in particular, those at regional and local level. This cooperation constitutes a key precondition for the coherent implementation of the Child Guarantee and for effectively addressing the challenges of child poverty and social exclusion.

The National Centre for Social Solidarity (EKKA), as the National Coordinator of the ECG, continues to serve as the central coordinating body for the action of all competent authorities, services and bodies at national, regional and local level. Its scope of competence includes the coordination of actions, policies and services related to the Recommendation, as well as the collection and processing of the necessary information and data for monitoring and evaluating its implementation progress. This role becomes particularly crucial, as also pointed out in the NAP, given, on the one hand, the limited interconnection of existing policies and services and, on the other hand, the absence of a single and systematic data collection mechanism covering all categories of children in need.

Within this context, during the current reference period (October 2024 – February 2026), the systematic cooperation with the competent Ministries, the Regions and the Regional Health Authorities was strengthened and utilised to the fullest extent possible through the use of the Information System developed and put into operation by the National Coordinator. The IS supports the recording and monitoring of the implementation of policy measures, as well as of the structures and services aimed at addressing poverty and social exclusion of children at central and regional level. At the same time, it contributes to the establishment of uniform and standardised procedures for recording, monitoring and administrative coordination, thereby strengthening the coherence of the implementation of the ECG at all levels of the administrative structure.

An initial overall assessment framework for children's quality of life in the country is presented below,

capturing the main economic and social trends, as well as the main reforms aimed at improving it.

1.2. Context

The overall national progress framework for the period October 2024 – February 2026, regarding the implementation of the ECG, may be reflected through the evolution of the at-risk-of-poverty or social exclusion rate (AROPE) for people under 18 years of age. This depiction is reported over time (since 2021, the year of the establishment of the ECG) both at national level and in comparison with the corresponding European Union (EU) average, in order to assess the country's relative position and progress. At the same time, the use of microdata at regional level provides a clearer picture of the territorial dimension of poverty and social exclusion in the country.

The AROPE indicator (At risk of poverty or social exclusion) consists of three components: (a) At-risk-of-poverty (At Risk of Poverty (AROP)), (b) Severe material and social deprivation, and (c) Very low household work intensity. The at-risk of poverty component (AROP) is based on equivalised disposable income and reflects the relative income deprivation of individuals whose income falls below 60% of the national median income. More specifically, it shows how many people are at risk of poverty, based on their relative income position in society. Severe material and social deprivation reflects limitations in living conditions, recording the inability to meet basic material and social needs, regardless of income level. Finally, very low household work intensity refers to households in which working-age members show limited participation in employment during the year, highlighting detachment from the labor market as a critical dimension of social exclusion. More specifically, it is measured as the ratio of the hours actually worked to the total possible working hours of working-age household members.

In the second component of the AROPE indicator, namely severe material and social deprivation, the actual ability of households to meet basic needs and participate in social life is examined. Specifically, it is assessed whether the household is able to pay rent/loan and utility bills (electricity, water, heating), maintain adequate nutrition (e.g. meat or protein at least twice a week), keep the home adequately warm in winter, cope with unexpected expenses (e.g. minor repairs, purchase of basic necessities), possess appropriate clothing and footwear, participate in social activities (e.g. dinner, social gathering, leisure), go on vacation or an excursion, as well as have access to telephone communication and media (e.g. television or internet). Households unable to meet three or more of these needs are considered to experience severe material and social deprivation.

According to the EU-SILC survey and the AROPE indicator², in 2024, the risk of poverty or social exclusion in the general population in Greece amounted to 26.9%, compared to 26.1% in 2023, ranking the country 3rd among the 27 Member States of the EU, after Bulgaria (30.3%) and Romania (27.9%). The corresponding European average (EU-27) stood at 21.0% (ANNEX I, Figure 1). As regards the child population (ANNEX I, Figure 2) and, specifically persons under 18 years of age, the same indicator³ shows that in 2024 the risk of poverty or social exclusion in Greece stood at 27.9%, (compared to 28.1% in 2023) (ANNEX I, Figure 3). Despite this change, Greece continues to rank among the countries with the highest rates in the European Union (EU-27), holding 4th place after Bulgaria (35.1%), Spain (34.6%) and Romania (33.8%), while the corresponding European average (EU-27) stands at 24.2% (ANNEX I, Figure 2).

Regarding the components of AROPE, the AROP indicator for persons under 18 years of age shows that in 2024 the risk of poverty in Greece increased compared to 2023, as the percentage stood at 22.4%, (compared to 21.8% in 2023) (ANNEX I, Figure 4). Severe material and social deprivation among persons under 18 years of age in Greece showed a slight decrease in 2024, reaching 13.9%, (compared to 15.6% in 2023) (ANNEX I,

²At risk of poverty or social exclusion, total population (https://ec.europa.eu/eurostat/databrowser/view/ilc_peps01n/default/table?lang=en)

³At risk of poverty or social exclusion, population aged under 18

(https://ec.europa.eu/eurostat/statistics-explained/index.php?title=Children_at_risk_of_poverty_or_social_exclusion#Source_data_for_tables_and_graphs).

Figure 5). Similarly, very low household work intensity among the population under 18 years of age in Greece showed a slight decrease in 2024, standing at 3.7%, (compared to 4.2% in 2023) ([ANNEX I](#), Figure 6).

In Attica, the Aegean Islands and Crete, a lower rate of risk of poverty or social exclusion is recorded (22.7% & 22.9%, respectively) than that of the country as a whole (26.9%), whereas in Northern and Central Greece the corresponding rate ⁴is higher (30.8%) ⁵.

1.3. Main Reforms

During the reference period, Greece proceeded with a series of institutional, administrative and digital reforms in the fields of early childhood education and care, primary and secondary education, healthcare, nutrition and housing, with the aim of ensuring equal access for all children to basic and quality services. These interventions form part of a holistic approach to preventing and addressing social exclusion, combining regulatory changes, infrastructure strengthening, digital transformation and leveraging national and European resources (Recovery and Resilience Fund, NSRF 2021–2027). The main reforms by policy area are presented below.

Early Childhood Education and Care

The Public Employment Service (DYPA) has proceeded with the operation of three (3) nurseries in the Region of Attica, strengthening the availability of childcare places for infants and toddlers. At the same time, a proposal has been submitted within the framework of the NSRF for the establishment of three (3) additional nurseries in regional areas of the country. This expansion contributes to increasing the geographical coverage of early childhood care services and to facilitating families' access to quality early education and care structures.

The “**Neighbourhood Nannies**” program covers the care of infants and toddlers aged 2 months to 2.5 years, providing financial support to working parents, single parents and foster parents for the use of certified childcare services. The pilot implementation of the program was carried out in sixty-two (62) Municipalities across the country during the period March 2022 to July 2025, with a total number of nine hundred and twenty-five (925) agreements between parents and caregivers. The budget of the co-financed pilot phase amounted to 5,569,745.07 euros. From 2026, the nationwide implementation of the program is foreseen, with a total budget of approximately €57,000,000, financed by the NSRF 2021–2027. Carergivers may provide services either at their own residence or at the family’s residence.

Within the framework of strengthening the quality of Early Childhood Education, extended/independent literary work was incorporated into the curriculum, with the aim of fostering reading culture and contributing to the intellectual and emotional development of toddlers.

Furthermore, the Ministry of Social Cohesion and Family Affairs (MinSCFA) is implementing a Program aimed at ensuring access for preschool age children, infants and toddlers, to early childhood education and care services, as well as access for children, adolescents and persons with disabilities to creative activity services. The action aims to ensure equal and non-discriminatory access of infants, toddlers and children - and in particular infants, toddlers and children in need - to quality education and care services in preschool and school age in accordance with the more specific provisions of the EU Recommendation 2021/1004 on the establishment of a European Child Guarantee (OJ L223/14/22.06.2021). In addition, the action aims to ensure access of children and persons with disabilities to extracurricular activity services. The action also aims at

⁴ Hellenic Statistical Authority (ELSTAT) - Household Income and Living Conditions Survey (SILC), year 2024, (with income reference period in year 2023). <https://www.statistics.gr/documents/20181/3d7d2251-2302-9023-5280-a1d962c3a7a5>

⁵ However, according to the Multidimensional Child Poverty Index, which is based on an analysis of primary microdata at local level, the rate of multidimensional child poverty for the period 2024–2025 in Greece is only 5.5%. The Region of Central Greece records the highest rate of multidimensional child poverty (8.6%), followed by the regions of Attica (6.7%), Thessaly (6.3%) and the Ionian Islands (6.3%). See. [KEPE's Index of General Child Wellbeing and Multidimensional Child Poverty](#)

ensuring access to the above services for beneficiary infants, toddlers and children and persons with disabilities, who, due to income and/or other criteria, fall outside the scope of the ECG policy.

Scope of the action

- Provision of care places for children of infant and preschool age up to their enrollment in compulsory education, in nurseries, infant and childcare centres and kindergartens.
- Provision of care places in Creative Activity Centres for Children and Persons with Disabilities (KDAP for Persons with Disabilities-KDAPameA) for children, adolescents and persons with physical, mental, developmental or sensory disabilities.
- Persons with disabilities over 22 years of age receive a voucher through the Regular Budget of the MinSCFA. (see [ANNEX I.3](#)).

Early intervention program for 2500 children aged 0-6 years with disabilities or developmental difficulties or at risk of developing them.

The program concerns 2,500 children aged 0-6 with disabilities or developmental difficulties or at risk of developing them. The total budget amounts to €15,079,631.83, and vouchers are granted as follows:

- €400 for 10 sessions,
- €600 for 15 sessions,
- €800 for 20 sessions.

By 17.03.2026, 1,287 vouchers have been granted out of 2,500 beneficiaries, while the selection of children, the training of interdisciplinary teams and the completion of the registry of 88 providers have been completed.

Professional Foster Care Program

The MinSCFA is implementing a professional foster care program for 50 persons with a disability rate of over 67% for physical disability and over 50% for mental disability. The budget of the program amounts to €5,303,788.42.

To date:

- Three (3) pilot training workshops for prospective Professional Foster Parents have been implemented (PFPs), training 11 persons.
- In 2025, fourteen (14) training programs were held for 205 social service employees of the Regions and the Region Social Welfare Centres (KKPP), specialising in Social Work and Psychology.
- Eight (8) professional foster carers have been registered in the relevant Special Registry and, since May 2025, have been receiving a monthly allowance of €1,850. Eleven (11) additional applications have been submitted.
- The educational material for the initial training has been delivered, while its distribution and the continuous training component are still pending.

Primary, Secondary and Post-Secondary Education

Within the framework of the competence for the transportation of students in primary and secondary education, the regulatory framework was amended with the aim of ensuring the timely and effective organisation of the procedures. Key changes include the obligation to launch student transport tenders by 31 January each year, the strict adherence to specific deadlines, the obligation of school unit directors to update

the “myschool” information system and to submit, by 15 December, a list of estimated transport beneficiaries for the following school year, as well as the provision of alternative solutions in the event of an unsuccessful tendering process. The reform ensures the timely, uninterrupted and equal access of students to school education.

The design, development and operation of school unit websites at all levels of education were regulated. The provisions apply mandatorily to all websites, both new and existing, irrespective of device or assistive technology, with the aim of ensuring equal access to information for all, including persons with disabilities.

DYPA operates fifty (50) Apprenticeship Vocational Schools (EPAS) at a national level, which are attended by young people aged 15–29, who have completed at least lower secondary education. During the reference period, new specialisations were introduced on the basis of labour market needs and DYPA’s strategic partnerships, while the remuneration of apprentices was increased in line with the annual increase in the statutory minimum daily wage.

From school year 2024–2025 onwards, the mandatory provision of synchronous distance education is foreseen in cases of emergency or unforeseeable events that render the conduct of in-person teaching impossible or particularly difficult at class or school unit level. Participation is mandatory for both teachers and students.

The main digital platform of the Ministry of Education, Religious Affairs and Sports (MoERAS) for combating school violence and bullying is stop-bullying.gov.gr. This platform allows incidents of school violence and bullying to be reported and provides information and resources for addressing them. Reports may be submitted either by name or anonymously by students, while parents and guardians submit named reports. Following the submission of a report, the four-member Action Team of the competent Directorate of Education is activated in order to investigate the incident and take appropriate measures.

From school year 2024–2025 onwards, the “Active Citizen Actions” Curriculum has been implemented across all grades of primary and secondary education. The program aims to develop knowledge, values and skills enabling students to understand the complexity of contemporary social and environmental issues and to actively participate in public life. It constitutes an interdisciplinary and cross-thematic approach, oriented towards the 17 Sustainable Development Goals. Within the same framework, local History and local Geography actions are implemented, as well as awareness-raising initiatives regarding the institution of Justice and the principle of the Rule of Law, in collaboration with institutional bodies.

New Curricula for the subject of Ethics have been introduced in lower and upper secondary education, addressed to students exempted from Religious Education. The subject is structured in accordance with contemporary social and scientific data and extends to broader social and existential considerations, irrespective of religion or ideology.

The “multiple textbook” is being introduced, providing teachers with the possibility to select among approved textbooks, while all approved teaching books are also made available in a digital library. This approach strengthens students’ critical thinking and their combined use of sources. At the same time, extended/independent literary work is also incorporated in primary education, systematically fostering reading culture and the holistic development of students.

[Inclusive Education and Advocacy for the Rights of Students with Disabilities and/or Special Educational Needs](#)

Two advisory-consultative committees were established to monitor the physical accessibility of educational and administrative structures and the digital accessibility of educational materials and websites. The committees recommend accessibility plans, map existing conditions, formulate improvement proposals and submit relevant reports. At the same time, the establishment of a Working Group has been promoted for the

preparation of an Action Plan concerning the provision of integrated assessment services and supportive interventions for students with disabilities who are at risk of multiple discrimination.

Regarding the staffing of inclusive education structures: a total of 3,448 Inclusion Classes were established, of which 1,842 in kindergartens, 714 in primary schools, 480 in lower secondary schools, 231 in general upper secondary schools and 181 in vocational high schools. A total of 700 permanent teaching positions with specialisation in special education and specialised educational staff positions were established for the Centres for Interdisciplinary Assessment and Counseling Support. In addition, 1,200 posts of special educational staff (600 psychologists and 600 social workers) were established for staffing the Interdisciplinary Support Committees of school units. These interventions strengthen inclusive education and ensure equal learning opportunities.

[Digital Inclusion and Digital Citizenship](#)

The Kids Wallet application, available on Android and iOS mobile devices, operates as a parental control and digital identification tool for minors. The Kids Wallet digital document is fully equivalent to the paper document for any legal use within the territory of Greece.

Within the framework of the National Academy of Digital Skills, the program “Digital Citizenship for Children” was developed, in collaboration with the Department of Primary Education of the University of Crete, addressing children aged 5–9. The term “Digital Citizenship” refers to the ability to use technology and digital media in a safe, effective and responsible manner. It is a horizontal competence that encompasses the knowledge, skills and behaviours that strengthen active participation in the digital world.

The Register of Beneficiaries of Fee Exemptions for Mobile Telephony Subscribers and Prepaid Telephony (MiDATE) constitutes a specialised digital application for managing the central database of beneficiaries exempt from mobile telephony charges, addressed to young people aged 15–29. The exemption applies to all mobile and prepaid telephony fees.

[Pilot Program for Semi-Autonomous Living in Apartments](#)

The MinSCFA is implementing a pilot semi-autonomous living program for 200 persons aged 15-26, residing in Child Protection Units. The program budget amounts to € 11,002,054.

Within the framework of the program:

- 31 funding applications were submitted through the corresponding Information System, by 17 bodies (9 private legal entities and 8 Social Welfare Centres of the Regions).
- The applications include 2 partnerships between Social Welfare Centres of the Regions and private legal entities and 1 partnership between private legal entities.
- The applications concern the creation of 82 apartments, which can accommodate up to 296 persons.
- The applying entities include both public and private bodies (see [ANNEX I.3](#)).

The revised National Energy and Climate Plan (NECP) was ratified by the Government Gazette 6983/19.12.2024. In the housing sector, the main objective is to save energy and combat energy poverty. In this context, a significant proportion of Recovery and Resilience Fund resources, in combination with the NSRF and other European funds, is directed to programs such as: " Exoikonomo ", "Recycle an Appliance", "Electra" for public buildings, the solar water heater program and " Photovoltaics on the Roof" with batteries. These interventions contribute to improving the quality of life for families with children and to protecting vulnerable social groups from high energy costs. For a detailed presentation of the reforms by the Ministries, (see [ANNEX I.3](#)).

2. ENABLING POLICY FRAMEWORK

According to Council Recommendation (EU) 2021/1004 of 14 June 2021, Member States are invited, inter alia, to develop a comprehensive supporting policy framework (§6), through the implementation of coherent social, educational, health, nutrition and housing policies, with a view to reducing child poverty. This framework must take into account both regional disparities in child poverty and the specificities of rural, mountainous, island and urban areas.

As stated in Section 9 of the NAP, the enabling policy framework in Greece includes:

- a) measures to strengthen parents/guardians' access to adequate resources,
- b) measures to provide quality services for children, including the development of infrastructure and specialised human resources,
- c) measures to address poverty and social exclusion stemming from geographical barriers,
- d) measures to ensure equal and non-discriminatory development and delivery of services.

In addition, subsection 3.7 of the 1st Biennial Progress Report includes:

- a) work-life balance measures,
- b) policies for the provision of quality services to children,
- c) interventions for the modernisation of social protection systems,
- d) investments in building infrastructure,
- e) staff training actions,
- f) measures to address energy poverty.

Therefore, the enabling policy framework for addressing child poverty and social exclusion in Greece constitutes a broad and constantly evolving set of institutional interventions, funded by national and European resources and aimed at the overall support of families with children and the provision of quality services. The systematic and reliable monitoring and evaluation of the implementation of these measures continues to be a critical priority for the National Coordinator, in order to ensure substantive, equal and non-discriminatory access for all children to early childhood education, education, health, nutrition and housing services.

Placing the best interests of the child at the centre, §6 of the Recommendation encourages Member States to develop a coherent and unified supporting policy framework, aimed at addressing children's social exclusion and breaking the intergenerational cycle of poverty and disadvantage. The progress of the supporting policy framework in Greece, with regard to points (a)–(h), is reflected:

- a) on the basis of the updated monitoring framework for the ECG ⁶. Therefore, Table 1 ([ANNEX II](#)) is based on the full set of indicators and figures of the above monitoring framework without selective inclusion or exclusion of data.
- b) on the basis of the Observatory of Child Wellbeing and Child Poverty and the Index of General Child Wellbeing and Multidimensional Child Poverty, which is based on the analysis of primary microdata at local level ⁷, strengthening the capacity for targeted monitoring and evidence-based interventions.

Below is presented: a) the longitudinal trend of child poverty and its components, according to the indicators of the ECG monitoring framework ([ANNEX II](#), Table 1) and b) the trend of child poverty and its components at local level, according to the Multidimensional Child Poverty Index ([ANNEX II](#), Table 2).

⁶ [Monitoring and benchmarking frameworks - Employment, Social Affairs and Inclusion](#) Now available online, on the website of the Indicators' Subgroup of the Social Protection Committee.

⁷ See <https://www.kepe.gr/en/research/recent-publications-kepe/kepe-indices/kepes-index-of-multidimensional-child-poverty>

2.1. Progress in child poverty, early childhood education and care, education and health

The country incorporates into the enabling policy framework the maintenance and strengthening of investments in education, health and social protection systems with particular emphasis on vulnerable groups.

Particular importance is attached to expanding access to early childhood education and care, through financial support and increasing the availability of places for infants and toddlers. At the same time, inclusive education is promoted through the use of digital tools, the support of student transport and the prevention of early school leaving.

In the health sector, universal access to basic services, is strengthened, as well as medical and psychosocial care (including mobile units), and prevention through health promotion programs. In addition, the strengthening of the Minimum Guaranteed Income Scheme and complementary benefits for families with children contribute to increasing family income and reducing inequalities.

The supporting policy framework of the Child Guarantee in Greece takes into account, to a significant extent, the policies of the Recommendation that directly or indirectly affect children's well-being. The NAP recognises the multidimensional nature of child poverty and promotes a comprehensive approach, combining interventions in the fields of social protection, education, health, nutrition and housing.

The strengthening of coherence among policies is achieved through institutional coordination mechanisms, such as the central role of the National Coordinator, the intersectoral cooperation of the competent Ministries, multilevel governance with the participation of Regions and Municipalities and the development of an integrated Information System for recording and monitoring. In this way, the aim is to avoid overlaps, improve targeting and enhance the effectiveness of interventions.

With regard to social, educational and health policies (points a and b, §6 of the Recommendation), as well as the unemployment of parents/guardians (point c, §6 of the Recommendation), the corresponding eight indicators out of sixteen in total, show a downward trend over time ([ANNEX II](#), Table 1, and [ANNEX II.A](#)), indicating an improvement in the existing situation. In five of these eight indicators, the average value for the year 2024 is lower than the corresponding European average. In particular, a downward trend is observed in the risk of poverty or social exclusion, in severe material and social deprivation, as well as in the relevant child poverty gap. In addition, very low household work intensity, children at risk of poverty and social exclusion (ARPE) with unmet needs for medical examinations or treatments, ARPE children (aged 3 years up to lower age of compulsory education) with zero hours in Early Childhood Education, ARPE children (<3) with zero hours in Early Childhood Education, as well as early leaving from education and training, all show a downward trend over time, while the average value is lower than the corresponding European average. In fact, in five of these eight indicators, children in the country benefit more than children in other EU Member States. The above data indicate an improvement in indicators related to child poverty, material and social deprivation, household work intensity and access to early childhood education, education and health, as well as a favourable position of the country in these areas, compared to the EU average. The data demonstrate some progress, which requires continuation and consolidation through the systematic monitoring and evaluation of the policies implemented.

2.2. Progress in income and housing

Regarding income and housing policies, the corresponding four indicators out of sixteen in total, show a marginal trend over time ([ANNEX II](#), Table 1, and [ANNEX II.A](#)). In particular, a marginal trend is observed in the risk of poverty, in children in poverty or social exclusion living in households with an excessive housing cost burden, in children in poverty or social exclusion living in overcrowded households, as well as in children in poverty or social exclusion living in households unable to keep their home adequately warm.

The above data indicate that policies related to disposable income and housing conditions of households have not produced a corresponding substantial impact. The marginal trend overtime in the risk of poverty, as

well as in the indicators relating to the excessive housing costs burden, overcrowding and the inability to adequately heat the dwelling, demonstrates that housing and income pressures continue to affect a significant proportion of children at risk of poverty or social exclusion.

2.3. Progress in leisure and nutrition

With regard to extracurricular/leisure and nutritional policies, the corresponding four indicators out of sixteen in total ([ANNEX II](#), Table 1, and [ANNEX II.A](#)) record an upward trend over time, indicating a deterioration of the existing situation. In two of these four indicators, the values for 2024 are the highest among all Member States. In particular, an upward trend is observed in the indicators concerning children at risk of poverty or social exclusion, who are unable, for financial reasons, to participate in school trips and activities, as well as children in poverty or social exclusion who are unable, for financial reasons, to consume fresh fruit and vegetables daily. Additionally, an increasing trend is recorded in the indicators concerning children at risk of poverty or social exclusion, who are unable, for financial reasons, to participate in leisure activities and/or consume meat, fish or chicken on a daily basis, while the country records the highest rates compared to other Member States.

The above data indicate a deterioration in indicators related to the ability of children at risk of poverty or social exclusion to access leisure activities and healthy nutrition. It appears that financial barriers adversely affect children's participation in educational and leisure activities, as well as their access to healthy nutrition. In some of these indicators, children in the country benefit less than children in other EU Member States.

Based on the above findings, progress is observed in certain enabling policies, negative developments in others, as well as stagnation. In particular, the current situation reflects improvement in education and health indicators, including measures for the integration of parents/guardians into the labour market, and investments in early childhood education (such as increasing children's participation in early childhood care structures), as well as in the provision of adequate healthcare (in terms of the need for medical examinations and treatments). Substantial challenges remain in the field of housing, particularly with regard to ensuring decent and appropriate living conditions (such as adequate heating and avoidance of overcrowding), as well as, to an even greater extent, in the fields of inability to participate in educational activities due to financial difficulties and in the intake of nutritious food ⁸.

2.4. Territorial dimension of poverty and social exclusion

The NAP recognises geographical inequalities and prioritises children living in urban, rural, remote, island and disadvantaged areas. The territorial dimension is integrated into policy design through local action plans, specific allowances and the active participation of Regions and Municipalities.

The utilisation of geographically differentiated data through the Child Guarantee Information System enhances the capacity of targeted allocation of resources, prevention and early intervention, as well as the assessment of the effectiveness of actions at local level.

In [ANNEX II.1](#), preliminary statistical findings for 2025 are presented, based on data analysis through the Child Guarantee Information System. The data concern extracurricular activities, the transport of students to and from school, the staffing of services, the ratio of health professionals to children, as well as the participation of Roma children in education. They aim at the evidence-based mapping of inequalities that affect equal access of children, especially the most vulnerable, within the framework of the implementation of the Child Guarantee.

⁸See also KEPE in its recent Report on the Greek Economy (Section 12): <https://www.kepe.gr/prosfates-dimosieyseis/eidikes-ekdoseis/katastasi-ellinikis-oikonomias-sto-telos-tou-2025/>

In 2024, according to the AROPE indicator, for the total population, the regions⁹ with the highest rates of poverty or social exclusion in Greece are, in order, the following: Ionian Islands, Western Macedonia, Western Greece, Eastern Macedonia and Thrace, North Aegean and Peloponnese. According to [ELSTAT](#) as previously mentioned in Section 1, the first two major geographical areas in Greece, at risk of poverty or social exclusion, are Central and Northern Greece.

It is noted that there are no specialised data referring to child poverty and, at present, the data entry into the Child Guarantee Information System, from which relevant statistical data could be drawn, has not yet been completed.

Therefore, the only available data recorded in this report are those of the Research Institute "Centre for Planning and Economic Research (KEPE)"¹⁰ for the period 2024–2025, according to the Multidimensional Child Poverty Index ([ANNEX I](#), Map 1, and [ANNEX II.A](#)), which refers exclusively to the child population and takes into account the different nature of child poverty compared to adult poverty. The regions with the highest levels ($\chi^2[12, N=3,046] = 19.769, p=0.072$) of multidimensional child poverty in Greece are, in order: Central Greece in first place, Attica in second place, Ionian Islands jointly with Thessaly in third place, Epirus in fourth place, Crete in fifth place and Peloponnese in sixth place.

Taking into account the "Economic Child Poverty" component of the Multidimensional Child Poverty Index, for the period 2024–2025, exclusively for the child population, the regions with the highest poverty levels ($\chi^2[12, N=3,046] = 29.608, p = 0.003$) are, in order, the following: Crete, Western Greece, South Aegean, Ionian Islands, Thessaly, Epirus and Eastern Macedonia and Thrace.

Examining, in particular, the component "Living Conditions at Home (D.1)" of Economic Child Poverty, for the period 2024–2025, exclusively for the child population, the regions with the highest poverty levels ($\chi^2[12, N=3,046] = 21.653, p = 0.035$) are, in order, the following: Eastern Macedonia and Thrace, South Aegean, Central Macedonia, Ionian Islands, Crete, while Western Greece and Thessaly jointly share sixth place.

As regards the "Nutrition (D.2)" component of Economic Child Poverty, for the period 2024–2025, exclusively for the child population, the regions with the highest poverty levels ($\chi^2[12, N=3,041] = 11.960, p = 0.449$) are, in order, the following: North Aegean and Ionian Islands (jointly sharing first place), Epirus, Crete and Central Macedonia (jointly sharing third place), followed by South Aegean, Thessaly, Western Greece and Peloponnese.

With regard to the "Leisure (D.6)" component of Non-Economic Child Poverty, for the period 2024–2025, exclusively for the child population, the regions with the highest poverty levels ($\chi^2[12, N=3,045] = 53.720, p < 0.001$) are, in order, the following: Crete, Eastern Macedonia and Thrace, Western Greece, Peloponnese, South Aegean and Epirus.

The above findings indicate that regional variations in Multidimensional Child Poverty are marginal, while variations in Economic Child Poverty, Living Conditions at Home and Leisure are statistically significant¹¹.

Despite the methodological differences between the AROPE indicator and the Multidimensional Child Poverty Index, in terms of reference population, time of measurement and variables examined, five regions consistently show high levels of child poverty: Ionian Islands, Eastern Macedonia and Thrace, North Aegean, Western Greece, Peloponnese and Central Greece.

The level of child poverty is statistically significantly higher in rural/island/mountainous areas, in five out of the nine components, in total [ANNEX II](#), Table 2 and [ANNEX II.A](#)). In four out of the nine components in total, no statistically significant differentiation emerges. The findings indicate that needs are mainly concentrated in rural/island/mountainous areas.

More specifically, Economic Child Poverty is higher in rural/island/mountainous areas ($10.6\% \cdot \chi^2 =$

⁹ <https://ec.europa.eu/eurostat/web/products-eurostat-news/w/ddn-20251017-2>

¹⁰ <https://www.kepe.gr/>

¹¹ <https://www.kepe.gr/erevna/prosfates-ekdoseis-kepe/paratiritirio-evimerias-kai-paidikis-ftwxeias/>

4.566, $p=0.020$) ([ANNEX II](#), Table 2 and [ANNEX II.A](#)), as is Multidimensional Child Poverty (6.8% · $\chi^2 = 5.974$, $p=0.010$). Correspondingly, higher rates are recorded in Living Conditions at Home (10.2% · $\chi^2 = 5.526$, $p=0.012$), in Free Health (16.7% · χ^2 N=2,115] = 9.253, $p=0.002$), and in Leisure (16.8% · $\chi^2 = 6.531$, $p=0.006$).

Moreover, nutritional deprivation is the highest (25.2%) in rural/island/mountainous areas ([ANNEX II](#), Table 1 and [ANNEX II.A](#)). On the contrary, the lowest rate is recorded in Guardians' Unemployment (4.7%). The fact that nutritional deprivation is particularly high either in rural/island/mountainous areas or in urban areas ($\chi^2=0.537$, $p=0.245$) is also noted ([ANNEX II](#), Table 1 and [ANNEX II.A](#)).

Given that child poverty, in terms of unhindered access to free and quality health services ([ANNEX II](#), Table 2, and [ANNEX II.A](#)), appears to be more concentrated in rural/island/mountainous areas, this indicates that children living in these areas face increased needs in terms of the availability and quality of public health services¹².

2.5. Gender dimension and family structure in poverty

The enabling policy framework generally includes policies addressed to all children without gender discrimination. However, for the analysis of statistical data, disaggregation by gender is considered necessary. This is often not feasible, as gender-disaggregated data are not maintained by the competent services, as evidenced in the Child Guarantee Information System (see Section 7).

According to KEPE, Multidimensional Child Poverty presents marginal regional variations, while it is more pronounced in rural/island/mountainous areas, compared to urban areas. With regard to family structure ([ANNEX II](#), Table 3, and [ANNEX II.A](#)), poverty is more evident in single-parent households headed by mothers, which is linked to broader issues of gender inequalities at national level. Awareness-raising actions and gender equality policies could strengthen support for women raising children alone. In addition, children experiencing violence from their peers (including phenomena of discrimination and stigmatisation) mainly belong to groups facing poverty and social exclusion.¹³

The gender dimension is recognised in the NAP as a fundamental principle, acknowledging that child poverty and social exclusion may affect girls and boys differently. Integrating a gender perspective contributes to a better understanding of inequalities and to the formulation of more equitable and effective policies. The absence of gender-disaggregated data limits the ability to conduct evidence-based assessments of the potentially differentiated impacts of measures on girls and boys and, consequently, the targeted adjustment of actions.

2.6. Policies and resources to remove financial barriers to access to services

The enabling policy framework includes income support measures, tax relief, actions for the integration of parents into the labour market and work-life balance policies. The aim is to remove financial barriers that restrict children's access to quality services and to ensure that financial constraints do not act as a deterrent to their participation in education, health and other basic services.

2.7. Cooperation and participation of stakeholders

The enabling policy framework of the Child Guarantee in Greece largely recognises the importance of cooperation and meaningful participation of stakeholders. As highlighted in the NAP (section 6.2), an extensive nationwide network has been established at central, regional and local level, with the participation of civil society organisations, independent authorities and academic institutions, strengthening the coherence, transparency and effectiveness of the implementation of the Child Guarantee. This network is expected to

¹²See [KEPE, Public health, multidimensional child poverty, Insurance and Demographic](#) <https://www.kepe.gr/wp-content/uploads/2025/03/B2.pdf>

¹³See. <https://www.kepe.gr/erevna/prosfates-ekdoseis-kepe/paratiritirio-evimerias-kai-paidikis-ftwxeias/>

acquire explicit institutional status and clearly defined responsibilities, within the framework of the preparation of the relevant Joint Ministerial Decision (JMD), in implementation of article 59 of L. 4837/2021.

According to the NAP, the ultimate objective of the establishment of the network is the active participation in the implementation and monitoring of the Child Guarantee, a process already underway (see section 6 of this report). At the same time, the establishment of a stable framework of cooperation between Ministries and other bodies, such as local communities, social services and social economy organisations, constitutes a key tool for strengthening inclusive access of children and adolescents to basic services, as well as for the coordinated design and implementation of targeted actions (see section 3.2.6).

Finally, the need to strengthen the voice of children themselves is recognised, with the aim of gradually integrating participatory mechanisms that take into account their experiences, views and needs. This multi-level cooperation contributes substantially to improving the quality of policies and ensuring that they effectively respond to the specific needs of children.

2.8. Strategic investments in quality services, infrastructure and human resources

The enabling policy framework emphasises on the quality of services, investing in modern infrastructure and specialised human resources. The training of frontline professionals and the provision of sustainable, long-term funding are considered crucial for the effectiveness of the Child Guarantee.

2.9. Use of national and EU resources

Greece makes adequate use of resources for the implementation of the Child Guarantee from available national and EU funding sources (see Section 4). Overall, the funding base is multi-layered, with increasing emphasis on the full activation of approved actions. The systematic linking of expenditure to clearly defined objectives and measurable results as well as the impact of actions, through indicators, remains a significant challenge. The systematic monitoring and evaluation of policies, with emphasis on measuring their actual impact on child poverty and social exclusion, is crucial for the optimal use and allocation of resources, the targeted readjustment of measures, based on evidence, and the formulation of policies that effectively respond to the evolving needs of children and their families.

2.10. Promotion of inclusion and combating discrimination and stigmatisation

The principle of non-discrimination constitutes a central pillar of the NAP. Targeted interventions are implemented for Roma children, children with disabilities and children with a migrant or refugee background, as well as inclusive education and awareness-raising actions for professionals.

The systematic recording of qualitative data regarding barriers to equal access and potential stigmatisation remains a key challenge, in order to ensure not only formal but also substantive equality.

3. PROGRESS OF THE CHILD GUARANTEE POLICY MEASURES

The implementation of the ECG in Greece is based on a broad policy framework covering all basic services, as provided for in Council Recommendation (EU) 2021/1004, with emphasis on preventing social exclusion and ensuring equal access of children at risk of poverty or social exclusion to quality services.

3.1. Early childhood education and care

3.1.1. Target groups

The target group of early childhood education includes all children of infant and toddler age, from three (3) months to four (4) years, who attend Early Childhood Care and Education Units, as well as all children aged four (4) to five (5) years who are enrolled in compulsory pre-primary education. Within the framework of the principle of equal access and non-discrimination, early childhood education is addressed to all children regardless of socio-economic background, including children in need or at risk of poverty or social exclusion, children with disabilities and/or special educational needs, children with a migrant or refugee background, as well as children living in vulnerable conditions. Through the provision of care, education and early intervention services, the aim is the holistic development of children, the strengthening of social inclusion and their preparation for a smooth transition to compulsory education.

3.1.2. Financial and non-financial barriers

The implementation of the action " **Promotion and support for children for their inclusion in early childhood education as well as for the access of school-age children, adolescents and persons with disabilities to creative activity services** " continues, aiming to ensure equal and non-discriminatory access of infants and toddlers, and especially infants, toddlers and children in need, to quality education and training services in early childhood and school age, through financial support of families with the provision of placement vouchers ¹⁴. During the current school year, the income thresholds for receiving vouchers per category were increased, by the amount of €2000 for families with up to five children and by €3000 for families with six children and more, with resources covered by the regular budget of the Ministry of Social Cohesion & Family Affairs (MinSCFA).

There are no non-financial barriers in nurseries and early childhood education structures. The required staff, as provided for in the applicable Ministerial Decision, constitutes a prerequisite for the issuance of the Establishment and Operation Licence of the Unit. In DYPA nurseries, all operating costs are covered by its annual budget, while infants and toddlers are provided with free meals (breakfast, mid- morning snack, lunch and light afternoon meal). However, in DYPA nurseries, which have been included in the EETAA (Hellenic Agency for Local Development and Local Government) Program "**Early Childhood Education and Creative Activities for Children**", there is a significant shortage of permanent staff, mainly pedagogical, while shortages are supplemented by temporary staff. Building capacity is not fully utilised, a significant number of children cannot be accommodated, and school buses are not provided for the transport of infants and toddlers.

In municipal infant, childcare and nursery units, the basic issues of access and participation have been institutionally regulated (since 2017) ¹⁵. The Municipality may set fee criteria¹⁶ based on the financial capacity of the families, by decision of the competent body which is announced in a timely manner and includes clearly defined cases of exemption or reduction. The cost of transporting children ¹⁷is adjusted to the financial capacity of parents, with a parallel obligation to comply with strict standards of safe transportation, while adequate nutrition is provided both qualitatively and quantitatively (breakfast and lunch, as well as additional nutrition in cases of extended hours), treating meal costs as an integral operational obligation of the Units ¹⁸. Finally, since 2022, the program of financial support for families has been established for access of infants

¹⁴(No. 134947 EX 2025/29-07-2026 JMD (B' 4127), as amended by No. 15670/22-10-2025 (B' 5646) JMD).

¹⁵Ministerial Decision 41087/2017 (Government Gazette B' 4249) of the Ministry of Interior. Specifically, according to article 3, all children meeting the required age at the start of operation are eligible for enrolment.

¹⁶Article 5 of Ministerial Decision 4187/2017 (Government Gazette B' 4249) of the Ministry of Interior.

¹⁷Art.6 of Ministerial Decision 4187/2017 (Government Gazette B' 4249) of the Ministry of Interior.

¹⁸Art.11., par. 1 of Ministerial Decision 4187/2017 (Government Gazette B' 4249) of the Ministry of Interior.

and toddlers to early childhood education and care services ¹⁹, as well as a financial support program for families for access of children, adolescents and persons with disabilities to **creative activity services**, through the implementation of modern pedagogical practices and activities, outside school hours ([ANNEX III](#), 3.1.2.).

Inclusive education in early childhood

Early childhood Education and Care Units provide care and education services in the context of hosting all infants and toddlers from 3 months to 4 years old. All children aged 4 years and older are enrolled in compulsory pre-primary education. In all DYPA nurseries, pedagogical and leisure activities are carried out. Outreach actions and all types of school activities are addressed to all students without any exception, discrimination or exclusion.

The field of early intervention is recognised as crucial for promoting the inclusive objective. A key development in this regard has been the **Pilot Early Childhood Intervention Program for Children aged zero (0) to six (6) years** ²⁰, while the precise mechanism of linking the Pilot Early Intervention Program implemented by the MinSCFA with the Preschool Education program of the Ministry of Education, Religious Affairs & Sports (MoERAS) is foreseen.

With regard to issues relating to equal access of students with disabilities and/or special educational needs to education and the ensuring of functional and appropriate school environments, it is noted that, the **National Strategy for the Rights of Persons with Disabilities** is currently being implemented under the coordination of the Minister of State, providing for a wide range of actions in this field ([ANNEX III](#), 3.1.3).

In municipal Childcare and Nursery Units, a framework has been established (since 2017) ²¹to support inclusive preschool education in accordance with the "**Standard Regulation for the Operation of Municipal Childcare and Nursery Units**", which guarantees the right of enrolment of all children, including children with physical, mental, or psychological illnesses or disabilities, subject to a medical certificate from an appropriate specialty confirming that attendance is beneficial and feasible within the framework of the Unit's operation. In this way, the principle of equal treatment and non-discrimination in access to preschool education is ensured. Furthermore, the possibility is explicitly provided for the designation or recruitment of specialised staff or an accompanying person, when deemed necessary to support the child's inclusion, by decision of the Board of the legal entity or the Municipal Council, where the Unit operates as a municipal service.

3.2. Education

3.2.1. Prevention of early school leaving

The Public Employment Service (DYPA) aims to reduce school dropout by ensuring quality apprenticeship placements for all students from the beginning of each school year, as well as through the timely payment of apprenticeship remuneration and housing and meal allowances. These measures, combined with the provision of counseling and psychological support, contribute to ensuring a comprehensive protective framework for each student, discouraging them from abandoning their studies. In addition, DYPA provides all educational material (books and tablets) in both printed and digital form free of charge to all students of Apprenticeship Vocational Schools (EPAS).

Taking into account the particular needs of the refugee population arising from mobility, time of arrival and duration of stay in reception facilities, as well as the size of the student population, **Refugee Reception and Education Structures (DYEP)** may be established, operating within the framework of the formal education system and implementing specialised curricula of limited duration (see 3.2.6).

Remedial teaching ²² is offered to primary school students, with a daily schedule covering, depending on

¹⁹With article 104 of L. 4941/2022

²⁰JMD No. 4510/24 (Government Gazette 6068 B/1-11-2024)

²¹According to article 3(1)(a) of Ministerial Decision No 41087/2017 (Government Gazette B' 4249)

²²Presidential Decree 462/1991 (A'171) provisions on remedial teaching in primary schools.

needs and the number of participating students, 1-2 teaching hours per day and up to 6 hours per week, provided during or after the end of the regular school timetable (subject to written consent of the parent or guardian).

Children from vulnerable social groups are admitted to school ²³regardless of whether they are registered in the civil registries or municipal records. Also, their enrolment is not hindered by the absence of a certificate of permanent residence, and any document indicating the student's address is accepted, applying the principle of leniency. Finally, the enrollment of students from vulnerable social groups in the **Optional All-Day School Program** is carried out without preconditions. A variety of related actions of the MoERAS concern: the **enrolment of minors** who are third-country nationals or stateless, **compulsory attendance in kindergartens and primary schools**, participation in the all-day primary school **program**, **the operation of autonomous classes in remote and mountainous areas**, the **Remedial Teaching program** in lower secondary education, the **Remedial Teaching program for Special Subjects**, the **establishment and operation of Reception Classes ZEP** (for Roma, foreign nationals, repatriated persons, refugees, vulnerable social groups, etc.), **individually taught students** (in cases of serious health conditions, pregnant students, students fulfilling military service, students in detention or with serious mental health conditions), **vocational training issues**, the **digital tutoring system**, the **apprenticeship classes**, as well as a range of actions for the prevention or reduction of early school leaving ([ANNEX III](#), 3.2.1.).

3.2.2. Free school materials and digital equipment

Textbooks and teachers' books are provided free of charge to students and teachers respectively ²⁴. In addition, all school textbooks are available in digital form (PDF, HTML, iBooks) through the official **Interactive School Books platform** (ebooks.edu.gr). At the same time, students with disabilities and special educational needs are provided with free auxiliary educational equipment.

Within the framework of promoting intercultural and multilingual learning, for equal access to education for Roma students and children with a refugee/migrant background, the free printing and distribution of school books is approved, while a wide range of educational material and software is available to support teachers teaching refugee/migrant children and the children themselves. In addition, "**Skills Workshops**", as well as as the Curriculum "**Active Citizen Actions**" for Kindergarten, Primary School, Lower Secondary School and Upper Secondary School have been included in the compulsory timetable of Kindergarten, Primary School and Lower Secondary School. Finally, the training of teachers in Artificial Intelligence issues, educational robotics for kindergarten students, as well as the creation of digital personalised Artificial Intelligence (AI) educational material for students from vulnerable social groups with learning difficulties, constitute innovative digital actions ([ANNEX III](#), 3.2.2).

3.2.3. Free transport to school

The transport of public-school students from their place of residence to the school units of Primary Education (first and second preschool age and Primary School) and Secondary Education, and vice versa, including the transport of students of Special Education and Training School Units ²⁵, is implemented by the Regions, in accordance with the applicable institutional framework since 2018 ²⁶. The above regulatory

²³For vulnerable social groups, the circular of the Ministry of Education under reference Φ.6/23717/Δ1/4-3-2025 on the subject of "Registration of students in Kindergartens for the school year 2025-26" and the circular of the Ministry of Education under reference Φ.6/24732/Δ1/6-3-2025 on the subject of "Registration of students in Primary Schools for the school year 2025-26" apply.

²⁴According to par. 7 of article 2 of L. 1566/1985 (167A) "Structure and operation of primary and secondary education and other provisions"

²⁵With article 7 of L. 4089/2012 (Government Gazette 206/vol. A/26-10-2012), paragraph 21 was added to paragraph 8 of Chapter II of article 186 of L. 3852/2010 (Government Gazette 87, vol. A), the force of which began on 01/07/2013.

²⁶According to No. 50025/26.09.2018 (Government Gazette B' 4217) JMD of the Ministers of Interior, Education, Research and Religious Affairs, Finance and Infrastructure and Transport, entitled "Transportation of students of public schools by the Regions", as amended and in force with the JMD Nos. 53173/11.08.2022 (Government Gazette B' 4294), 680/04.01.2023 (Government Gazette B' 7) and 32239/05.04.2024 (Government Gazette B' 2051)

framework clearly defines the terms and conditions under which students of primary and secondary education are transported daily from their place of residence or from predetermined gathering points to the school they attend and back, taking into account both the kilometre distance from the school unit and the special mobility needs of students with disabilities. The financing of student transport is provided by the Ministry of Interior through the Central Autonomous Resources and aims at ensuring uninterrupted access of all students to school education, regardless of geographical or social particularities. If transport by public transport or by the Regions' and Municipalities' own means is not feasible or is considered economically disadvantageous in terms of cost, the Region assigns, through public service contracts, the transport of students by any appropriate public-use means of transport that meet safe transport conditions.

If the above procedure is impossible or unprofitable in terms of cost, then (a) a monthly allowance of €85 may be provided to households with children who relocate to another area to ensure school attendance (b) partial compensation may be granted in cases where parents transport children to school by their own means, which amounts to €0.35 per kilometer and cannot exceed €1,500 per student, per school year (excluding students of Special Education and Training School Units), (c) they are transported by private carriers, within the framework of public service provision, whose vehicles meet the appropriate specifications (seat belts, roadworthiness inspection, etc.), due to the lack of public-use means of transport in mountainous, inaccessible or island areas. For further information regarding the transport of children to schools, as well as the verification of the suitability conditions of vehicles and staff in order to ensure students' safety of during transportation, see [ANNEX III](#), 3.2.3).

3.2.4. Free meals

The MinSCFA prepares, coordinates, supervises and in cooperation with the MoERAS implements, through the Organization for Welfare Benefits and Social Solidarity (OPEKA), the "**School Meals**" Program²⁷, which concerns the provision of a hot lunch meal to students of selected public primary schools in the country. School meals contribute significantly to strengthening solidarity and companionship within the student community and at the same time improve student performance. The multiple benefits of the Program are also positively reflected in the development of primary domestic production, as the products selected for the preparation of the meals, which is carried out in cooperation with scientific bodies, are local and of high nutritional value. Thus, healthy Mediterranean nutrition is promoted within the student community, while at the same time the number of jobs in local communities is also increased. During the current school year 2025-2026, the Program includes, according to its budget, the provision of 231,062 hot meals daily to Primary School students. It is implemented nationwide in 1,918 school units, by Contractors selected following a Public Open Electronic Tender. Any interested party can search for schools throughout Greece participating in the Program during the school year 2025-2026²⁸. For further information regarding the provision of school meals, see [ANNEX III](#), 3.2.4).

At the same time, DYPA provides a **meal allowance of € 9** per day to students of EPAS Apprenticeship Schools, under specific conditions (mainly permanent residence outside the town where the school unit operates) and with broadened income criteria to cover all students in need. Finally, the Ministry of Interior, through the Central Autonomous Resources, distributes credits annually to Local Government Organisations, among others, for **covering the meal expenses** of the music and artistic lower and upper secondary schools of the country.

²⁷Article 12 of L. 4455/2017 (Government Gazette A' 22), as amended and in force by article 77 of L. 4756/2020 (Government Gazette A' 235) and Presidential Decree 77/2023 (Government Gazette A' 130)

²⁸No. 14457/08.10.2025 JMD (Government Gazette B' 5381)

3.2.5. *Participation in school activities*

Equal and non-discriminatory access of children and adolescents to cultural and educational activities, under the responsibility of the Ministry of Culture, operates complementarily to school activities and strengthens the participation of students in cultural, leisure and creative experiences regardless of socio-economic background, place of residence or individual characteristics. This policy is implemented through a framework of specific actions, through which the main priorities are demonstrated in practice: economic accessibility, access through the school community, inclusion and universal accessibility, geographical equality of access, social inclusion of children living in vulnerable conditions and strengthening the children's mental well-being and creative development ([ANNEX III](#), 3.2.5.).

In the Greek education system, from the school year 2024-25, the Curriculum “**Active Citizenship Actions**” was introduced, which promotes a holistic approach, integrating the 17 Sustainable Development Goals and cultivating in students the ability to address complex social, economic and environmental issues. In addition, the “Curriculum ‘Active Citizenship Actions’ for Kindergarten, Primary School, Lower and Upper Secondary School” aims to prepare citizens with skills of critical thinking, cooperation and social responsibility skills, who contribute actively to the creation of a sustainable society based on sustainability, social justice and environmental protection. At the same time, the use of asynchronous and synchronous distance learning tools is foreseen, within the framework of informing/training teachers who implement corresponding School Activity Programs, while excursions-educational visits and movements of students from Public and Private Secondary Education schools inside and outside the country, are carried out, including students with special educational needs ([ANNEX III](#), 3.2.5.).

3.2.6. *Framework of cooperation for inclusive education, provision of after-school care and opportunities for participation in sports, leisure and cultural activities*

With regard to inclusive education and taking into account the particular needs of the refugee population arising from mobility, time of arrival and duration of stay in the accommodation structure, as well as the size of the student population, **Reception Facilities for the Education of Refugee Children (RFRE)** may be established, operating within the framework of the formal education system and implementing specialised curricula of limited duration²⁹. In addition, the school units are defined for the school year 2025-2026 within which RFRE will operate per Reception Centre/Accommodation Structure³⁰. The Independent Department for the Coordination and Monitoring of Refugee Education of the Ministry of Education is responsible for the smooth operation of RFRE, which are established and operate within the Refugee Reception Centres, as kindergarten branches and follow the timetable of the unified type of all-day Kindergarten.

The Independent Department for the Coordination and Monitoring of Refugee Education for the strengthening of RFRE has secured, through the Hellenic Parliament, funding for their cleaning and heating expenses, throughout the territory. Furthermore, Refugee Education Coordinators are faced on a daily basis with the need to ensure adequate clothing, footwear and educational materials (bags, markers, etc.), which they strive to cover with their own means, donations, etc. In this effort, the Urban Cultural Centre PYRNA has been a long-standing supporter. There are problems in the material and technical infrastructure (containers leaking water, unsafe courtyards, etc.), while there is a delay in the vaccinations of children residing in the Reception Centres and therefore in their integration into education. Structures of reception, inclusion classes and special education programmes concerning parallel support and the provision of home teaching are also part of the framework of inclusion (see [ANNEX III](#) 3.2.1 & 3.2.5.).

School units may implement educational actions and programs in cooperation with educational institutions,

²⁹In article 72 of L. 4547/2018 "Reorganization of primary and secondary education support structures" and other provisions.

³⁰In the Ministerial Decision: "Establishment of Reception Structures for the Education of Refugee Children (RFRE): Determination of the school units for the school year 2025-2026, within which the Reception Structures for the Education of Refugee Children (RFRE) will operate."

local communities and various bodies ³¹. Likewise, for the implementation of school, sports actions - activities as well as for the teaching of swimming in the 3rd and 4th grades of Primary School within the framework of Physical Education, cooperation is required between Directorates of Education - educational institutions, local bodies, social services, etc., while Memoranda of Cooperation have been concluded between the MoERAS with bodies, based on which school sports actions are implemented, adapted to the needs of the students. At the same time, the importance of implementing co- education programs with persons with disabilities or other educational needs is underlined, as a means of promoting inclusion and equal opportunities in education, as well as of raising awareness within the school community and the wider society on issues of respect for human rights and acceptance of heterogeneity. In addition, within the framework of cooperation among bodies for the promotion of inclusive education, the Institute of Education Policy (IEP) has organised, in collaboration with other bodies, a series of training actions ([ANNEX III](#), 3.2.6).

The Public Employment Service (DYPA) has concluded a memorandum of cooperation with the University of West Attica (UNIWA) and specifically with the Departments of Early Childhood Care and Dietetics.

For unaccompanied children seeking asylum, a framework of cooperation is maintained with Non-Governmental Organizations (NGOs), sports clubs, cultural bodies, focusing on: a) equal access for all children to educational, sports and cultural activities b) strengthening the social inclusion of vulnerable groups, c) developing social, emotional and personal skills. Particular emphasis is placed on the provision of care and creative activities after school hours, through organised activities, implemented by specialised professionals and volunteers of cooperating bodies, such as the Memorandum of Cooperation with the NGO METAdrasi within the framework of the “**Together in Sports_Phase II**” program ([ANNEX III](#), 3.2.6). At the same time, within the framework of the Regional Programs 2021-2027, the programs “**Development of interventions to strengthen Roma infants (2-4 years old), children (4-12 years old) and parents through experiential workshops and children's camps**” (ESF+) are being implemented, with a total budget of €450,000. ([ANNEX III](#), 3.2.6). Finally, it is noted that the possibility of establishing and operating **Creative Activity Centres for Children (KDAP)**, as well as **Creative Activity Centres for Children with Disabilities (KDAPAmA)** by Municipalities is also highlighted (as mentioned in Section 3.1.2.).

3.3. Health

3.3.1. Early detection and treatment of diseases and developmental problems

Within the framework of the **National Neonatal Preventive Screening Program-Newborn Screening Program (EPPEN)**, which is being developed by the Ministry of Health with the Institute of Child Health as the implementing body, 4 pathological conditions are detected within 2-3 days after the child's birth under the core program and 30 additional conditions following a pilot implementation (2023-2025) with the prospect of incorporation into the core program in the following years (a total of 34 pathological conditions).

The institutional framework has also been established for the basic clinical examination of children and adolescents at specific ages for all children (at five ages during the school period) in order to issue the Individual Student Health Card. Through this process, developmental problems or other disorders are identified and referral is made to specialist doctors, while at the same time the appropriate specialised educational program is developed. Through the **DIONI intervention**, teams of doctors and health professionals visit schools to support children with difficulties in accessing health services and children belonging to special population groups.

In all DYPA nurseries, there is a pediatrician under an employment contract and children are examined every 15 days. In addition, in the Regional Services (Reception and Identification Centres/RICs, Closed

³¹according to article 73 of L. 5128/30-07-2024 (A' 118).

Controlled Access Centres/C.C.A.C. and Controlled Access Facilities for Temporary Accommodation of Asylum Seekers/ C.A.F.T.A.A.S), **primary healthcare is provided by the Medical Screening and Psychosocial Support Units** (within the RICs/C.C.A.C.) and **Medical and Pharmaceutical Care and Psychosocial Support Units** (within the C.A.F.T.A.A.S) which are staffed by specialised personnel (e.g. doctors, nurses, psychologists, social workers, pediatricians), within the framework of the "Hippocrates I" program, implemented by the International Organization for Migration in cooperation with the service provider. These Units undertake the early detection of special needs of asylum seekers, including medical and developmental problems of children, and ensure the appropriate referral of individuals in need of medical and psychosocial support to specialised services.

3.3.2. Child vaccinations

Particular emphasis is placed on properly informing the population regarding the health benefits and the reduction in mortality from diseases preventable through vaccination. Vaccinations of the child population are carried out in accordance with the **National Vaccination Program for Children and Adolescents**, as formulated each time by the National Vaccination Committee and the listed vaccines (for diphtheria, tetanus, pertussis, poliomyelitis, rubella, measles, mumps, chickenpox, meningococcal and pneumococcal infections, hepatitis A and B, HPV infections, influenza, coronavirus and respiratory syncytial virus-RSV) are administered free of charge. This Vaccination Program includes more specific vaccination recommendations for vulnerable groups of the child population at high risk of disease, either due to underlying disease or a higher likelihood of exposure to a pathogenic aggravating health factor, immunosuppression, etc. At the same time, within the framework of Primary HealthCare, Health professionals (Health visitors) systematically visit school units in order to check the Child Health Booklet for vaccination coverage, provide recommendations to parents or organise relevant vaccinations.

In the Regional Services (RICs, C.C.A.C. and C.A.F.T.A.A.S) of the Reception and Identification Service (RIS), children's access to full vaccination in accordance with WHO standards is ensured by the Medical Screening and Psychosocial Support Units (within the RICs/C.C.A.C.) and Medical and Pharmaceutical Care and Psychosocial Support Units (within the C.A.F.T.A.A.S). Within the framework of vaccination, and after communication with the Health Region of the respective area, the corresponding vaccination certificates as well as a health/vaccination booklet are provided, which are necessary for access to public education and the enrolment of children in school.

Essential care has also been taken regarding the vaccination of Roma living in camps/settlements, as well as for issues relating to health promotion, prevention of chronic diseases, epidemiological surveillance, and response to emergency health risks, taking into account the particular social characteristics and vulnerability of this group ([ANNEX III](#), 3.3.2).

At the same time, for the enrolment of children in kindergarten and primary school, the health booklet or another document proving that the required vaccinations included in the National Vaccination Program have been carried out is required ([ANNEX III](#), 3.3.2).

3.3.3. Mental health problems

It is worth noting the operation, by non-profit private legal entities, of **Early Intervention in Psychosis Units, Mobile Mental Health Units for children and adolescents** and **Adult Mobile Units with child psychiatric services**. Specifically, the Early Intervention in Psychosis Unit constitutes a comprehensive, multidimensional, multi-level, outreach-oriented and community-based clinical approach, aiming at the early detection and treatment of symptoms of psychotic disorders at their initial stages, so as to minimize the long-term effects of their progression and prevent or reduce the likelihood of relapses, while at the same time

enhancing the improvement of the functionality of young patients and their integration and return to the work, educational and wider social environment. Correspondingly, the Mobile Unit provides the following services: 1) early diagnosis - intervention for the prevention of the onset of illness or its relapse, 2) home intervention for crisis treatment and management, home hospitalisation and monitoring of pharmaceutical treatment, 3) regular monitoring of the progression of the illness and the continuity of the patient's psychiatric care, 4) assistance and support of the patient in dealing with their practical needs and problems with emphasis on the development of skills and preparation for the ultimate goal of autonomous living, 5) counselling - support intervention for the patient's family with the aim of improving their communication and reducing the anxiety of both the family and the patient, 6) combating the social stigma burdening both the patient and the family through community education programs. The Mobile Units provide prevention services, diagnostic assessment-treatment, home-hospitalisation care, psychosocial rehabilitation and reintegration services and implement community education programs. In [ANNEX III](#), 3.3.3 a table is provided with all the Early Intervention in Psychosis Units and the above-mentioned Mobile Units operating in the territory by non-profit private legal entities.

At the same time, support and strengthening of students' socio-emotional development and resilience are provided through the **institution of the psychologist and the social worker in Primary and Secondary Education schools**. Specifically, the objectives are cognitive, socio-emotional and the development of skills for responding to crisis/emergency situations. In addition, the role of psychologists and social workers is diagnostic, informative, supportive, and mediating. Furthermore, within the educational system of our country, issues relating to psychosocial support (of students, parents and guardians, educational staff) fall within the competence of Centres for Interdisciplinary Assessment, Counselling & Support (KEDASYs) & Interdisciplinary Support Committees (ISCs) ([ANNEX III](#), 3.3.3).

For DYPA 's, vocational training and apprenticeship structures the provision of counseling and psychological support at both group and individual level by a specialised Psychologist is foreseen. At the same time, the project **“Complementary Support Mechanism of the National Strategy for the Protection of Unaccompanied Minors in Greece” – PYXIDA** aims at creating a complementary support mechanism to address identified needs and structural gaps in the existing framework. Specialised mental health services are offered to unaccompanied minors and to young adults (who entered the country as unaccompanied minors and are registered in the relevant Unaccompanied Minors Registry) up to the age of 21 ([ANNEX III](#), 3.3.3).

3.3.4. Free medicines

All children in Greece have free access to the vaccines included in the national vaccination program and are entitled to free access to public health structures. Regarding pharmaceutical coverage, a financial contribution to the total cost of pharmaceutical products usually applies, based on financial criteria. Certain categories of patients, such as refugees, unaccompanied minors and persons with a disability rate of more than 67%, receive medicines free of charge with a doctor's prescription. Private individuals and their family members who meet a specific set of eligibility conditions relating to income and property are entitled to a zero participation in medicines, while the same applies to specific categories of children for whom no income or property test is required. For the needs of medical and pharmaceutical care, and access to health and social insurance services, applicants for international protection are assigned a **Temporary Number for Social Security and Health Care of Foreigners (PAAYPA)**. The holder of the PAAYPA has access to health services, however, the PAAYPA number is deactivated when the application for international protection is rejected or archived following withdrawal. Regarding the access of unaccompanied minors to health services, (especially for unaccompanied minors applying for international protection), the PAAYPA remains active even after the issuance or service of a first-instance or second-instance rejection decision on the application for international protection until they reach adulthood.

Children residing in the Regional Services of the RIS receive, from the service provider, free – prescribed, non-prescribed and paramedical medicines from the **Medical Screening and Psychosocial Support Units** (within the RICs/ C.C.A.C.) and the **Medical and Pharmaceutical Care and Psychosocial Support Units** (within the C.A.F.T.A.A.S) within the framework of the "Hippocrates I" program, implemented by the International Organization for Migration and its partners. In addition, children residing in accommodation structures for unaccompanied minors receive free medical and pharmaceutical care and are provided with medicines free of charge following the instructions of the doctors monitoring them.

Finally, since 2016,³² free access to medical care in the National Health System (ESY) has been provided for uninsured citizens, as well as their access to pharmaceutical care under the same conditions as insured citizens. In addition, the possibility of exemption from pharmaceutical expenditure co-payment for economically vulnerable persons and other vulnerable categories of citizens is also provided for.

3.3.5. Rehabilitation services for children with disabilities

The Unified Health Benefits Regulation of the National Organization for the Provision of Health Services (EOPPY) provides for the coverage of targeted interventions that contribute to the rehabilitation of children and adolescents covering a number of sessions or expenses at rehabilitation service providers (e.g. occupational therapy, speech therapy, physiotherapy, etc.).

At the same time, students with disabilities or special educational needs may attend either a general school class, where these are students with mild learning difficulties, or be supported through parallel support/co-education, when this is required by the type and degree of special educational needs, as well as students with more severe special educational needs if there is no other appropriate framework in their area (special education school) ([ANNEX III](#), 3.3.5). In addition, DYPA operates **special Training Schools for Persons with Disabilities**. In the EPAS Apprenticeship Schools, equal access for all is ensured and measures are taken for equal participation (facilitating access to the school structure through special infrastructure, such as ramps, etc., as well as the participation in classes of teachers using sign language, where necessary).

3.3.6. Health promotion programs

The Ministry of Health designs, implements and monitors programs and actions for health education and disease prevention. Indicatively, these programs concern: **Child - Family Health Promotion, Health Education - Interventions in the Student Population, Health Education - Sexual and Reproductive Health, Mother, Adolescent & Child Protection Stations**, which respond to the principles of equal and universal access to quality Health Services for the whole population, without differentiation among special population groups ([ANNEX III](#), 3.3.6).

Since 2018, support for³³ sustainability education programs has been initiated with the aim of developing and implementing in Primary and Secondary Education school units the principles and objectives of thematic training courses of Education for the Environment and Sustainability, School Health Education and Health Promotion and Cultural Issues, the use of Educational Radio - Television in the educational process, as well as ensuring the smooth operation of the supervised educational structures. In addition, since 2021, Skills Workshops³⁴ have been introduced and are being implemented **in Primary and Secondary Education and in Special Education** with a focus on skills, in the compulsory timetable of Kindergarten, Primary School and Lower Secondary School. By making use of modern and innovative learning methods, the purpose of the "Skills Workshops" is to strengthen the cultivation of soft skills, life skills and science and technology skills in students ([ANNEX III](#), 3.3.6).

³²With article 33 of L. 4368/2016 (Government Gazette 21, issue A) and the sub - No. A3(c)/ΓΠ/οικ.25132/2016 J.M.D. (Government Gazette 908, issue B),

³³With Presidential Decree 18/2018, article 36, the Directorate for Support of Programs and Education for Sustainability (D.Y.P.E.A.) was established for the first time in the Ministry of Education, Religious Affairs and Sports (MoERAS.).

³⁴According to Ministerial Decision No. 94236 /GD4/04-08-2021 (Government Gazette 3567/issue B)

In the Regional Services of the Reception and Identification Service of the Ministry of Migration and Asylum, an action is being implemented, in cooperation with UNICEF, within the framework of the program " **Child and Family Health Promotion** ". In particular, the action aims at the health promotion of adolescent girls living in the structures under the responsibility of the RIS through awareness-raising and information seminars on girls' hygiene practices, which are often combined with the distribution of personal hygiene items. In addition to the " **PYXIDA** " program, which also focuses on the promotion of children's mental health (see Section 3.3.3.), a **Technical Support Instrument (TSI)** is being implemented by the United Nations High Commissioner for Refugees. The objective of the project is to provide technical assistance for the design and implementation of institutional, legal and organisational interventions that will facilitate access of unaccompanied young people (refugees, migrants, asylum seekers or stateless persons), aged 15 to 23, to mental health, education, vocational training and employment services. One of the deliverables of the program concerns exclusively the Mental Health and Psychosocial Support (MHPSS) component, focusing on a comprehensive Action Plan to strengthen the adequacy, accessibility and quality of services in Greece, with proposals for legislative interventions for the effective integration of the target group into the National Health System.

3.4. Nutrition

3.4.1. Healthy nutrition outside of school

Health provisions have been established regarding the recommendations for the setting of nutritional criteria in the selection of foods provided in preschool and school education structures and regarding the conditions for the operation of school canteens, kiosks and catering areas in primary and secondary schools. At the same time, the list of products permitted for sale was modernised, providing for the monitoring and evaluation of the implementation of the measures and the issuance of annual circulars for the correct application of the legislation. In addition, information material was issued with the aim of raising awareness among students and parents regarding the correct choice of foods for school snacks and information on healthy eating habits is provided within the framework of certain school subjects.

At the same time, a package of measures is being implemented aimed at promoting breastfeeding and supporting the breastfeeding process, given the low levels of breastfeeding uptake. Complementarily, nutrition policy has focused on the prevention and treatment of childhood obesity by developing a structured framework of interventions based on two operational programs, one for the general population and one for children in need (Table 1).

TABLE 1: Promotion of healthy nutrition (paragraph 9 of the Recommendation)

TABLE 1: Promotion of healthy eating (para. 9 of the Recommendation)					
ACTION	BRIEF DESCRIPTION	COMPETENT MINISTRY	TARGET GROUP	IMPLEMENTATION STATUS	NUMBER OF BENEFICIARIES
Childhood Obesity Treatment Program	Actions concerning primary, secondary and tertiary prevention of childhood obesity	MINISTRY OF HEALTH/ UNICEF	General population	Implemented	Nationwide coverage

From the academic year 2025-2026 (March 2026), the implementation of the pilot phase is planned in selected Primary and Secondary Education school units in the country (for students aged 9–18) of the educational interventions of the project entitled: "Improving and upscaling primary prevention of cancer by addressing childhood obesity through innovative primary prevention applications - **PREVENT (Improving**

and upscaling primary cancer prevention by addressing childhood obesity through implementation research – the PREVENT approach)” within the framework of the “Horizon Europe” Program (HORIZON). The aims of the Program are: a) linking the likelihood of the occurrence of types of cancer in adult life with obesity in children and adolescents through an evidence-based approach (identification of biomarkers), and b) applying the best educational interventions, based on scientific evidence, for tackling childhood obesity and, by extension, cancer in adulthood ([ANNEX III](#), 3.4.1).

Residents of the Regional Services of the Reception and Identification Service who are unaccompanied minors and asylum seekers, including children, have access to a full dietary menu which covers any particular needs of those receiving meals (e.g. allergies, vegetarianism, health issues such as diabetes, religious/cultural particularities). This full dietary menu is approved and signed by a professional dietician-nutritionist, taking into account the particular needs of those receiving meals.

Finally, the **European Program for the distribution of fruit, vegetables and milk in schools** is highlighted³⁵. The aim of the program is to increase the consumption of fruit, vegetables and milk by students and the adoption of healthy eating habits. It provides for the distribution of fruit, vegetables and milk and educational actions for 100,000 children in primary education. At present, it has not yet been implemented.

3.4.2. Restriction of unhealthy foods

As already mentioned in subsection 3.2.3, **school meals** (hot meal and salad in individual packages) are provided to all students of the selected school units on the five (5) educational days of the week and constitute a program specifically designed to cover the nutritional needs of students, within the framework of healthy Mediterranean nutrition. Also,³⁶ hygiene rules governing the operation of school canteens are established, as well as a list of the products permitted to be sold by them, in order to safeguard the health of the school population. Furthermore, the Teaching Subject "Skills Workshops" which has been integrated into the Timetable of classes of the 1st, 2nd and 3rd grades of the Day Lower Secondary School³⁷, aims at strengthening the cultivation of soft skills, life skills and science and technology skills in students. The program and educational material of the “Skills Workshops” are grouped into four (4) Thematic Units, deriving from the Global Sustainable Development Indicators (environment, well-being, safety, civil society, modern technology and entrepreneurship). Specifically, the Thematic Unit “**LIVE BETTER – WELL-BEING**” includes the sub-sections “1.1. Health: Nutrition - Self-Care” and “1.2. Mental and Emotional Health - Prevention”.

3.5. Housing

3.5.1. Housing for homeless children and families

Programs are being implemented with the aim of the immediate return of homeless persons to autonomous living, with emphasis on families with children, such as the program³⁸ “**Housing and Work for the Homeless**” for individuals and families experiencing or facing an immediate risk of homelessness ([ANNEX III](#), 3.5.1.) and the new pilot project of “**Social Housing for Vulnerable Groups**” in the Municipalities of Athens and Thessaloniki aiming at housing households living in precarious housing conditions in affordable-rent dwellings, through the renovation of inactive housing stock and its integration into a network of affordable housing.

At the same time, within the framework of the National Strategy for the Social Inclusion of Roma, the implementation of the call³⁹ entitled “**Temporary Relocation, Development, Replacement and/or**

³⁵The Ministry of Rural Development & Food in cooperation with the Ministry of Education, Religious Affairs and Sports

³⁶Based on the ministerial decision under reference Υ1γ/Γ.Π/ οικ 81025 (B' 2135)

³⁷With the reference number 94207/Δ2/29-07-2021 Ministerial Decision. (B' 3791) and the Evening Lower Secondary School with the reference number 94214/Δ2/29-07-2021 Y.A. (B' 3791). According to the reference number 94236/Γδ4/29-07-2021 Ministerial Decision. (B' 3567)

³⁸Article 15 of L. 4756/2020 (Government Gazette 235 A) and sub. No. 1301/12-8-2024 JMD (B' 4766)

³⁹Sectoral Development Program of the Ministry of Interior”

Extension of Infrastructure Networks for the Improvement of Living Conditions of Special Social Groups (Roma) " was successfully completed ([ANNEX III](#), 3.5.1). Furthermore, UNICEF's WASH program is implemented in cooperation with the General Secretariat for Social Solidarity and Combating Poverty, within the framework of the National Strategy for the Social Inclusion of Roma, with the aim of improving living conditions in Roma settlements through technical, social and participatory interventions. A central axis of the program is the installation of at least 10 pilot WASH infrastructures at household and community level, so as to ensure safe and continuous access to water, with an emphasis on sustainability ([ANNEX III](#), 3.5.1.)

DYPA of the Ministry of Labor & Social Security offers a housing allowance of €240 per month to students of EPAS Apprenticeship Schools, under specific conditions (mainly permanent residence outside the city where the school unit operates) and with broadened income criteria in order to cover all students in need. In particular, where serious social and economic reasons exist (homelessness, orphanhood, etc.), the allowance may be granted exceptionally, derogating from the legal conditions, following a Social Worker's Report.

The **National Emergency Response Mechanism (NERM)** of the Ministry of Migration & Asylum aims at the immediate identification, referral and protection of unaccompanied minors who are homeless or living in precarious conditions. The NERM ensures the immediate access of unaccompanied minors to safe temporary accommodation structures, as well as the provision of services, such as psychosocial support, legal counselling, healthcare and interpretation services, where required. At the same time, it supports the process of assessing the best interests of the children and their gradual integration into appropriate long-term accommodation structures. Within the framework of the operation of the NERM, a hotline for identification has been established, operating Monday to Friday 08:00–22:00 and Saturday 11:00–19:00 and constitutes a key tool for the reporting and identification of cases of unaccompanied children at risk and the immediate mobilisation of the competent services. The line is accessible to public authorities, bodies, frontline professionals, citizens, as well as to the children themselves and supports their timely referral to protection and housing services. The identification of children living in homelessness or precarious conditions is also supported through on-site outreach actions (street work) carried out by the implementation partners of the NERM. In addition, the NERM cooperates with municipal social services regarding reports of cases of unaccompanied minors living in precarious conditions, mainly in the provinces. The NERM contributes substantially to ensuring the right of homeless children to adequate housing and social care, strengthening the coordination among the bodies involved and the immediate response of the child protection system.

3.5.2. Prevention of homelessness in families with children

The following measures ⁴⁰aim at preventing homelessness with emphasis on families with children:

a) The housing allowance provides housing support to low-income individuals and families living in rented accommodation. The amount of the housing allowance ranges from 70 to 210, depending on the composition of the household, with particular care for single-parent families and households with unprotected children. It is noted that 9.73% of beneficiary households are single-parent families and 26.45% of all beneficiaries are minor children.

b) For new beneficiaries aged 25-39 who are beneficiaries of the Minimum Guaranteed Income, the "Coverage" housing support program is implemented. The **program** "Coverage" (KALIPSI, excel 8.1.6) prioritises, through special scoring, the inclusion of households with minor children, families with three or more children, as well as single-parent families. 43.44% of the program's beneficiaries are minor children, while 41.45% of beneficiary households are single-parent families.

⁴⁰Implemented by the MinSCFA,

3.5.3. Energy poverty

The **granting of a heating allowance** constitutes an ongoing action of the Ministry of National Economy and Finance, which indirectly benefits children, since natural persons defined as beneficiaries receive this allowance, provided that they meet specific income criteria, which are increased for each child. It is granted to natural persons for the consumption of subsidised heating fuels, for the properties they use as their main residence at the time of submitting the application, once per year, following a relevant application submitted at the beginning of December. Applicant citizens receive gradual payments, depending also on the amount of fuel purchases, up to the maximum amount of the allowance, per category. The amount of the allowance is increased by 20% for each dependent child of the beneficiary. The allowance is granted per winter/heating period and not per year. Therefore, for the heating period 2024-2025, ⁴¹the expenditure incurred amounted to €150,750,000 for the year 2024 and €45,000,000 for the year 2025. For the heating period 2025-2026, ⁴²the budget for the heating allowance amounts to €270,000,000. More specifically, for the year 2025, the estimated expenditure amounts to €150,000,000, with payments amounting to €124,000,000, while the corresponding estimated expenditure for 2026 amounts to €120,000,000.

The Ministry of Environment and Energy has approved **an Updated Action Plan for Combating Energy Poverty** ⁴³as follows: M1. Social tariff scheme and mitigation of impacts from the energy cost crisis (Economic measure), M2. Package of regulatory measures for the protection of affected households, M3. Energy upgrading of residential buildings of affected households and promotion of the installation of Renewable Energy Sources (RES) systems to meet their energy needs, M4. Utilisation of the institution of Renewable Energy Communities and Citizen Communities for addressing energy poverty, M5. Innovative financial instruments for the implementation of actions to improve energy efficiency in energy poor households. It is noted that the Regulation establishing a Social Climate Fund is also in force with the aim of supporting vulnerable families in addressing energy and transport poverty. This is Regulation 2023/955, under which Member States are required to submit National Action Plans for the Social Climate Fund to the European Commission. At present, the Greek Action Plan is under consultation with the European Commission; however, it includes, inter alia, policies for vulnerable persons with disabilities [electric wheelchairs] and actions covering both social housing and energy poverty, with vulnerable families as beneficiaries, e.g. single-parent families with children.

3.5.4. Social housing and priority

The commencement of the implementation of the provisions of L.5006/2022 ⁴⁴on **social compensation** is planned ⁴⁵, with the aim of constructing and allocating social housing to households at affordable rent. The objective of social compensation is the utilisation of public property, the creation of social housing, as well as the provision of social rental housing with an option to purchase for socially vulnerable groups. Beneficiary tenants in social compensation programs will be selected on the basis of objective social criteria, and in particular their income, family status and the age of their children.

As previously mentioned, the **Program Housing and Work** for the Homeless is being implemented. From the data available to date for Roma households/beneficiaries, it appears that 19 Plans have been approved for inclusion in the Program Housing and Employment for the Homeless, with 69 Roma households and 234 individuals as beneficiaries.

⁴¹(Government Gazette B' 6249/2024)

⁴²(Government Gazette B' 5802/2025)

⁴³According to par. 1 of article 25 of L. 4342/2015 (ADA 9Ψ704653II8-ΞΘΞ) _30/12/2025

⁴⁴From the MinSCFA

⁴⁵As amended by L. 5229/2025

3.5.5. Alternative care

Each child protection unit and hospital units hosting children are obliged, under article 5 of L.4538/2018, to register them in the **Special Register of Minors**. For each minor, an **Individual Family Rehabilitation Plan (ASOA)** is drafted and entered within ninety (90) days from the assumption of his/her care, which includes a reasoned proposal for his/her rehabilitation, taking into account the individualised needs and best interests of the minor. The ASOA is updated each time there are substantial changes in the minor's situation or, at the latest, after one from its last submission. The available rehabilitation options include foster care and semi-autonomous living for persons aged fifteen years and over, as alternative care either of the family-based type or at community-based care level. ([ANNEX III](#), 3.5.5).

At the same time, the **Semi-Autonomous Living Program**"Semi- Autonomous Living in Apartments for persons aged fifteen years and over ⁴⁶" was established. The program is addressed to persons living in closed child protection structures and operates complementarily within the framework of the implementation of public deinstitutionalisation policies.⁴⁷ ([ANNEX III](#), 3.5.5.)

3.5.6. Transition to family-based care

Since 2018, ⁴⁸measures have been provided for the promotion of foster care and adoption institutions. During the reference period, the activation of article 16 ⁴⁹of the aforementioned law concerning professional fostering is worth noting. **Professional foster care** constitutes an innovative alternative for our country for the deinstitutionalisation of minors with disabilities and such it has been included in the NAP for the Protection of Persons with Disabilities. It aims to promote the community living of minors with disabilities through the provision of individualised care focused on the needs of each minor, their social inclusion and support. In addition, a series of legislative regulations concern the professional foster care of minors with disabilities and training has been carried out for Prospective Professional Foster Parents and professionals, as well as other supporting actions for the further dissemination of the institution of professional foster care ([ANNEX III](#), 3.5.6).

Within the framework of its competences, the Ministry of Justice contributes to the transition from institutional to family-based care through its institutional role as guarantor of legality, judicial protection and supervision of child protection procedures, guided by the best interests of the child and the safety of the transition. This contribution is implemented through the operation of the **competent juvenile judicial and prosecutorial authorities**, which decide on and supervise measures of alternative care (foster care, adoption, protective measures), based on an individualised assessment of the child's situation.

At the same time, the Juvenile Probation and Social Assistance Services play a decisive role, supporting judicial decisions through social reports, monitoring the implementation of measures and acting as a link between the justice system and the competent child protection services. The operation of the "**Children's Houses**" indirectly but substantially strengthens the process of safe transition, as it ensures that children who are victims/witnesses are treated through child-friendly procedures, without secondary victimisation, an element which contributes to the stability and quality of protection and family rehabilitation decisions. Finally, the creation of a unified electronic statistical data archive is envisaged, to be fed by the competent services

⁴⁶With L. 4837/2021 (article 52, as amended by article 57 of L. 5216/2025)

⁴⁷In 2024, JMD No. 1316/2024 (B' 4763) "Semi-autonomous living in apartments for persons aged fifteen and over living in Child Protection and Care Units" was issued, which was amended by JMD No. 17940/19.11.2025. In August 2024, the Call for applications for funding was published within the framework of the Recovery and Resilience Fund (Axis 3.4: Increasing access to effective and inclusive social policies Action 16919 - Strengthening child protection)

⁴⁸With L. 4538/2018

⁴⁹Article 16, Professional Fostering: In cases of Minors who may be placed with a foster parent by court order (art. 11), the court may place children with disabilities and children with serious mental disorders with professional foster parents, following a proposal from the person responsible for conducting the social investigation. The care provided by the foster parents shall serve a specific therapeutic plan, proposed by specialist scientists of the supervisory body. The foster parent who offers professional services to the child shall be paid a monthly salary and shall be insured for illness and pension. 2. By joint decision of the Ministers of Labour, Social Security and Social Solidarity and Finance, following an opinion from the National Council for Foster Care and Adoption (ESANY), matters relating to the establishment and maintenance of a special register of professional foster parents, the monthly salary, health and insurance coverage, their special training programs, as well as any other matter relevant to the implementation of this.

and the “Children’s Houses”, so that there is better monitoring of the child’s protection pathway and documentation of policies.

3.5.7. Independent living and social inclusion

Within the framework of the implementation of **the Semi-Autonomous Living Program** (Section 3.5.5.), actions are envisaged with the aim of strengthening the autonomy of the beneficiaries, such as indicatively the development of life skills and participation in activities, connection with other bodies and services, vocational counseling and connection with the labor market for adult beneficiaries. At this point, it should be noted that the target group of the Program is minors aged 15 to 18 and young adults aged 19 to 26.

3.6. Information and outreach measures

Following the completion of the second phase of the technical support program entitled ' Implementation of the European Child Guarantee-Promoting inclusive education in Greece ', which was financed by the Technical Support Instrument (TSI) of the EU and implemented by the European Agency for Special Needs and Inclusive Education in cooperation with the European Commission, a "**Guide to Inclusive Education**", produced within the framework of the program’s activities and finalised after its completion, has been prepared and sent to school units throughout the country, (see [GUIDE TO INCLUSIVE EDUCATION GUIDE](#)) ([ANNEX III](#), 3.6). In addition, a committee has been established ⁵⁰ for the monitoring of the physical accessibility for persons with disabilities of the educational and administrative structures of the MoERAS. At the same time, workshops and conferences are held regarding the importance of education in the inclusion of refugee children and the promotion of inclusion actions for the implementation of the vision of creating an intercultural inclusive school. At the same time, the Autonomous Department for the Coordination and Monitoring of Refugee Education participates in the digital platform of the ACCMR - Athens Coordination Centre for Migrant and Refugee issues, promoting cooperative actions and dissemination of information for the support of refugees and migrants. It also organises, in partnership with Universities, the Hellenic Police, the Ombudsman for Children and the Ministry of Migration and Asylum, training actions for teachers, education officials and Refugee Education Coordinators.

In 2025, the RIS of the Ministry of Migration and Asylum issued the Child Protection Policy, which aims at the uniform implementation of appropriate standards of conduct and practices of the Service’s staff within the Regional Services of the RIS and of the bodies cooperating with it. The aim is to ensure the best interests of children, respect their rights and prevent any harm to them. The Child Protection Policy binds all persons operating within the Regional Services of the RIS; therefore, the staff, as well as the bodies cooperating with the Service, must be fully aware of the relevant procedures and provisions of the Child Protection Policy, and, on that basis, approach children and the actions related to them, with respect for their dignity, their physical integrity, their right to well-being and non-violent treatment, as well as the principle of not causing harm.

Information and outreach measures, within the field of the Ministry of Justice, are not limited to general awareness-raising actions, but are based on specific structures and tools aimed to ensuring that information reaches the child (and caregivers/professionals) at the moment they need it: before and during their contact with the justice system, especially when a child is a victim, witness or in a vulnerable situation. A central outreach measure is the organisational and operational strengthening of the “Children’s Houses” as child-friendly justice structures, which in practice function as an “access point” for children in need, reducing obstacles, fear and re-traumatisation and increasing their ability to participate in the process safely. The systematic approach is also strengthened through training and the production of tools/guidelines such as the **Just Closer program** (application of procedural safeguards for children in criminal proceedings, training of professionals and a guide to good practices) and the **CHILDSay program** (child-centred practice/training and

⁵⁰With the Ministerial Decision No. 63348/Δ3/02-06-2025

structures for children's participation). The effectiveness of these measures is assessed mainly on the basis that they reduce non-institutional access barriers (fear, lack of awareness of rights, discouragement, difficulty navigating the system), strengthen timely referral to protection mechanisms and improve the quality of the child's participation in the process.

Finally, during the years 2024 and 2025, a series of actions by the Hellenic Police have been implemented, regarding information and outreach measures, including the operation of the **special telephone line for issues concerning minors**, the digital application " **SAFE.YOUth** ", the organisation of regular visits to Day Care Centres for Persons with Disabilities (KD-HF), Supported Living Accommodation (SYD) and special secondary schools for persons with psychosocial disability, actions in accommodation structures for unaccompanied minors, as well as issues of cybercrime prosecution. ([ANNEX III](#), 3.6).

3.7. Participation of stakeholders

In order to support the attendance and educational inclusion of students with a refugee background, specific support structures have been institutionalised at all levels of education. The operation of Reception Classes and DYEP, in combination with the role of Refugee Education Coordinators, constitutes the main support mechanism for students, ensuring their gradual integration into the school environment in a systematic, individualised and inclusive manner. In addition, interoperable interventions are being developed ⁵¹ for the educational inclusion of Unaccompanied Minors, promoting their holistic support.

Finally, in 2024, ⁵²the European Centre for the Fight against Obesity was inaugurated, within the framework of the National Action to address childhood obesity. The Institute of Educational Policy (IEP) in cooperation with UNICEF and Harokopio University developed the educational action material: "**Food for Action**" for the prevention of childhood obesity, for the integration of educational programs in schools (e.g. healthy nutrition, physical education), for children aged 0-17 years.

4. FUNDING

Financial support for the implementation of interventions linked to the ECG in Greece is based on a coherent and multi-level scheme of co-financed actions, with the European Social Fund Plus (ESF+) as the main pillar and complementary use of Regional Programs that promote the social inclusion of children and families.

According to the NSRF 2021–2027, actions directly supporting children up to 18 years of age – in terms of equal access to childcare, education, healthcare, decent housing and adequate nutrition – are implemented as a matter of priority through the thirteen Regional Programs and the Sectoral Program “Human Resources & Social Cohesion” ([ANNEX IV 1](#)). For this purpose, at least 8% of ESF+ resources are earmarked, within the framework of the implementation of the NAP for the “Child Guarantee”, a percentage that constitutes a regulatory obligation of the country.

Beyond ESF+, the implementation of the Guarantee is supported by complementary European and national funding sources. In particular, European Regional Development Fund (ERDF) resources are used for investments in social and educational infrastructure, resources from the Recovery and Resilience Fund for reforms and modernisation of services with an indirect but substantial impact on the well-being of children, as well as national resources from the Regular Budget and the Public Investment Program. This combined approach strengthens the complementarity of interventions and broadens the coverage of children at risk of poverty or social exclusion, especially in the areas of education, health, social care and family support.

⁵¹From the Independent Department for Coordination and Monitoring of Refugee Education (ATSPEP) together with the General Secretariat for Vulnerable Citizens and Institutional Protection

⁵²From the Ministry of Health, UNICEF and Harokopio University

According to EYSEKT data (up to 15.1.2026), during the 2021–2027 programming period, significant resources are being made available, with a broad scope in terms of beneficiaries. Within the framework of the Regional Programs, three main actions are implemented ([ANNEX IV1](#)):

The action for the development and strengthening of interdisciplinary counselling and support structures and learning support/ co-education for students with disabilities and/or special educational needs (SO 4.6) has a total public expenditure of €877.5 million, of which €450.2 million is eligible public expenditure, with payments of €363.3 million. The result indicator records 12,671 benefiting children.

The action "Promotion and support of children for their inclusion in preschool education and access to creative activity services" (SO 4.11) presents a total public expenditure of €1.415 billion, eligible public expenditure of €401.9 million and payments of €328.6 million, with 142,655 beneficiary children.

The action "Provision of social care services to vulnerable groups - Support services for children, youth and family" (Region of Central Macedonia, SO 4.11) has a budget of €8.38 million (fully eligible), with payments of €1.84 million and 3,483 beneficiaries.

At the same time, the Sectoral Program "Human Resources & Social Cohesion" includes seven targeted actions in the field of education (SO 4.6), which contribute to the prevention of educational exclusion of children from vulnerable groups ([ANNEX IV.2a](#) & [ANNEX IV.2b](#)). Indicatively:

- The "Restructuring and support of Reception Classes and DYEP" (€57.26 million) with 27,626 beneficiaries.
- The "Support for systematic attendance and inclusion of students with disabilities and/or special educational needs" (€255.23 million) with 61,697 beneficiaries.
- "Remedial Teaching" (€8.6 million) with 20,415 beneficiaries.
- The strengthening of socio-emotional development through psychologists and social workers (€28.57 million) with 452,249 beneficiaries.

Complementary actions further strengthen the framework for the prevention of school exclusion, while the DYPA Apprenticeship Programs are also co-financed. At the same time, projects for infrastructure upgrading and modernisation of Vocational Education are financed by the Recovery and Resilience Fund.

Included in the total interventions are also approved actions without expenditure yet incurred, which strengthen the medium-term developmental orientation of the Strategy (e.g. interventions for Roma children, integrated local plans against child poverty, systemic coordination actions).

The Indicator Documentation Sheets specify the measurement methodology, the data sources and the reporting frequency, ensuring clear calculation rules, avoidance of double counting and comparability. Indicators PSR390, 622401, PSR792 and PSR798 document results concerning access to educational and social services, with a clear distinction between participants and beneficiaries/recipients of services, without collection of microdata in the Integrated Information System - OPS (IIS) where this is not required. At the same time, compliance with the RACER criteria is documented, enhancing the reliability of the monitoring system ([ANNEX IV3](#)).

Overall, the mobilisation of high-budget resources, the satisfactory progress of payments and the positive development of indicators demonstrate substantial operational capacity and expansion of coverage of children at risk of poverty or social exclusion, especially children with disabilities and/or special educational needs. However, the assessment of the financing effort must take into account the broader socio-economic pressures: prolonged inflationary trends, increased food, housing and energy costs, as well as persistent income inequalities for households with children. These factors increase the demand for social protection services at a faster rate than the expansion of available resources and make the targeted geographical and social allocation of interventions crucial, especially in non-urban and remote areas.

In conclusion, Greece has activated an extensive and multi-level financing framework for the implementation of the ECG. The maintenance and strengthening of the effectiveness of interventions will depend on the continuation of adequate financing, the improvement of targeting towards the most vulnerable groups and the adaption of policies to the constantly changing socio-economic conditions.

5. MONITORING

Monitoring is mainly based on harmonised Eurostat indicators, as derived from the EU-SILC survey ([ANNEX I](#), Table 1) and on complementary indicators included in the file "Monitoring Indicators and Recorded Changes" ([ANNEX V](#)), which is recorded in the 1st Biennial Progress Report of the National Action Plan ⁵³.

Sections 7 and 11 of the NAP include the targets and monitoring indicators, with the AROPE indicator being the most important. Changes in the individual indicators are reflected in the attached file "Monitoring Indicators and Recorded Changes" ([ANNEX V](#)). It is noted that changes in Eurostat indicators, included in the file "Monitoring Indicators and Recorded Changes" have been recorded, but the file requires further modification through the incorporation of additional indicators, as well as the removal of indicators that are no longer used.

The main longitudinal trends of the indicators linked to the monitoring framework of the ECG are presented in Section 2 of this report, while the same Section also records regional differences through the national survey of KEPE. In the present Section 5, the main changes observed in the key dimensions of child poverty ⁵⁴are summarised.

During the reference period, the relevant indicators, as shown in Table 2 below, present differentiated trends, which are linked to broader economic and social developments in recent years. At the same time, the implementation of employment, social protection and income support policies appears to have contributed to containing the effects for part of the households with children.

⁵³ Also, based on the National Multidimensional Poverty Index regarding the distinction of areas into rural/island/mountainous, by component (see 2.4).

⁵⁴ The quality of the data is ensured through Eurostat 's established control procedures, including methodological checks, validation procedures and cross-country comparability rules. In addition, quality control (quality control) is ensured through the cross-checking of the central findings of Eurostat with the findings of the national survey of KEPE and vice versa.

Table 2: Changes in Child Poverty and Well-being Indicators (Reference Year 2024)

Thematic Area	Indicator	Reference Period	Change (p.p.)	Direction
General Child Poverty	Percentage of children (<18 years) at risk of poverty or social exclusion (AROPE)	2023–2024	–0.2	Decrease
	Percentage of children (<18) in severe material and social deprivation	2023–2024	–1.7	Decrease
	Percentage of children (<18) in households with low work intensity	2023–2024	–0.5	Decrease
	Percentage of children (<18) at risk of poverty (AROP)	2023–2024	+0.6	Increase
	Child poverty risk gap	2023–2024	–0.4	Decrease
	Percentage of children (<18) experiencing all three AROPE dimensions simultaneously	2023–2024	–0.3	Decrease
	Percentage of children (<18) at persistent risk of poverty	2023–2024	–3.2	Decrease
	Percentage of children (<18) at risk of poverty with threshold of fixed base year (2019)	2023–2024	–2.3	Decrease
	Reduction of the risk of child poverty due to social transfers	2023–2024	–2.7	Decrease
Early Childhood Care	Percentage of children <3 years old (AROPE) outside formal early childhood education and care structures	2023–2024	–3.0	Decrease
	Percentage of children aged 3 to the lower age of compulsory education (AROPE) outside formal early childhood education structures	2023–2024	–12.5	Decrease
Education	Percentage of early leavers from education and training	2023–2024	–0.7	Decrease
Housing	Percentage of children at risk of poverty with excessive housing cost burden	2023–2024	+2.0	Increase
	Percentage of children at risk of poverty with severe housing deprivation	2023–2024	+4.5	Increase
	Excessive housing cost burden gap (children at risk of poverty versus general child population)	2023–2024	+5.6	Increase
	Housing deprivation gap	2023–2024	+3.1	Increase
	Overcrowding gap	2023–2024	+0.5	Increase
	Percentage of children (AROPE) unable to keep adequately warm	2023–2024	+1.6	Increase
	Percentage of children (AROPE) living in overcrowded households	2023–2024	–1.9	Decrease
Diet	Percentage of households with dependent children at risk of poverty unable to provide a protein-rich meal every second day	2023–2024	–2.6	Decrease
	Percentage of children (AROPE) unable to consume fresh fruits and vegetables daily	2023–2024	+0.5	Increase
	Percentage of children (AROPE) unable to consume meat, fish or chicken (or equivalent) daily	2023–2024	+18.9	Increase
Healthcare	Percentage of children (AROPE) with unmet needs for medical examination or treatment	2021–2024	–2.1	Decrease

5.1. Recorded changes in General Poverty

The indicator of risk of poverty or social exclusion (AROPE) for people under 18 years of age recorded a slight decrease of 0.2 percentage points from 2023 to 2024⁵⁵.

As regards the individual components, severe material and social deprivation decreased by 1.7 percentage points and low household work intensity by 0.5 percentage points. By contrast, the “at risk of poverty” (AROP) component recorded a marginal increase of 0.6 percentage points.

The child poverty gap decreased by 0.4 percentage points, while the percentage of children experiencing all three dimensions of the AROPE indicator simultaneously also decreased. At the same time, the percentage of children in a situation of persistent risk of poverty also recorded a decrease.

The development of the AROP indicator is linked to the relative nature of the indicator, which reflects the position of households in relation to the median income of the total population. Changes in the level of median income can affect the relative ranking of households with children.

At the same time, household composition and labor market characteristics appear to affect the relative income position of families with dependent children. For example, single-parent families record higher rates of poverty risk, while variations also appear depending on the intensity of participation in the labour market.

Overall, the available data indicate an improvement in some dimensions of children's living conditions, while at the same time highlighting the importance of continuing policies that strengthen social protection, employment and support for families with children.

5.2. Recorded changes in Early Childhood Care

The percentages of children at risk of poverty or social exclusion (AROPE) with zero participation in early childhood education and care services decreased by 3 percentage points for children under 3 years of age and by 12.5 percentage points for children aged 3 years up to the start of compulsory education.

This development reflects progress in expanding access to early care services for vulnerable groups of children and is aligned with the objectives of the ECG.

This improvement appears to be linked to the continuation of financial support programs for families through placement vouchers for participation in early childhood education structures, as well as to the implementation of interventions that broaden the available care options for younger children.

At the same time, the inclusion of nurseries in co-financed programs seems to have contributed to increasing the availability of places for infants and toddlers. However, demand for early childhood care services continues to present variations in certain areas of the country.

5.3. Recorded changes in Education

The percentage of early leaving from education and training decreased by 0.7 percentage points from 2023 to 2024, reaching levels lower than the European average. This development is linked to the implementation of policies supporting school attendance, such as remedial teaching actions.

5.4. Recorded changes in Housing

The rate of excessive housing cost burden for children at risk of poverty increased by 2 percentage points from 2023 to 2024.

At the same time, increases are also recorded in other indicators related to housing conditions, such as

⁵⁵ According to the KEPE [survey](#), *Economic Child Poverty in Greece, for the period 2024 – 2025*, amounts to 9.2%, while Non-Economic Child Poverty amounts to 12.5%.

severe housing deprivation and the housing burden gap between different groups of households ⁵⁶.

These developments appear to be linked to the general rise in housing and energy costs in recent years, as well as to differences in the evolution of household incomes.

At the same time, the implementation of programs for the energy upgrading of dwellings and measures to combat energy poverty contributes to the improvement of certain qualitative dimensions of housing.

Overall, the available data evidence indicate that the housing dimension of child poverty is affected by a combination of economic and social factors, which highlights the importance of continuing policies for affordable and quality housing.

5.5. Recorded changes in Nutrition

The percentage of households with dependent children at risk of poverty reporting financial inability to provide a meal of sufficient protein value every second day decreased by 2.6 percentage points from 2023 to 2024.

However, an increase is recorded in the percentage of children who are unable to consume fresh fruit and vegetables or protein-rich foods on a daily basis ⁵⁷, a fact that is likely linked to increases in food costs and their impact on households' disposable income.

The implementation of programs such as school meals contributes to strengthening children's food security, especially in areas with increased socio-economic needs and in areas with reduced access to services due to geographical inequalities.

5.6. Recorded changes in Healthcare

The percentage of children at risk of poverty or social exclusion with unmet needs for medical examinations or treatments decreased by 2.1 percentage points during the period 2021–2024, reaching levels below the European average.

This development reflects the importance of universal access to health services and the role of the public health system in meeting the basic needs of children.

At the same time, the implementation of prevention, vaccination and primary care programs contributes to improving access to health services for vulnerable groups of children.

However, in some areas of the country, differences in the adequacy of infrastructure and services continue to be recorded, which highlights the importance of continuing investments in infrastructure and human resources in the health sector.

6. GOVERNANCE AND PARTICIPATION OF STAKEHOLDERS

The implementation of the Council Recommendation establishing the ECG in Greece is based on a multi-level governance system, with the National Coordinator of the Child Guarantee as its central reference point. During the second biennial reference period, the implementation of the ECG was supported by a framework of administrative and operational coordination mechanisms, with the aim of ensuring the coherent implementation, monitoring and consolidation of the NAP, taking into account that key elements of the

⁵⁶ According to the data of the Ministry of Migration & Asylum, it is noted that unaccompanied minors in 2024 were 3,483, while in 2025 they were 3,862. Separated minors in 2024 were 613, while in 2025 they were 460. Other minors in 2024 were 16,685, while in 2025 they were 14,629. In conclusion, the number of children residing in the structures of the Ministry of Migration and Asylum (R.I.C) was a total of 20,781 in 2024, while in 2025 it was 18,951. Therefore, from 2024 to 2025, there is a decrease in the number of children residing in the R.I.C. of the Ministry of Migration and Asylum.

⁵⁷ A high value was also recorded in the "Nutrition" component of the Multidimensional Child Poverty Index. See <https://www.kepe.gr/en/research/recent-publications-kepe/kepe-indices/kepe-index-of-multidimensional-child-poverty>

monitoring and evaluation mechanism are still under development.

Within this framework, the National Coordinator carried out a series of targeted meetings and teleconferences with bodies of the ECG network that are directly involved in the implementation of the policy measures. The meetings concerned public services and administrative bodies at central, regional and local level, as well as the designated Child Guarantee liaisons. Their main purpose was to support the recording and monitoring of NAP actions, clarify roles and responsibilities and improve the flow and exchange of information among the stakeholders involved. These processes functioned in a complementary manner to the work of the National Coordinator and did not constitute formal public consultation procedures.

A central axis of the National Coordinator's action and the participation of stakeholders during the reference period was the pilot implementation and productive operation of the IS for the ECG. The IS was designed as a key tool for the systematic recording, monitoring and evaluation of the policy measures included in the NAP. Within the framework of its pilot implementation, bilateral meetings were held with representatives of fourteen (14) involved Ministries, with the aim of presenting the structure and operation of the IS, clarifying the procedure of recording actions, identifying technical and organisational challenges, as well as collecting proposals for its further upgrading and interoperability with other information systems (see section 8). The meetings, which took place between July and September 2024, contributed substantially to strengthening intersectoral coordination and improving the coherence of policy measures for addressing child poverty and social exclusion.

Subsequently, on 1st October 2024, a broad working meeting was held on the subject "Development of the Information System for the Child Guarantee: Problems - Prospects". The purpose of the meeting was to present and discuss the main aspects of the IS, within the framework of the cooperation of EKKKA, as National Coordinator, with the competent services of the involved Ministries and UNICEF for the recording, monitoring and evaluation of the policy measures of the NAP. The meeting highlighted the importance of systematic monitoring and evaluation of policy measures, the need to strengthen the participation of Municipalities, as well as the prospects for the gradual integration of artificial intelligence tools into the IS and the strengthening of its interoperability with other information systems.

Cooperation with the regional level was strengthened through meetings with the Regions and the Regional Observatories for Social Inclusion, with the aim of collecting and utilising quantitative and qualitative data on child poverty and social exclusion, as well as supporting targeted interventions in mountainous, island, remote and disadvantaged areas. In this context, two training teleconferences were held with IS users from the thirteen (13) Regions of the country, with the aim of developing a unified framework for data recording. The pilot submission of data revealed issues of heterogeneity and gaps in the data, especially as regards the number of beneficiary children per target group, which were addressed through targeted technical support and clarifications provided by the National Coordinator's team.

At the same time, the training of users from the seven (7) Health Regions was completed. In the health sector, cooperation was initiated with the Ministry of Health and the Health Regions for the automated extraction of data through the Health Unit Statistical Data Collection System (BI Forms). Corresponding actions are underway for early childhood education and care, as well as for social structures to address poverty, in cooperation with the competent national and management bodies.

At local level, the participation of Municipalities was strengthened through information and support actions for the designation of users in the IS and the pilot data recording. During the reference period, regular and alternate users were designated at all levels of administration — Ministries, Regions, Health Regions, Municipal Social Services and Community Centers with their Branches — with a total number of 1,020 users. The widening of participation at local level strengthened the inclusiveness and representativeness of the recording process, but also highlighted challenges associated with the increased administrative burden and fragmented data collection across multiple information systems.

In parallel with the operation of the IS, cooperation was developed with bodies collecting and managing critical data for children and families, such as the OPEKA, the Special Managing Authorities of the Regions and the Hellenic Agency for Local Development and Local Government (EETAA), as well as with information systems such as myschool. These cooperations aim at improving the quality and comparability of data and gradually reducing the administrative burden, given that the interoperability of the IS with other systems constitutes a medium-term objective.

According to the Recommendation for the ECG, stakeholders participated throughout the preparation, implementation and monitoring of the NAP. Within this framework, cooperation was developed with civil society organisations and research bodies, such as the Hellenic Anti-Poverty Network, with the aim of utilising statistical and qualitative data, highlighting geographical and social inequalities and improving the evidence base of policies for children. At the same time, actions were implemented to empower child protection professionals in cooperation with Regions, Municipalities and professional bodies, contributing to the dissemination of the ECG framework and to the shaping of a common understanding for the holistic approach to child poverty and social exclusion.

Particular importance is attached, according to the Recommendation, to the participation of children themselves in the policies that concern them. During the reference period, this participation was mainly approached through indirect mechanisms, such as the use of qualitative and quantitative data from services and bodies working directly with children and families. The development of more structured and systematic forms of children's participation is recognised as a key priority for the next phase of implementation of the NAP and is foreseen to be implemented through a special application on the IS website, in the context of its upgrading.

Overall, the above actions demonstrate the significant progress achieved in governance, coordination and stakeholder participation for the implementation of the ECG in Greece. At the same time, critical challenges regarding the quality and completeness of the data, as well as interoperability among information systems with relevant data, are highlighted.

Furthermore, it is noted that, within the framework of the Technical Support Instrument (TSI) of the EU, the project “*Support for the implementation of the European Child Guarantee in Greece*” was implemented by UNICEF, in cooperation with the Directorate-General for Structural Reform Support of the European Commission (DG REFORM).

The purpose of the project was to provide specialised technical support to the MinSCFA, as well as to the National Coordinator of the Child Guarantee in Greece, for the more effective implementation of the NAP for the ECG. Particular emphasis was placed on the shaping of a sustainable and coherent system for monitoring the situation of children in need, with clearly defined responsibilities and accountability mechanisms.

Technical support was organised around three main axes:

Action 1: Development of an updated framework for data collection, monitoring and evaluation of the implementation of the NAP, including proposals for covering existing data gaps, in accordance with international standards and best practices.

Action 2: Evaluation of the existing governance framework for the implementation of the NAP and formulation of recommendations for the adoption of a unified and effective governance model.

Action 3: Preparation of a study for the development of a NAP aimed at combating childhood obesity and promoting healthy nutrition, with particular emphasis on children in need.

The project has been completed, while the process of commenting on and processing the relevant texts by

the MinSCFA and the National Coordinator has also been concluded. The official submission of the final deliverables is still pending.

The following are indicative UNICEF/TSI proposals for the establishment of a comprehensive monitoring and evaluation framework of the NAP for the ECG in Greece:

1. Prioritisation of actions and updating of indicators

The proposal aims at strengthening the targeted and functional implementation of the NAP, by highlighting the most critical and flagship actions and avoiding fragmented interventions. At the same time, emphasis is placed on updating and qualitatively upgrading the indicators (statistical and operational), so that they reflect more accurately the progress and tangible results of the implemented policies.

2. Definition of clear roles and standardised monitoring and evaluation procedures

The need for a clear delineation of responsibilities among the bodies involved (central administration, local government, National Coordinator) is emphasised, as well as the establishment of standardised procedures for collection, processing and analysis of data. The aim is the transition from fragmented practices to a coherent and systematic monitoring and evaluation system.

3. Coverage of existing gaps in administrative data concerning children in need

Significant deficiencies in the availability and quality of data concerning children in need are identified. It is proposed that the mechanisms for the collection and updating of data (e.g. population data, recording of needs, access to services) be systematically strengthened, so that policymaking is based on documented and reliable evidence.

4. Strengthening the administrative capacity of bodies in the recording and use of data

Emphasis is placed on improving the tools and procedures used by the stakeholders, through the use of unified information systems (such as the ECG Information System), ensuring interoperability among systems and integrating modern technological solutions. The aim is more effective, faster and higher - quality management of data.

The following presents, in summary, key UNICEF/TSI's proposals regarding the governance framework of the NAP for the ECG:

1. Updating of the NAP with emphasis on targeted implementation

It is proposed to focus on high-priority actions, as well as to strengthen the integration of relevant interventions at local level (especially at municipal level), in order to ensure greater effectiveness and closer alignment with the needs of children.

2. Strengthening of monitoring, reporting and decision-making mechanisms

It is recommended that coordination among the stakeholders be reinforced and linked with the central governance system, so as to ensure systematic monitoring of implementation and evidence-based decision-making.

3. Specialisation of the role of local government

The need to strengthen the contribution of local government is emphasised, especially in terms of collecting and recording data, identifying local needs and coordinating interventions at the local level.

4. Introduction of complementary governance structures and roles

It is proposed that new supporting mechanisms (such as advisory bodies and evaluation structures) be provided for, with the aim of strengthening the coherence, transparency and effectiveness of the governance system.

5. Strengthening participation

Particular emphasis is placed on broadening the participation of civil society, as well as of children themselves, in the design and implementation of policies, in order to ensure inclusion and responsiveness to the actual needs of beneficiaries.

The above findings and proposals are systematically utilised in the ongoing planning and upgrading of the coordination, monitoring and evaluation mechanisms of the NAP, with the ultimate objective of strengthening the effectiveness of policies and ensuring the substantive protection and social inclusion of children in need.

7. GAPS IN THE IDENTIFICATION OF CHILDREN IN NEED AND IN ACCESS TO SERVICES AND INTERVENTIONS

7.1. Gaps in the identification of children in need and in access to services

In the NAP for the ECG, significant gaps are highlighted with regard to the implementation of the Guarantee. In particular, Sections 3 and 11 underline the difficulty of securing sufficient data on:

- the number of children in need per target group, and
- their degree of their substantive access to basic services (early childhood education, education, health, nutrition and housing).

At present, the systematic identification and monitoring of the relevant gaps, is not feasible, for the following reasons:

a) Incomplete entry of data into the Information System

The recording and monitoring of policy measures in the IS started in November 2025 and is ongoing. As the process of entering data by the competent Ministries has not yet been completed, the system is not yet able to produce reliable and comparable statistical results.

The staffing of the National Coordinator (EKKA) with specialised experts, who are expected to be recruited by the Program "Human Resources & Social Cohesion 2021–2027", is important because, although not all data have yet been recorded, some statistical results have nevertheless been extracted, which are presented in [Annex II.1](#). The staffing of the National Coordinator (EKKA) with specialised experts had already been provided for in the NAP (p. 65) since 2022. The utilisation of these experts is considered crucial for:

- the systematic processing and analysis of data,
- the reliable monitoring of NAP implementation,
- the strengthening of the quality of evaluation.

The full operational utilisation of the IS, with the systematic production of statistical results and the measurement of the effectiveness of policies and structures addressing poverty and social exclusion at central, regional and local levels, constitutes a crucial next step.

b) Inability to record children as distinct beneficiaries

While the EKKKA IS includes the possibility of recording children as distinct beneficiaries, at local and regional level, the corresponding data are not recorded. in the fields that relate specifically to:

- "children" as beneficiaries
- the clear identification of the target group to which they belong.

Often, the fields "beneficiaries" and "number of beneficiaries " refer to the general population or to the household level, without the possibility of allocation to the individual minor members. This practice highlights a substantial administrative gap, as data concerning the child as an independent beneficiary of the services provided are not systematically recorded in services.

To address this issue, the National Coordinator has highlighted the need to activate the enabling provisions of article 59 of L. 4837/2021, so that the following may be established:

- the obligation to collect data on child poverty and social exclusion **by target group, gender and age** of the children
- the mandatory recording and monitoring of the above data in the IS.

The relevant JMD is currently being processed.

c) Need to combine European and national data

The NAP (p. 66), in alignment with the European Commission's directives, provides that monitoring and evaluation should be based both on harmonised European data (e.g. EU-SILC) and on national administrative and statistical sources.

Within this framework, the interoperability of the IS with other information systems and administrative registers (e.g. Minimum Guaranteed Income, education and health registers) has been launched, in cooperation with the NSRF Executive Structure of the MinSCFA.

The combination of the above data is expected to allow:

- the identification of children who meet the criteria for receiving benefits but do not appear as beneficiaries,
- the emergence of "invisible" groups (e.g. children without social security number (AMKA), Roma children outside school),
- the depiction of the gap between the estimated target population and the children actually served.

Furthermore, the development of specialised indicators by target group and service, within the framework of the upgrading of the IS, will facilitate the identification of groups with low or zero access and will allow comparative assessments between Regions and Municipalities.

Finally, the combined use of quantitative and qualitative data (e.g. waiting time, administrative barriers, approval delays, income thresholds) strengthens the capacity for the timely identification of weaknesses and the formulation of targeted corrective interventions.

7.2. Limited territorial mapping of children in need and of access barriers

The NAP recognises that a significant proportion of children in need live in rural, mountainous, island and remote areas, while the low accessibility to basic services for the residents of these areas is highlighted (p. 23 of the NAP). The particularity of the country's geomorphology and the multidimensional nature of child poverty make the systematic mapping of needs at regional and local level necessary.

The IS can cover this gap, through the active and systematic participation of Regions, Health Regions, Municipal Social Services and Community Centres. Since January 2025, data recording by the Regions and the Health Regions has begun, while from the second quarter of 2026, the inclusion of Municipalities is foreseen.

During the initial recording phase, the following were identified:

- differences in the frequency of data collection,
- incomplete and non-homogeneous recording of data (e.g. number of bodies providing extracurricular activity, number of benefiting children per target group).

Further mapping of local needs and the incorporation of geographical criteria into the design and prioritisation of measures can contribute to:

- the fair allocation of resources,
- the targeted tackling of territorial inequalities,
- prevention and early intervention in areas with increased risks of social exclusion.

The use of geographically differentiated indicators allows comparisons between areas and assessment of the effectiveness of interventions at local level, strengthening coherence between national planning and local implementation.

8. GOOD PRACTICE: DEVELOPMENT AND IMPLEMENTATION OF AN INTEGRATED INFORMATION SYSTEM FOR MONITORING THE EUROPEAN CHILD GUARANTEE

The implementation of the ECG in Greece presupposes the systematic monitoring and evaluation of a complex set of policy measures, which are implemented at multiple levels of governance – central, regional and local – and by a large number of stakeholders. This multi-level structure necessitates the existence of effective mechanisms for the collection, organisation and use of data in a consistent, comparable and reliable manner.

In Greece, the main challenge that this good practice was called upon to address concerned, on the one hand, the absence of a unified, institutionalised mechanism for collecting, monitoring and analysing data on child poverty and social exclusion, and, on the other hand, the intense fragmentation of data production among Ministries, Regions, Municipalities and other stakeholders. The available data were produced with different periodicity, form and level of quality, without a common reference framework or harmonised indicators. This situation hindered both the reliable monitoring of the implementation of the NAP and the extraction of comparable statistical data and indicators, as required within the framework of the country's obligations towards the European Commission.

At the same time, the absence of harmonised and, to a large extent, automated procedures entailed a significant administrative burden, especially for Regions and Municipalities, while it limited the possibility of systematic documenting, monitoring and timely readjusting policies for addressing child poverty and social exclusion. Before the development of the IS, monitoring was mainly based on fragmented administrative data, reports and ad hoc data collections, as well as on statistical data from national and European sources, such as ELSTAT and EUROSTAT. Although useful, these data did not allow their systematic connection with the implementation of specific NAP actions or the comprehensive recording of policy results at regional and local level.

Within this framework, the National Centre for Social Solidarity (EKKA), under its institutional role as National Coordinator for the ECG, proceeded in 2023 with the development of an integrated Information System. The aim of the IS is the unified recording and systematic monitoring of the implementation of the NAP policy measures, their evaluation, as well as the more complete recording of the extent and characteristics of child poverty and social exclusion in the country. The system was designed so as to record, in a harmonised manner, structures, services and beneficiaries at all levels of governance, supporting the production of comparable statistical analyses and indicators, while at the same time strengthening coordination and transparency through the participation of all stakeholders, public authorities and civil society organisations.

The pilot implementation of the IS started at the end of August 2024 in cooperation with fourteen (14) representatives of the co-competent Ministries. In January 2025, the system was put into broader implementation, initially with the participation of the thirteen (13) Regions and then the seven (7) Health Regions of the country, marking a critical stage of operational testing and adjustment. The process was implemented gradually and methodically, with emphasis on users' training, continuous technical support and the adaptation of the IS functions based on the feedback of the stakeholders. In this context, four specialised teleconferences entitled "Users' Training of the ECG Information System" were held.

The authorised users of the IS enter quantitative and qualitative data relating to policy measures, structures and services addressed to the target groups of the ECG, the number of beneficiary children per target group, as well as barriers to access to the services provided. In this way, the IS contributes decisively to the creation of a reliable database for the evidence-based monitoring and evaluation of policies.

The design of the IS was based on extensive and structured consultation and on the operation of working groups with the participation of fourteen (14) Ministries, Regions, Municipalities and independent bodies. Through this process, a detailed Implementation Study was prepared and the technical specifications of the system were defined, with the aim of covering the monitoring needs of the ECG at all levels of governance.

The IS was developed in four distinct but interrelated subsystems:

Subsystem I: recording and monitoring of policy measures implemented by the co-competent Ministries within the framework of the NAP,

Subsystem II: mapping of structures, services and beneficiary children at regional and local level,

Subsystem III: automated input of data through csv-type files from national and administrative sources (such as myschool, the BI- Forms of the Ministry of Health and the data of EETAA), with emphasis on the gradual reduction of the administrative burden and on ensuring the quality and comparability of data,

Subsystem IV: integrated Business Intelligence system for calculating indicators, producing comparable statistical analyses and extracting results.

The quantitative indicators of the use of the system, as presented in the table below, reflect the scope and gradual integration of the IS into the daily administrative practice of the stakeholders, confirming its contribution to strengthening the monitoring and evaluation of the implementation of the ECG in Greece.

Level of Governance	Number of bodies	Number of regular IS users	Number of alternate IS users	Percentage (%) of Representation
Central Level	14 Ministries	14 regular users	14 alternate users	100%
Regional level	13 Regions ⁵⁸	13 regular users	13 alternate users	100%
Regional level	7 Health Regions ⁵⁹	7 regular users	7 alternate users	100%
Local level	Municipal Social Services ⁶⁰	261 regular users	261 alternate users	100%
Local level	215 Community Centres ⁶¹ with their Branches	215 regular users	215 alternate users	83.3%
TOTAL USERS	1,020 REGULAR AND ALTERNATE			

The development of the IS was funded by the State Budget, ensuring its multi-level implementation, as well as the coverage of the basic operational and technical requirements of the project. For the systematic processing, analysis and utilisation of the IS data, the immediate commencement of work by eight (8) experts is foreseen, following a relevant request by the National Centre for Social Solidarity (EKKA). The team will consist of one Project Manager, two IT specialists, two statisticians, one Economist, one Administrative Officer and one Expert in social policy / social inclusion and is included in the framework of the action "Systemic Actions within the framework of the "Child Guarantee" Initiative" (IIS Code 6010660), which is implemented through the "Human Resources & Social Cohesion 2021–2027" Program. The contribution of this team is considered necessary for strengthening the statistical and analytical utilisation of the IS data, the production of reliable indicators and reports, as well as for the substantive support of the monitoring and evaluation of the implementation of the NAP.

The IS aims to support and strengthen the mission of the National Coordinator for the ECG, through the systematic, harmonised and consistent recording and monitoring of policy measures, as well as of data relating to child poverty and social exclusion at all levels of governance. A central objective of the IS is to ensure the meaningful participation of all competent national, regional and local authorities, as well as legal entities of public and private law and civil society actors.

The system aims at creating a unified, permanent and systematic framework for data recording, which supports quantitative and statistical documentation, continuous comparative analysis and policy evaluation. At the same time, actions for the further upgrading of the IS are underway, including the integration of qualitative evaluation indicators, the use of artificial intelligence tools, as well as the strengthening of its interoperability with other information systems.

The interoperability of the IS with existing information systems that manage data concerning children in poverty and/or social exclusion is expected to contribute substantially to addressing information fragmentation, through the creation of a unified, secure and institutionally organised data exchange

⁵⁸They constitute the total in Greece

⁵⁹They constitute the total in Greece

⁶⁰The number of Municipalities in Greece is 332. The majority of them have a Social Service.

⁶¹Out of a total of 250 Community Centres

mechanism. This mechanism will allow immediate, automated and bidirectional communication between the stakeholders, ensuring continuous information flow, reducing overlaps and improving the quality, completeness and timeliness of data. The objective is the gradual replacement of the existing fragmented data management, which is based on scattered and non- interoperable systems, by a coherent and reliable information environment that enhances evidence-based analysis and decision-making.

Compared to the previous situation, the implementation of the IS contributes to the creation of a unified and institutionally organised framework for data collection and management, to the improvement of the comparability and quality of data, as well as to the reduction of the administrative burden through the gradual automated extraction of data from existing administrative sources. At the same time, the capacity for systematic monitoring of the implementation of the NAP and for documenting the results of policies addressing child poverty and social exclusion is substantially strengthened.

This good practice constitutes a realistic and transferable example for other Member States of the EU, as it highlights how the role of the National Coordinator can be effectively supported through an integrated information system. The IS links in a gradual, institutionally consistent and operationally applicable manner policies, data and monitoring mechanisms across all levels of governance, enhancing transparency, accountability and evidence-based policymaking at both national and European level.

At this point, it is worth noting that within the framework of the Action " *Systemic Actions within the Child Guarantee Initiative* " (24PROC016009621/17-12-2024), the project " *Mapping of the social protection system in Greece with a focus on child protection* " is being implemented. The project aims at the systematic mapping, evaluation and strengthening of the existing child protection framework, with the objective of improving the effectiveness, coherence and accessibility of the services provided. In particular, the project includes the following main actions:

- (a) mapping of the national social care system with emphasis on child protection services,
- (b) preparation of a comprehensive study for strengthening child protection mechanisms, preventing and addressing child abuse and violence, as well as empowering the family through targeted institutional and operational interventions,
- (c) identification of the legal and operational status of bodies operating Social Care Units, in accordance with the current institutional framework, with the aim of exploring the possibility of transforming them into open and/or short-term accommodation services, and
- (d) processing and preparation for the institutional establishment of the existing protocols developed within the framework of the pilot implementation of the Child Guarantee.

According to the service contract signed on 6.11.2025, the submission of the following deliverables is foreseen:

- D1.1: Mapping of the national social protection system with emphasis on child protection
 - D1.2: Development of a roadmap for the interconnection and cooperation of child protection structures, including the recording of overlaps, synergies, contradictions and gaps in the services provided
 - D2.1: Conduct of a nationwide sample survey
 - D2.2 – P2.3: Preparation of a study for strengthening child protection mechanisms and formulation of a proposal for system reorganisation, based on the findings of deliverables P1.1, P1.2 and P2.1
 - D3.1: Overall mapping of Child Protection and Care Units and formulation of proposals regarding their potential transformation
 - D4.1: Processing of protocols and preparation of draft legislation for their institutional establishment
- The duration of the contract implementation amount to nine (9) months.

9. CONCLUSIONS

This second biennial progress report captures the evolution of the implementation of the ECG in Greece, presenting the main socio-economic trends, the progress in the implementation of the relevant policy measures and the institutional developments associated with the implementation of the NAP.

Overall, progress has been recorded in several key areas aligned with the objectives of the ECG. In particular, positive developments are observed in the areas of early childhood education and healthcare, with performance in some cases exceeding the European Union average. At the same time, available data show a reduction in the percentage of children living in households with very low work intensity, as well as in those at risk of poverty or social exclusion. These developments are linked, *inter alia*, to the implementation of social policy reforms and the strengthening of social transfers.

Notwithstanding these positive development, significant challenges remain that affect the living conditions of children and their families. These include pressure on real household disposable income, access to adequate and quality nutrition, as well as issues related to housing conditions. These challenges are largely linked to inflationary pressures of recent years and the sustained increase in the cost of living, which disproportionately impact households with children.

Furthermore, available data highlight the existence of regional disparities in social conditions and levels of child poverty. In certain rural, island and mountainous areas, as well as in regions where higher levels of multidimensional child poverty are recorded, the further development of integrated and targeted local action plans remains a key requirement.

Policy implementation aimed at reducing child poverty takes place within a framework of fiscal constraints, which affect the scale and scope of available interventions. In this context, the effective targeting of social policies and the optimal use of available resources become particularly important. At the same time, strengthening market monitoring mechanisms and the implementation of competition policy, especially in markets for basic goods, may contribute to mitigating pressures that disproportionately affect lower-income households.

Under these conditions, the effective use of available European funding instruments constitutes a key enabling factor for supporting the implementation of the ECG. Targeted allocation of these resources can contribute to strengthening interventions in regions where higher levels of child poverty are recorded, as well as to the further development of integrated local action plans.

At the same time, the continuation and further development of measures facilitating children's access to basic services – such as education, healthcare, adequate nutrition and housing – remains a key priority. In this context, particular importance is attached to ensuring sufficient resources for the implementation of interventions addressed to vulnerable households with children, as well as to the systematic monitoring of the effectiveness of the measures implemented.

A particularly important development is also the gradual development of the Information System for monitoring the implementation of the ECG in Greece. The creation of a unified mechanism for data collection and analysis contributes to improving the availability and comparability of information, as well as to strengthening evidence-based policymaking. At the same time, the progressive interconnection of information systems and the strengthening of cooperation among the stakeholders can contribute to reducing administrative burden and improving the effectiveness of monitoring processes.

In conclusion, the implementation of the European Child Guarantee in Greece is evolving within a dynamic socio-economic environment, in which child poverty and the risk of social exclusion continue to constitute significant social policy challenges. The continuation of the systematic monitoring of relevant indicators, the strengthening of data collection mechanisms and the maintenance of cooperation among the

involved stakeholders constitute key elements for the further implementation of the European Child Guarantee in the coming years.

The National Coordinator
of the Child Guarantee

Dr. Artemis Anagnostou- Dedouli
President of E.K.K.A.

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ACRONYMS AND ABBREVIATIONS

AI - Artificial Intelligence
AMKA - Social Security Number
AROP - At risk of poverty
AROE - At-Risk-of-Poverty or Social Exclusion Rate
art. – Article
ASOA - Individual Family Rehabilitation Plan
BI - Business Intelligence
C.A.F.T.A.A.S - Controlled Access Facilities for Temporary Accommodation of Asylum Seekers
C.C.A.C - Closed Controlled Access Centres
DYEP - Refugee Reception and Education Structures
DYPA - Public Employment Service
ECG - European Child Guarantee
EETAA - Hellenic Agency for Local Development and Local Government
EKKA - National Centre for Social Solidarity
ELSTAT - Hellenic Statistical Authority
EPAS – Apprenticeship Vocational School
EPPEN - Newborn Screening Program
ERDF - European Regional Development Fund
E.S.A.N.Y - National Council for Fostering and Adoption
ESF+ - European Social Fund+
ESY - National Health System
EU - European Union
EUROSTAT - The statistical office of the European Union
EU-SILC - European Union Statistics on Income and Living Conditions
EYSEKT - European Social Fund Coordination and Monitoring Authority
IEP - Institute of Educational Policy
IIS – Integrated Information System (OPS)
I.S. - Information System
ISC- Interdisciplinary Support Committee
JMD - Joint Ministerial Decision
KDAP - Creative Activity Centres
KDAPameA - Creative Activity Centres for Children with Disabilities
KED - Closed Controlled Structures
KEDASY - Centre for Interdisciplinary Assessment, Counseling & Support
KD-HF - Day Care Centres for Persons with Disabilities
KEPE - Centre of Planning and Economic Research
KTEO - Vehicle Technical Inspection Centre
L. - Law
MD - Ministerial Decision
Mi.D.A.Te. - Register of Beneficiaries of Exemption from Mobile Telephony Fees
MinSCFA - Ministry of Social Cohesion & Family Affairs
MoERAS- Ministry of Education, Religious Affairs & Sports
MoMA - Ministry of Immigration & Asylum
NAP - National Action Plan
NECP - National Energy and Climate Plan
NERM - National Emergency Response Mechanism
NGO – Non-Governmental Organization
No. - Number
NSRF - National Strategic Reference Framework
OPEKA - Organization for Welfare Benefits and Social Solidarity
PAAYPE - Temporary Foreigner Insurance and Healthcare Number
PD - Presidential Decree
PFPs - Professional Foster Parents

RFRE - Reception Facilities for the Education of Refugee Children
RIC - Reception and Identification Centre
RIS - Reception and Identification Service
SYD -Supported Living Accommodation
UN - United Nations Organization
UNICEF- United Nations International Children's Emergency Fund
ZEP - Educational Priority Zones