

VISIT REPORT

GREECE

January 2025



CPT

EUROPEAN COMMITTEE
FOR THE PREVENTION OF
TORTURE AND INHUMAN OR
DEGRADING TREATMENT
OR PUNISHMENT

PERIODIC VISIT
20 - 31 January 2025

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KEY OBSERVATIONS

PRIORITY AND LONG-STANDING ISSUES

■ Prison

CONDITIONS OF DETENTION

- Eliminate overcrowding in prisons inter alia through a review of criminal policy and legislation and sentencing practices, with an emphasis on applying the full range of non-custodial sanctions and measures.
- Take measures to improve the daily life of all prisoners, by ensuring that prisons are maintained in a decent state of repair and hygiene and by expanding the range of purposeful activities on offer.

PRISON STAFF – Take proactive steps to remedy the severe shortages of prison staff, especially at Korydallos I Men’s Prison and Chania Prison, along with a comprehensive plan for providing all staff with proper initial and ongoing training and support.

ILL-TREATMENT – Implement an effective national strategy to prevent inter-prisoner violence and intimidation, which must include staff regaining control of prison wings, separating stronger groups of prisoners, and significantly increasing staffing levels.

SPECIAL CARE – Provide the necessary support for indigent and other categories of prisoners in a vulnerable situation, including women, persons with disabilities and older prisoners, to ensure that their specific needs are met.

HEALTHCARE – Address the structural deficiencies in healthcare provision, including mental healthcare, notably as concerns the severe shortages of healthcare staff and the absence of integrated healthcare management.

■ Police

ILL-TREATMENT (PREVENTION) – Pursue effective action to foster a professional police culture, through ongoing training and promoting the application of investigative interviewing techniques, the systematic electronic recording of all police interviews, and greater police accountability.

THE CPT AND GREECE

Greece ratified the ECPT in 1991, and the Committee’s first visit took place in 1993.

Since ratification, the CPT has carried out 21 country visits to Greece – 8 periodic and 13 ad hoc – including 178 visits to police establishments, 81 to prisons, 17 to psychiatric institutions, 5 port authorities, 2 to military detention facilities, and 123 to border and immigration detention facilities.

All the visit reports have been published. Greece did not accept the automatic publication of the visit reports.

EXECUTIVE SUMMARY

During its January 2025 periodic visit to Greece, the CPT examined the treatment and conditions of detention of persons deprived of their liberty in Greek prisons and by the Hellenic Police. The delegation visited nine prison establishments, including both women's prisons, and several police establishments across various regions. The visit aimed to assess progress on recommendations made following the CPT's previous visits in [2019](#) and [2021](#).

Cooperation in terms of facilitating the visit was generally excellent. Nevertheless, the CPT found that long-standing systemic and structural problems, already identified in its 2011 public statement on Greece and in the five subsequent visit reports focussed on prison matters, continue to undermine the effective functioning of the Greek prison system. The findings of the 2025 visit confirm once again that the chronic issues of overcrowding and severe staff shortages persist, compounded by other deficiencies in the prisons visited. While acknowledging some steps taken under the third Strategic Plan for prison policy (2024-2026), these measures appear largely piecemeal and reactive. The reform and recovery of the Greek prison system require a much more strategic approach with decisive action and substantial investment, including a review of the criminal policy and legislation and sentencing practices.

In light of the on-going procedure under Article 10, paragraph 2, of the CPT Convention – which remains open – and given that far too many prisoners in Greece continue to be held in conditions which represent an affront to human dignity, the CPT held high-level talks at the Prime Ministers' Office on 19 June 2025, prior to the adoption of this report. During the meeting, the Greek authorities acknowledged the long-standing structural problems afflicting the prison system as identified by the CPT. Moreover, in referencing the Committee's key role in the reform process, the Greek authorities presented a fully costed, multi-sector, five-year reform program for the recovery of the prison system under the coordination and oversight of the Office of the Prime Minister. This new Action Plan will run from 2025 to 2030. In the CPT's view, this new plan represents a significant and promising step forward in both cooperation and strategic planning to tackle the chronic crisis in prisons. Its effective implementation, alongside urgent measures to improve daily prison life, must be vigorously pursued as a long-term national priority.

Prison establishments

As of January 2025, Greece held 11 527 prisoners for a capacity of 10 763 places, with 24 of 35 prison facilities overcrowded and 16 operating at or above 130% occupancy. By July 2025, the prison population had risen to 12 449 and was set to increase further. Overcrowding has been a constant feature of the Greek prison system for many years and requires a coherent strategy to reduce occupancy rates, covering both admissions to and release from prison, to ensure that imprisonment really is a measure of last resort. Greater use should be made of non-custodial measures before sentencing (including alternatives to pre-trial detention), as well as alternatives to imprisonment at the sentencing and post-sentencing stages (including suspended sentences and conditional release). The policy of very long sentences and their impact on overcrowding in prisons should also be reviewed. Judges and prosecutors should be provided with appropriate training on the application of non-custodial measures.

The central pillar of the Greek authorities' strategy to resolve overcrowding and to improve material conditions in prisons continues to be the building of new establishments, with a €268 million programme to build eight new prisons and expand two existing ones, with the aim of increasing the capacity of the prison system by almost 4 000 places by 2030. The CPT requests further details on the staffing levels envisaged for these facilities.

The situation of adult men in prison

Almost no complaints of physical ill-treatment by staff were received during the visit. This was hardly surprising as, in all establishments visited, staff were not circulating in the wings and therefore had little contact with prisoners. Exceptions were Nafplio Prison, where the delegation received a few allegations of physical ill-treatment, and Chalkida Prison, where a couple of incidents reported to the delegation indicated that staff lacked training to de-escalate challenging situations. Staff should be clearly instructed that physical ill-treatment and excessive use of force against inmates are unlawful and be properly trained in de-escalation techniques and managing challenging prisoners.

Inter-prisoner violence remains a serious issue, notably driven by overcrowding, chronic understaffing and the influence exerted by stronger groups of prisoners. This was notably evident in the prisons of Chania, Korydallos I, Malandrino and Nafplio. An effective national strategy to prevent inter-prisoner violence and intimidation is required, which should include staff regaining control of prison wings, separating stronger groups of prisoners, and significantly increasing staffing levels.

Conditions of detention continue to fall far short of the provisions of the Greek Penitentiary Code, which are simply no longer adhered to. In far too many instances, persons in prison are left to fester in overcrowded and totally inappropriate conditions which may be considered as amounting to inhuman and degrading treatment. Urgent steps are needed to improve the living conditions by significantly reducing the number of persons held in each cell or dormitory in Greek prisons, so that all types of multiple-occupancy accommodation offer at least 4 m² of living space per person. More generally, significant investment is required to maintain the cells and common areas in a decent state of repair and cleanliness, improve hygiene, and provide adequate and nutritious food. All prisoners must be provided with a minimum standard of living.

In terms of regime, despite some educational and vocational programmes, purposeful activities and work remain wholly insufficient for the number of prisoners and should be substantially expanded.

None of the prisons addressed the specific needs of prisoners with disabilities and older persons, nor were they appropriately designed or equipped to accommodate them. At Nafplio and Patras Prisons, several persons with physical disabilities were entirely dependent on other prisoners, including for their personal hygiene and care or mobility. Structural adaptations are required to improve accessibility, access to reasonable accommodation, and support or assistance to meet their specific needs.

Segregation units were mainly used for “operational reasons” such as accommodating vulnerable prisoners or persons in medical isolation, on hunger strike, or those self-harming or being intimidated in the ordinary wings. They were rarely used for the disciplinary punishment of solitary confinement. All prisoners placed in segregation or isolation, for whatever reason, should be offered at least one hour of outdoor exercise every day. All cells should be equipped with call bells and all units containing segregation or isolation cells should always be supervised by custodial staff when occupied. Further, every placement of prisoners in segregation or isolation should immediately be brought to the attention of the healthcare service. All decisions to separate prisoners for their own protection or for “operational” reasons should be properly reasoned and their placement be documented in a special register and regularly reviewed.

Staffing levels were inadequate in all the prisons visited and they were dangerously and unprofessionally low at Korydallos I and Chania Prisons. This allowed stronger groups of prisoners to operate with impunity. Further, low staffing levels make it nearly impossible to provide an acceptable regime for prisoners. Specialist staff such as social workers, psychologists, occupational therapists and teachers were also lacking. The authorities should continue their efforts in recruiting prison staff across all categories, including security personnel, with the aim of improving the staff-prisoner ratio. The working conditions of prison staff in Greece should also be improved, notably by phasing out the widespread recourse to double shifts and unpaid overtime. Moreover, a comprehensive plan for staff training should be developed, from the outset of the employment, including on intercultural communication, to enhance staff performance and motivation.

Structural deficiencies in healthcare within Greek prisons remained evident across all establishments visited, particularly at Chania Prison. These include severe shortages of healthcare staff and the continued absence of integrated healthcare management. These systemic deficiencies exacerbate many of the other longstanding shortcomings observed by the delegation, including limited access to a doctor, inadequate provision of healthcare services, unsafe preparing and dispensing of medication, inadequate medical screening upon admission, failure to properly record injuries, insufficient mental healthcare, and a high prevalence of untreated substance dependence. Addressing these challenges will require fundamental, systemic reform and substantial investment, notably in healthcare staff. An external assessment of healthcare needs and a review of prison healthcare services should be carried out, the findings and conclusions of which should guide a comprehensive reform of prison healthcare provision.

The CPT also makes recommendations on prisoners' contact with the outside world, disciplinary measures, information on rights, and complaints procedures.

The situation of adult women in prison

The CPT considers that non-custodial alternatives to imprisonment and community-based responses for women who do not present a high risk remain underused. A targeted strategy, including legislative reform, should be put in place to reduce the number of detained women, especially for those in pre-trial detention, for non-violent offences or non-payment of fines, and for short sentences. The specific situation of women in prison should also be addressed more effectively, which requires gender-sensitive and trauma-informed approaches in the management and care of female prisoners.

At Eleonas Prison, several women, especially those who had self-harmed, alleged physical ill-treatment by male custodial staff. A Roma woman notably alleged that she was handcuffed by her injured arm to the bars of the gate at the entrance of E Wing for several hours, punched in the face and that alcohol was poured on her wound, causing severe pain and distress. Such treatment could be considered as inhuman and degrading and requires a clear message that all forms of ill-treatment are unlawful and will be sanctioned, supported by adequate staffing and staff training.

Material conditions at Korydallos II and Eleonas Women's Prisons varied from acceptable to extremely poor. Most of the women were accommodated in large-capacity dormitories, which should be progressively phased out in favour of smaller living units. At Korydallos II Prison, overcrowding must be addressed and a rolling programme of refurbishment and maintenance, including regular disinfection, be put in place. At Eleonas Prison, urgent steps should be taken to repair the roof and the central heating system, and all women should be granted a minimum standard of basic living conditions to meet their specific needs: adequate food, potable water, sufficient heating and basic personal hygiene and cleaning products, such as sanitary pads, free of charge.

Although out-of-cell time and outdoor exercise was adequate, the design of most outdoor exercise yards should be reviewed to make them less bleak. Further, work, education and organised activities are insufficient, particularly for women on remand. The authorities should pursue their efforts to expand the range of purposeful activities, along with support for social reintegration.

The delegation met different vulnerable categories of prisoners. Women in segregation at Korydallos II Prison should not be held in conditions akin to solitary confinement. Pregnant women (from the seventh month of pregnancy onwards) and patients accommodated in the medical unit should have access to at least one hour of outdoor exercise every day, provided there are no medical contraindications. The mother-and-child unit, although bright and pleasantly decorated, consisted of a cell-type environment which is inappropriate for mothers caring for their babies and infants and does not sufficiently consider the best interests of the child. Moreover, gender-responsive, community-based alternatives to detention should be developed and applied in practice to ensure that pregnant women and mothers of young children are only imprisoned as a last resort. Both the mother-and-child unit and the female juvenile unit (which did not accommodate any minors at the time of the visit) required refurbishment and better access to activities.

Some progress was noted in the treatment of transgender women at Korydallos II Prison, including guidance for staff on the treatment of LGBTQI+ prisoners and the possibility for them to participate in some organised activities. Nevertheless, further steps are needed to improve material conditions, access to work, vocational training, and sports. All vulnerable categories of prisoners should also be provided with additional psychosocial support services.

The chronic shortage of staffing resources was also evident in the two female prisons visited, with numerous vacancies among custodial and administrative staff. All staff should receive initial and ongoing training.

In addition to the low healthcare staffing levels in the two women's prisons, the delegation received numerous complaints concerning poor access to a doctor, inadequate healthcare provision and medication shortages. The CPT found that the deaths of two women and the suicide of a third woman are illustrative of the poor healthcare provision, which should be reviewed. Such a review will require a 24/7 presence of healthcare staff and improved medical screening upon arrival, to better address the specific healthcare needs of women and identify their gender-specific needs and vulnerabilities. The lack of psychiatric care for female prisoners was particularly alarming. Medical confidentiality, suicide prevention, and support for women with drug dependence should also be enhanced.

In addition, acts of self-harm should no longer be subjected to disciplinary punishment and the use of means of restraint on women following acts of self-harm should be ended. Steps should also be taken to review the procedures and practices for carrying out strip-searches of female prisoners, and to improve contact with families.

Police establishments

The large majority of detained persons indicated that they were treated correctly by the police. However, the delegation once again received a number of credible allegations of physical ill-treatment of persons deprived of their liberty by the Hellenic Police, consisting of slaps, punches and kicks as well as the banging of the head against the wall. The purpose of the ill-treatment was apparently to coerce suspects to admit to certain offences or punish behaviour. It also received many complaints of excessively tight and prolonged handcuffing and verbal abuse.

A fundamental change in police culture within the ranks of the Hellenic Police is needed, which requires a shift in the attitude, behaviours, values and norms. The aim is to foster a professional policing culture that values evidence, respect for rights and ethical conduct, in particular through regular ongoing training. All police interviews should be conducted in a professional and non-coercive manner, using investigative interviewing techniques aligned with the Méndez Principles. Further, systematic electronic recording (preferably video and, if not possible, audio) of all police interviews should be introduced. Greater police accountability, clear reporting procedures and "whistle-blower" protective measures should also be put in place.

As regards the procedural safeguards against ill-treatment, the delegation received many complaints from persons who were – or had recently been – in police custody that they did not have the possibility to notify a family member or have access to a lawyer from the outset of their detention. Steps need to be taken to clarify the legislative provisions on these two rights by extending their application to criminal suspects as from the very outset of deprivation of liberty and ensure that these rights become fully effective in practice as from the moment a person is obliged to remain with the police. Swift and effective access to a doctor should also be ensured in practice.

Material conditions varied widely. While efforts undertaken to renovate detention areas in several police stations in the Attica region are welcome and the conditions of detention had effectively improved, they remained inadequate for holding persons beyond 24 hours in all other police stations visited. The material conditions were particularly poor and unhygienic at Chalkida Police Station. The CPT also recalls its long-standing position that foreign nationals held under immigration legislation should not be held for extended periods in police stations or transfer centres but be transferred promptly to dedicated pre-removal detention facilities. All persons deprived of their liberty by the police should be held in decent conditions of detention.

The CPT examined several recent deaths in police custody, several of which could have been prevented, in the Committee's view. The death of a Pakistani national in September 2024 at Agios Panteleimonas Police Station raises serious questions due to documented reports of extensive bruising on the body. The CPT requested a copy of the autopsy report and the findings of the administrative and criminal investigations in the case. In addition, all police stations should have a written, comprehensive protocol for managing persons with specific vulnerabilities or at risk in custody and steps should be taken to improve their care.

Conditions during prisoner transport remained unchanged since 2019 and 2021. The small, secured compartments in the transport vehicles continued to hold four persons in 1.2 m², even for journeys lasting several hours. Transfers of prisoners should always be carried out in a humane, secure and safe manner. Prisoners should be transported in vehicles suitably designed and fit for that purpose, meeting safety requirements. In particular, all vehicles used for this purpose should be regularly maintained and be equipped with safety belts and padded seats, which allow prisoners to be seated in the direction of travel. Outdated vehicles should be replaced.

I. INTRODUCTION

A. The visit, the report and follow-up

1. In pursuance of Article 7 of the European Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment (hereinafter referred to as “the Convention”), a delegation of the CPT carried out a periodic visit to Greece from 20 to 31 January 2025. It was the Committee’s 21st visit to the country.¹

2. The visit was carried out by the following members of the CPT:

- Karin Rowhani-Wimmer (Head of delegation)
- Eleana Fitidou
- Răzvan Horațiu Radu
- Elsa Bára Traustadóttir
- Gunda Wössner

They were supported by Hugh Chetwynd, Executive Secretary of the CPT, Aikaterini Lazana and Sebastian Rietz of the CPT Secretariat.

In addition, they were assisted by four experts: Pétur Hauksson, psychiatrist, former Head of the Psychiatric Department at Reykjalundur Rehabilitation Centre (Iceland), Martin Lomas, Deputy Chief Inspector of Prisons in England and Wales (United Kingdom), Dino Vukanovic, medical doctor at Gradisca Pre-removal detention centre (CPR) (Italy), and Olivera Vulić, psychiatrist, former Chief of the Centre for Mental Health in Podgorica (Montenegro).

3. The report on the visit was adopted by the CPT at its 117th meeting, held from 30 June to 4 July 2025, and transmitted to the authorities of Greece on 25 July 2025. The various recommendations, comments and requests for information made by the CPT are set out in bold type in the present report. The CPT requests that the authorities of Greece provide within six months a response containing a full account of action taken by them to implement the Committee’s recommendations, along with replies to the comments and requests for information formulated in this report. As regards the recommendation in paragraph 62, the CPT requests that a response be provided within three months.

B. Consultations held by the delegation and cooperation encountered

4. In the course of the visit, the delegation held consultations with Michalis Chrisochoidis, Minister of Citizen Protection and Andreas Nikolakopoulos, Deputy Minister of Citizen Protection. It also engaged in extensive discussions with Panayotis Stathis, Secretary General for Public Order and Aristos Perris, Secretary General for Anti-Crime Policy, as well as senior officials from the Ministry of Citizen Protection, the Hellenic Police, and the Ministry of Health.

Further, the delegation met Andreas Pottakis, the Greek Ombudsman, and staff of the National Preventive Mechanism of his Office, members and staff of the Greek National Commission for Human Rights, as well as with professionals active in areas of concern to the CPT.

5. With one exception, the CPT delegation received generally excellent cooperation from the Greek authorities at all levels during the visit. It mostly enjoyed prompt access to the places of detention visited, was able to interview individuals in private, and was provided with the necessary information to carry out its mandate.

1. The visit reports and the responses of the Greek authorities on all previous visits (seven periodic and 13 ad hoc visits) are available on the CPT website: <https://www.coe.int/en/web/cpt>.

The Committee wishes to express its appreciation for the assistance provided to its delegation by the management and staff of the establishments visited as well as for the support offered by the contact persons appointed by the Ministry of Citizens Protection and the Hellenic Police.

The exception relates to the fact that, despite several requests, the delegation was not provided with a copy of the autopsy report concerning the suspicious death of a 37-year-old Pakistani national, whose body was covered with bruises, on 21 September 2024 during his custody at Agios Panteleimonas Police Station (see paragraph 257).

||| The CPT trusts that the Greek authorities will ensure that its future visiting delegations are provided with all necessary documentation, including autopsy reports, required for fulfilling its mandate.

6. Moreover, the CPT must once again recall that the principle of cooperation between Parties to the Convention and the Committee is not limited to steps taken to facilitate the task of its visiting delegations. It also requires concrete and decisive action to implement the Committee's recommendations and address identified shortcomings.

In this regard, the CPT remains seriously concerned that long-standing systemic and structural problems, outlined in its 2011 public statement on Greece and reiterated in its reports following visits in 2015, 2019, 2021, and 2022, continue to undermine the effective functioning of the Greek prison system.² The responses of the Greek authorities to the previous visit reports have not demonstrated sufficient progress in effectively addressing these deficiencies. The findings of the January 2025 visit confirm once again that the two overarching problems of overcrowding and chronic staff shortages persist and that they are compounded by various additional shortcomings in the prisons visited.

7. The CPT acknowledges recent steps taken by the Ministry of Citizens Protection to reform the prison system as set out in the third Strategic Plan for prison policy (2024-2026) under the General Secretariat for Anti-Crime Policy. These include constructing new prisons to replace outdated facilities, allocating funding for infrastructure improvements, and introducing legislative reforms to facilitate transfers to agricultural prisons, expanding alternatives to incarceration (such as electronic monitoring and community service), providing for a legal remedy against poor conditions of detention, pursuing the recruitment of more custodial staff, extending educational and vocational training for prisoners, and seeking to improve the provision of healthcare.

While these policy and legislative initiatives represent a step in the right direction, they often appear to be piecemeal or reactive short-term adjustments rather than forming part of a coherent long-term strategy. The reform and recovery of the Greek prison system requires bolder action and the allocation of far greater resources, especially in light of the criminal justice reforms promoted by the Greek Government since July 2019, which are marked by further criminalisation of offences, higher penalties and increased length of sentences. These political choices have a direct and long-term impact on the number of persons entering and leaving Greek prisons as well as on overcrowding and conditions of detention.

8. The CPT has repeatedly emphasised that the continued failure to address the systemic and structural problems of the Greek prison system, notably by tackling the two overarching problems of persistent prison overcrowding and chronic staff shortages, will undermine any potential progress or steps forward that the authorities might take. Without decisive, sustained reforms, including a review of the criminal policy and legislation and sentencing practices, with an emphasis placed on applying the full range of non-custodial sanctions and measures, reducing the length of prison sentences, and making greater use of suspension and conditional release measures, the situation is set to continue deteriorating.

2. See [CPT/Inf \(2011\)10](#), [CPT/Inf \(2016\) 4](#), [CPT/Inf \(2020\) 15](#), [CPT/Inf \(2022\) 16](#) and [CPT/Inf \(2023\) 24](#).

9. In view of the lack of tangible progress since 2011 to address the Committee's serious concerns under Article 3 of the European Convention on Human Rights, the CPT decided in 2021 to set in motion the procedure under Article 10, paragraph 2, of the Convention.³ It subsequently engaged in high-level talks with the Greek authorities at the ministerial level in 2022 and 2023 following each visit, encouraging the Greek authorities to take decisive action to address the systemic problems and promoting cooperation with the Council of Europe to support the reform of the prison system.

To date, there remains insufficient evidence to conclude that the conditions of detention for persons detained in Greek prisons have effectively and significantly improved. On the contrary, the situation has steadily deteriorated, with overcrowding reaching record levels, surpassing 12 000 inmates once again in May 2025, and reaching 12 449 in July 2025.⁴ The Committee considers that, with the current criminal and sentencing policies being pursued, this trend is unlikely to reverse. According to the Greek authorities, it is estimated that the prison population could reach 14 500 by 2030. Similarly, efforts to address staffing shortages, while welcome, remain totally insufficient to meet the systemic needs of the prison system. Regrettably, far too many prisoners in Greece continue to be held in conditions which represent an affront to their human dignity and which, in many cases, could amount to inhuman and degrading treatment.⁵

10. For this reason, the CPT engaged in high-level talks at the Prime Minister's Office on 19 June 2025,⁶ prior to the adoption of the report, with a view to convey the clear message that a far more strategic approach and substantial investment was required to effectively overcome the chronic crisis in prisons. This requires that the reform of the Greek prison system is vigorously pursued as a long-term national priority, alongside urgent measures to improve the daily life of prisoners and their conditions of detention. The Committee also requested updated information on the measures being taken by the Government to tackle the systemic problems of overcrowding and understaffing in prisons and to implement CPT recommendations.

The discussions were chaired by Akis Skertsos, Minister of State at the Office of the Prime Minister, responsible for coordinating government policies, who emphasised that the importance of prison reform was now a priority for the whole government given its crucial role in the effectiveness of the criminal justice system. At the meeting, after acknowledging the long-standing structural problems identified by the CPT and the Committee's key role in the reform process, the Greek authorities set out their ambition to develop a modern prison system.

11. More specifically, the political leadership of the Ministry of Citizen Protection presented a comprehensive and fully costed five-year reform programme under the coordination and monthly oversight of the Office of the Prime Minister for the recovery of the prison system. The new Action Plan 2025 – 2030 notably foresees targeted interventions in the areas of managing overcrowding, improving living conditions and the functioning of prisons, addressing understaffing and the training of staff, upgrading healthcare services, and facilitating the social reintegration of prisoners. The plan also provides for both targeted, short-term interventions – including the maintenance of existing prisons and the promotion and use of alternatives to imprisonment – and long-term measures. The latter include a €268 million programme for the construction of eight new prisons, increasing the overall capacity of the prison estate by almost 4 000 places to a total of 14 700 by 2030, with a precise timeline for implementation. It also sets out clear proposals for estimated costs and projected financing, through both national and international funding, and regular reviews of the progress achieved.

3. Article 10, paragraph 2, reads as follows: "If the Party fails to co-operate or refuses to improve the situation in the light of the Committee's recommendations, the Committee may decide, after the Party has had an opportunity to make known its views, by a majority of two-thirds of its members to make a public statement on the matter."

4. See Ministry of Citizen Protection, General Secretariat for Anti-Crime Policy, Statistical Table for the 1st and 16th of each month for the years 2019-2025 ([Στατιστικός Πίνακας 1ης και 16ης εκάστου μήνα για τα έτη 2019-2025](#)), last consulted on 1 July 2025.

5. See, for instance, European Court of Human Rights (ECtHR), *Poulopoulos v. Greece*, application no. 27936/18, 20 March 2025; and *Fraggopoulos and Others v. Greece*, application no. 550/17, 23 January 2025.

6. See [Council of Europe Anti-Torture Committee \(CPT\) returns to Greece for high-level talks on prison reform](#).

In addition, the political leadership of the Ministry of Health outlined the various actions being taken to improve healthcare provision and overhaul mental healthcare for persons in prisons. Further, the Secretary General of the Office of the Prime Minister provided information on the ongoing efforts to ensure that the domestic remedy for prisoners complaining about poor conditions of detention was effective.

12. The present report is based upon the situation observed by the delegation during the January 2025 visit. The report does not attempt to assess the ambitious reform plans set forth by the Greek authorities during the meeting of 19 June 2025. Nevertheless, in the CPT's view, the new action plan to overhaul the prison system represents a significant and promising step forward, both in terms of cooperation with the Committee and strategic planning towards the recovery of the prison system. These reform measures, based on a mid- to long-term strategy and investment plan, after years of chronic underinvestment in the public sector, translate into a strong commitment with concrete deliverables, which will – if fully implemented – have a positive impact on the living conditions of persons detained in Greek prisons. As mentioned during the talks in Athens, addressing the chronic staff shortages combined with providing all staff with proper training and support will be essential if the reform process is to succeed.

13. For these reasons, the CPT decided not to make a public statement but to keep the procedure under Article 10, paragraph 2, of the Convention open until at least a response to the present report is received. Moreover, the Committee intends to follow closely the reform process of the Greek prison system.

||| In this respect, the CPT would like to be informed bi-annually by the Greek authorities of the progress achieved in implementing the Action Plan 2025-2030 and to receive a copy of the annual progress reports.

C. Immediate observations under Article 8, paragraph 5, of the Convention

14. On 31 January 2025, at the end of the visit, the delegation presented the Greek authorities with its preliminary findings. During this meeting, it made two immediate observations pursuant to Article 8, paragraph 5, of the Convention.

The Greek authorities were requested to take the following urgent measures:

- To immediately take out of service the two dilapidated and unhygienic cells located in the special area no. 1 used for segregating prisoners at Patras Prison, as they were deemed unfit for human habitation, and to ensure that they are not used again until they have been properly renovated;
- To take immediate action to:
 - (1) transfer a prisoner with severe dermatological condition at Chania Prison to a dermatologist and provide appropriate nursing care;
 - (2) ensure that a prisoner with uncontrolled diabetes at Chania Prison receives care and assistance from a qualified nurse; and
 - (3) transfer a female prisoner with breast cancer at Korydallos II Women's Prison to an appropriate healthcare facility.

These observations were formally confirmed by letter of 13 February 2025, transmitting the delegation's preliminary observations to the Greek authorities.

By communication of 1 and 11 April 2025, the Greek authorities informed the CPT of the measures taken in response to these immediate observations and to other issues raised during the end-of-visit talks. The information provided has been considered in the relevant sections of this report.

D. National Preventive Mechanism (NPM)

15. Greece ratified the Optional Protocol to the United Nations Convention against Torture and other Cruel, Inhuman or Degrading Treatment or Punishment (OPCAT) in 2014 and designated the Greek Ombudsman as the National Preventive Mechanism (NPM).⁷ Pursuant to the relevant legislation, the NPM is entitled to visit all places of deprivation of liberty, whether public or private, without prior notification, to interview detained persons in private, and to access all information necessary for the fulfilment of its preventive mandate.

16. At the time of the CPT visit in January 2025, the team of senior investigators formally assigned to NPM-related tasks had increased to 30 staff members, operating under the authority of the Deputy Ombudsman for Human Rights. However, the Committee notes that all of these investigators also performed additional functions unrelated to the NPM mandate, such as handling complaints or working on thematic areas falling under the broader responsibilities of the Greek Ombudsman, including its roles as the national equality body, the promoter of children's rights, as well as the institution's special mandates.⁸

While this integrated structure enabled the Ombudsman's Office to follow-up effectively on complaints received or to investigate allegations of ill-treatment by law enforcement officials with the powers of its mandate as a national mechanism for the investigation of arbitrary incidents, the human resources effectively dedicated to the NPM were limited. This was also reflected in the modest number of visits conducted to places of deprivation of liberty under its mandate.⁹

The Committee must underline that adequate resources are essential for the effective functioning of any NPM.¹⁰ This is particularly critical should additional responsibilities be assigned to the Greek Ombudsman in the future.



The CPT encourages the Greek authorities to ensure that the NPM will be provided with sufficient human and financial resources to guarantee its effective functioning.

7. See Law 4228/2014, which ratified the OPCAT.

8. In addition to the NPM mandate, the special mandates include the monitoring of the implementation of the UN Convention on the Rights of Persons with Disabilities, and the national mechanism for the investigation of arbitrary incidents.

9. 14 visits in 2024 and 18 in both 2023 and 2022, the findings of which are presented in its annual reports.

10. See document [CAT/OP/12/5](#) of 9 December 2010.

II. FACTS FOUND DURING THE VISIT AND ACTION PROPOSED

A. Prison establishments

1. Preliminary remarks

17. In March 2011, the CPT took the extraordinary step of making a public statement on the situation in Greek prisons due to the lack of action taken by the authorities over the course of many years to address the severe challenges facing the prison system. In the intervening period, the CPT has carried out five visits focused on prison matters between 2013 and 2022.¹¹ All of the reports on these visits have highlighted the overarching systemic deficiencies of overcrowding and chronic shortage of staff which undermine all other aspects of prison life, from the poor conditions of detention to regime, to healthcare and violence. Further, the Committee has engaged with the Greek authorities through numerous ministerial talks to emphasise the urgency of investing sufficient resources based upon a coherent strategic plan to recover the prison system from its dire state of affairs.

18. The CPT considered that the contingency measures adopted by the Greek authorities to tackle overcrowding were inadequate and it called for more strategic and longer-lasting solutions.¹² A strategic plan for the prison system (2018-2020 and updated for the period of 2021-2023) was drawn up, but it did not seem to have been properly costed or to contain realistic timelines for its implementation. Progress was made in extending educational opportunities for prisoners, but little was done to address the overarching systemic problems set out above. The strategic plan 2024-2026 focused on better management of the prison overpopulation, improving and streamlining detention facilities, digital upgrading, as well as enhancing the provision of healthcare, educational and vocational training, and preparation for release.

However, that plan did not state clearly how many prison places there would be year on year up to 2030 nor whether these will be sufficient; it also did not state the overall prison staffing numbers which would be required to run the prisons nor how to attract and train the required number of staff. As mentioned above, the new Action Plan 2025-2030 foresees targeted interventions, including in areas which were not addressed by the previous plans (see paragraph 10 above).

a. overcrowding

19. At the time of the January 2025 visit, the prison population stood at 11 527¹³ for a capacity of 10 763 places¹⁴ (corresponding to a prison occupancy rate of 107%).

However, the distribution of prisoners across the prison estate, and even within individual prison establishments, means that overcrowding is far more severe than indicated by the figure of 107%. Indeed, at the time of the visit, 24 of the 35 prison facilities were overcrowded, with 16 prisons having an occupancy rate at or above 130% of their official capacity, including large prisons such as Korydallos I Men's (149%) and Larissa (130%), while Komotini Prison was accommodating 227 prisoners for a capacity of 162 places (140%), Kos Prison held 104 persons for 56 places (186%), and Tripoli Prison detained 130 persons for 53 places (245%).

11. See CPT/Inf (2014) 26, CPT/Inf (2016) 4, CPT/Inf (2020) 15, CPT/Inf (2022) 16, and CPT/Inf (2023) 24.

12. See CPT/Inf (2020) 15, paragraphs 14 and 15.

13. See Ministry of Citizen Protection, General Secretariat for Anti-Crime Policy, Statistical Table for the 1st and 16th of each month for the years 2019-2025 ([Στατιστικός Πίνακας 1ης και 16ης εκάστου μήνα για τα έτη 2019-2025](#)), last consulted on 1 July 2025. That is a rate of imprisonment of 104 per 100,000 inhabitants, a figure which is close to the European median value according to the Council of Europe Annual Penal Statistics – SPACE I 2023, Table A.

14. This includes a Wing for 120 persons at Drama Prison, which is not yet operational.

20. By contrast, certain prison establishments such as the rural prisons of Agia Chania and Kassandra Chalkidiki continued to operate at only 77% and 67% of their capacity respectively and Tirintha Argolida Prison at 49% of its capacity. This is mainly due to the strict criteria for transferring prisoners to these rural prisons.¹⁵ Further, as highlighted by the Committee in the past, the official capacities for the Korydallos Psychiatric Hospital for Prisoners (261 places) and the Korydallos Special Health Centre for Prisoners (253 places) far exceed the real capacity of these institutions and should be revised downwards.¹⁶

21. The CPT calls upon the Greek authorities to put in place a more even distribution of the prison population across the prison estate, including by putting in place strategies in order to facilitate transfers to agricultural prisons, bearing in mind the need to consider proximity to the prisoner's family or residence.

22. More generally, the CPT wishes to stress once again that a prison cannot function effectively if it is operating at 100% of its capacity. There must always be some margin for transferring prisoners from one wing to another, for receiving additional prisoners or for taking back prisoners on temporary release. The Council of Europe's White Paper on Prison Overcrowding states that "if a given prison is filled at more than 90% of its capacity this is an indicator of imminent prison overcrowding. This is a high-risk situation, and the authorities should feel concerned and should take measures to avoid further congestion."¹⁷

Further, the Committee considers that, for every prison, there should be an absolute upper limit for the number of prisoners, in order to guarantee the minimum standard in terms of living space, namely 6 m² per person in single cells and 4 m² per person in multiple-occupancy cells (excluding the sanitary annexe). Whenever a prison has reached that limit, appropriate steps must be taken by the relevant authorities to ensure that a person, who has been newly remanded in custody or sentenced to imprisonment, is offered acceptable conditions of detention (including in terms of living space).¹⁸

The CPT reiterates its recommendation that the Greek authorities take these precepts into account when calculating the official prison capacity and the number of places available within the prison estate, and when looking at projections for the prison population in the future.

23. Overcrowding has been a constant feature of the Greek prison system for many years and modulating its increase in recent years was largely achieved by the adoption of emergency measures (such as Law no. 4322/2015), which sought only to manage the problem and were not accompanied by policies to address the causes of overcrowding. Addressing this problem calls for a coherent strategy, covering both admission to and release from prison, to ensure that imprisonment really is a measure of last resort.

24. Some measures to promote non-custodial sentences have been introduced by the reform of the criminal legislation in 2019, but to date it appears that such measures remain underused and that the Probation Service remains underdeveloped. The Greek authorities informed the CPT that, between May 2024 and June 2025, 742 sentenced prisoners were assigned to community service positions and that a proposal to reintroduce community service within the framework of the Penitentiary Code is currently being examined.¹⁹ Further, in March 2025, Law no. 5187/2025 introduced amendments to the provisions of the Criminal Code and the Code of Criminal Procedure regarding electronically monitored house-arrest and conditional release with electronic monitoring.²⁰ Electronic monitoring is expected to be fully operational throughout Greece as of 1 January 2026. It remains to be seen how these provisions will be implemented in practice.

15. Article 19A of the Penitentiary Code, added by Section 21 of Law no. 4985/2022, lays down the criteria of eligibility for transfer to a rural prison and exclude, *inter alia* persons who have committed a disciplinary offence which has not been deleted from the prisoner's disciplinary record, as well as persons for whom the reason for granting a leave permit has ceased.

16. See CPT/Inf (2023) 24, paragraphs 17 and 22, and CPT/Inf (2022) 16, paragraph 14.

17. See Section 20 of the White Paper on Prison Overcrowding – [CM\(2016\)121-add3](#), 23 August 2016.

18. See Living Space per prisoner in prison establishments: CPT Standards, [CPT/Inf \(2015\) 44](#), and Combating prison overcrowding, Extract from the 31st General Report of the CPT, [CPT/Inf \(2022\) 5 – part](#).

19. Reportedly, more than 200 public sector entities have joined the digital employment platform, offering approximately 2 800 community service positions in areas such as cleaning, landscaping, and security.

20. In this regard, reference is made to Recommendation [CM/Rec \(2014\)4](#) of the Committee of Ministers to member States on electronic monitoring, adopted on 19 February 2014.

The CPT would like to receive more detailed information on the implementation of non-custodial sanctions and measures, including on the number of such sanctions and measures applied in 2025.

25. On the other hand, amendments were introduced to the Criminal Code, applicable as of May 2024, whereby the system of suspension of sentences underwent crucial changes.²¹ As a result of these amendments, it is now far more likely for persons convicted of misdemeanours to actually serve time in prison, as sentences of more than two years are not suspended.

26. Another important factor driving prison overcrowding is the high number of persons sentenced to long terms of imprisonment in Greece.²² For example, the latest published figures available for Greece show that, as of January 2023, 82% (6 495) of sentenced prisoners were serving very long-term prison sentences of over five years compared to a Council of Europe median of 34.1%.²³ The CPT addressed these issues in detail in its reports on the 2019 and 2021 visits making explicit reference to the Council of Europe reports on Reducing Prison Overcrowding in Greece.

Moreover, the prison population has increased by almost 1 000 persons in the first six months of 2025 and as of 1 July 2025 stood at 12 449 persons (corresponding to an occupancy rate of 115.7%).

27. The CPT calls upon the Greek authorities to effectively address the structural reasons driving prison overcrowding. This should include placing greater emphasis on non-custodial measures in the period before sentencing (including alternatives to pre-trial detention), increasing the use of alternatives to imprisonment at the sentencing and post-sentencing stages (including suspended sentences and conditional release) and adopting measures to facilitate the reintegration of prisoners into society. Further, the Committee invites the Greek authorities to take actions in order to review the policy of very long sentences and the impact this has on overcrowding in prisons.²⁴

Moreover, the Committee reiterates the importance of ensuring that non-custodial measures and alternatives to detention in law be accompanied by providing judges and prosecutors with the necessary training and ensuring that the appropriate infrastructure is in place to further promote their use in practice. In particular, a fully functioning probation service with sufficient and adequately trained probation officers will be required.

28. The central pillar of the Greek authorities' strategy to resolve overcrowding and to improve material conditions in prisons continues to be the building of new establishments. During the high-level talks on 19 June 2025, the authorities announced a €268 million programme for the construction of eight new prisons and the extension of two existing prisons by 2030, with the aim of creating 6 800 new

21. Law no. 5090/2024. In particular, suspension of the sentence for misdemeanours was converted from a rule to an exception (Article 99 of the Criminal Code). Suspension is now available for prison sentences of up to one year when irrevocable previous convictions do not exceed one year. For prison sentences of up to two years, priority is given to alternatives to detention, such as community service, conversion of the sentence to monetary sanctions, or home detention with electronic monitoring (Articles 80A, 104A and 105 of the Criminal Code). Prison sentences of two to three years are served entirely, or in part (30 days to six months) in prison. Prison sentences of more than three years are to be served from 1/5 to 3/10 of the sentence. The maximum threshold of imprisonment for felonies was increased from 15 to 20 years.

22. Law 4855/2021 notably extended the imposition of mandatory life sentences for several serious crimes. It also further restricted the eligibility criteria for conditional release and limited the use of alternatives to imprisonment or non-custodial sanctions and measures (such as suspended sentences or electronic monitoring).

23. See Council of Europe Annual Penal Statistics – SPACE I 2023 pages 48 and 54.

24. In this regard, reference is made to [Rec. R\(99\)22](#) – Recommendation of the Committee of Ministers to member states concerning prison overcrowding and prison population inflation, [Rec. R\(2003\)22](#) - Recommendation of the Committee of Ministers to member states on conditional release (parole), and [Rec\(2003\)23](#) – Recommendation of the Committee of Ministers to member states on the management by prison administrations of life sentence and other long-term prisoners.

detention places.²⁵ Upon completion of these new prisons, certain existing establishments such as Alikarnassos, Chalkida, Ioanina, Korydallos and Neapoli Prisons will be permanently closed. The total capacity of the revised national prison estate will reach 14 700 places, increasing the current capacity by approximately 38%.

In the CPT's view, constructing new prisons is not likely, in itself, to provide a lasting solution to the problem of overcrowding. For instance, between 1997 and 2019 the prison estate in Greece more than doubled its capacity yet overcrowding was not resolved. Promoting alternatives to imprisonment will also be essential to modulate the prison population within its new envisaged capacity.

29. **The CPT would like to be informed whether in addition to the financing of the construction of the prison buildings, sufficient staffing provision for the above proposed facilities will be in place prior to their opening. Further, it would like to receive an indicative number of staff envisaged for each of these prisons. As regards the new Judicial Prison Complex in Athens, the CPT reiterates its request to receive details about the plans for the different components of the Complex, including the intended prisoner profile and staffing arrangements.**

30. On 28 October 2022, the new Prison Law (Law no. 4985/2022) entered into force, which amends and updates the provisions of the 1999 Penitentiary Code. Article 6A of the Penitentiary Code provides for a domestic remedy in order to complain of conditions of detention in prisons which allegedly violate the provisions of Article 3 of the European Convention on Human Rights. The delegation was informed of obstacles faced by prisoners when considering whether to introduce such a remedy and, at times, even after having introduced it. Several prisoners pointed out that they had been told by the prison management that making a request under the new Article 6A would be detrimental to their requests for leave or conditional release, or that they might be transferred to another prison.

By letter of 10 April 2025, the Greek authorities informed the CPT that no such complaint had been reported. On the contrary, clear instructions had been issued to the management of all prisons regarding the proper dissemination of information to all inmates, as well as the submission of specific documentation during the adjudication of the appeals.

The CPT welcomes this response and trusts that the Greek authorities will ensure that no obstacles are placed in the way of prisoners wishing to make an application under Article 6A of the Penitentiary Code. The Committee would like to be informed about the number of complaints for poor conditions of detention submitted by prisoners under this provision in 2025 and their outcome.

b. prisons visited

31. In the course of the 2025 visit, the CPT delegation visited Alikarnassos, Chalkida, Chania, Malandrino, Nafplio and Patras Men's Prisons. It also visited Korydallos II and Eleonas Women's Prisons. Further, a targeted visit was paid to the Korydallos Prison Complex (Korydallos I Men's Prison, Special Health Centre for Prisoners and Psychiatric Hospital for Prisoners).

Alikarnassos Prison, located in the outskirts of Heraklion, opened in 1932. The prison is a single-wing unit with three floors. There are 33 cells on each floor, as well as six cells for protection and eight segregation cells. During the 2025 visit, Alikarnassos Prison was holding 277 persons for an official capacity of 210 places (this is a 131.9% occupancy rate). The prison had a pleasant and spacious outdoor courtyard with plants and green spaces.

25. In particular, new 600-place prisons will be built in Chalkida, Ioannina, Kassandra, Kassaveteia (Volos), and Kourounes, Neapoli (Lasithi, Crete), as well as new 300-place prisons in Corfu and Filiates. Further, a Model Open Labour Prison in Megalopolis with two establishments of 400 places and a 400-place Special Agricultural Juvenile Prison in Kassaveteia (Volos) are planned. In addition, Korydallos Prison Complex will be replaced by a new 2 000-place Judicial Prison Complex in Athens (Aspropyrgos).

Chalkida Prison, located in the centre of the town, visited for the first time by the CPT during the 2025 visit, was holding 172 prisoners for an official capacity of 127 places (135.4%). The administrative offices of the prison overlook the central prison courtyard, off which is the main prisoner accommodation building, consisting of eight dormitories spread across two floors. In addition, there are two smaller units off the central courtyard each containing one dormitory (nos. 9 and 10). Since 6 November 2024, the prison has been designated a prison for financial crimes, but this arrangement is yet to be fully implemented.²⁶

Chania Prison, located outside the city, is a model prison similar to those of Domokos, Dramas, Grevena and Nigrita. It consists of five accommodation wings, each composed of two units. Each unit has two floors of 10 cells which should accommodate a maximum of 60 prisoners. On each floor, there is a common area, initially equipped with a hotplate, fridge and several washbasins. A large concrete outdoor exercise yard was attached to each unit. During the 2025 visit, the prison was accommodating 663 prisoners for 600 places (110.5%).

Korydallos / Men's Prison, located in the west of Athens, was built in the 1970s and initially consisted of four separate wings (A, B, C, D) each containing 117 single-occupancy cells across three floors. A fifth wing (E) was added in the late 1990s following the conversion of the former Prison for young offenders. At the time of the 2025 visit, the official capacity was 1 222, while the occupancy level stood at 1 900 (155.5%).

Malandrino Prison, located on a plateau in the prefecture of Phocis, has an official capacity of 431 places²⁷ and, on the day of the visit, was accommodating 475 prisoners (110.2%).²⁸ Inmates are housed in 10 wings set off two parallel corridors and in three stand-alone dormitories in the area between the two corridors. Each of the 10 wings consisted of two floors, each containing seven double-occupancy cells and one dormitory, initially designed to be a common room.

Nafplio Prison, located at the entrance of the city, has a capacity of 273 beds, and was accommodating 345 prisoners at the time of the visit (126.4%).²⁹ It is divided into three blocks; two blocks with cells (A and B), built in 2000, and one block with four dormitories (Block C), which is the old prison. At the time of the visit, the two dormitories on the ground floor of Block C were not being used to accommodate prisoners. One of them was used as a room for the primary school, and the other one was being used for other educational programmes. A and B Wings each consisted of four corridors of nine cells, each spread over two floors, for a total of 72 cells.

Patras Prison, built in 1978 and located in the industrial zone of the city, has a capacity of 446 beds and was holding 540 prisoners (121.1%) at the time of the visit. The prison consists of three accommodation blocks of three floors each, with prisoners held mostly in dormitories. Each accommodation block had its own large concrete outdoor exercise yard.

32. *Eleonas Women's Prison in Thiva*, opened in 1998 and extended in 2006, is located on the same premises as the Therapeutic Department for Drug-Dependent Prisoners and the recently established Greek Prison Staff Academy.³⁰ At the time of the visit, the women's prison was officially holding 451 adult female prisoners, including 30 women serving life sentences, five young adults, and three mothers together with their children.³¹ The official capacity of the prison was stated as 617 places. In practice, the operational

26. At the time of the visit, 65 prisoners were held relating to financial crimes, the rest would be gradually transferred to different prisons.

27. The original capacity of 280 has been increased by converting the two common rooms in each wing into multiple-occupancy dormitories. Consequently, the official capacity now stands at 430 places.

28. An additional 46 prisoners were hospitalised, on leave or placed elsewhere for court hearings.

29. 349 prisoners were registered in total: two prisoners were attending trials and two were on leave. According to the annual report, the population during 2024 was between 329 and 429 prisoners, and as a result a large number of prisoners slept on the floor.

30. The CPT previously visited the prison in 2011, see CPT/Inf (2012) 1. The Detoxification Centre was hosting seven female prisoners for a voluntary dependence treatment programme but was not visited by the delegation.

31. Approximately a third of the prison's population were Greek Roma women and a quarter were foreign nationals.

capacity was significantly lower, with 589 places distributed across the five main wings (A to E, for an occupancy rate of 76.6%).³²

Korydallos II Women's Prison, situated in an older facility opposite *Korydallos I Men's Prison*, has been described in earlier CPT reports.³³ While the prison has an official capacity of 174 places, its operational capacity was reduced at the time of the visit, as only two of the three wings (A and B Wings) were in use, with a reported capacity of 126 places. C Wing had been reconverted into a separate unit as part of *Korydallos I Prison* and was still not accommodating prisoners. The delegation was informed that, starting from July 2025, the wing would be used to temporarily accommodate up to 120 adult male prisoners, primarily those transferred to Attica for court proceedings.

At the time of the visit, 193 prisoners were officially held at the facility, including 182 adult female prisoners – approximately one-third of whom were foreign nationals – along with 22 young adults and five women serving life sentences. Additionally, the prison was accommodating five male prisoners (held separately under protection) and six transgender women. Most women were housed in the main wing, comprising the ground and first floors (combining A and B Wings, for an occupancy rate of 153.2%). The basement was divided into two units: one for the male prisoners and one for the transgender women. Further, two women (one pregnant and one on protection) were being accommodated in the isolation section of the medical unit.

33. **In light of the above, the CPT recommends that the Greek authorities review the official capacities of both women's prisons, and if applicable, of other Greek prisons. The officially recorded capacity of any prison should accurately reflect its effective operational capacity. This calculation should exclude sections that are not intended or not suitable for the permanent accommodation of prisoners, or that are not currently operational, to provide a reliable and transparent assessment of actual occupancy levels and the extent of overcrowding.**

Further, the CPT would like to be informed whether the reconverted C Wing, located at *Korydallos II Women's Prison*, has started operating and what impact this will have on the operation of the women's part of the prison.

2. The situation of adult men in prison

a. ill-treatment

i. *ill-treatment of inmates by prison staff*

34. As was the case during previous visits, the delegation received almost no complaints of physical ill-treatment of prisoners by staff. This was hardly surprising as, in all establishments visited, staff were not circulating in the wings and therefore had little contact with prisoners.

35. However, at *Nafplio Prison* the delegation received a few allegations of physical ill-treatment of prisoners by custodial officers, which allegedly took place between five and three months prior to the delegation's visit. In one of these cases, prisoners told the delegation that they had witnessed the beating of another prisoner in B Wing by four officers, in an area without CCTV coverage. Another prisoner told the delegation that he had been beaten up twice by custodial officers, once in Wing A and once in Wing B.

32. The prison management clarified that the discrepancy resulted from certain units being officially classified as accommodation areas, even though they were not intended for the permanent housing of sentenced women from the general prisoner population. These included seven cells in the isolation unit attached to E Wing, as well as the female juvenile and mother-and-child units, each comprising 18 cells, all located in separate annexes. The five main wings could accommodate between 102 (B Wing) and 132 (E Wing) female prisoners. Additionally, nine women were being accommodated at the prison's agricultural annex, which has a capacity of 30 places, and which was not visited by the delegation.

33. See, for instance, CPT/Inf (2006) 41, paragraph 86.

According to the prisoner's allegations, the prisoners' "leader" of Wing B had also participated in the second beating.

By letter of 10 April 2025 the Greek authorities informed the CPT that no formal complaint concerning the allegations above had been introduced but that they had already identified dysfunctions within the Security department prior to the CPT visit and had replaced the Chief Guard of Nafplio Prison.

36. At Chalkida Prison, a couple of incidents reported to the delegation indicated that staff did not know how to intervene to de-escalate challenging situations. In one case, a prisoner reported that a custodial officer apparently intervened in a fight between two inmates by kicking and slapping them both, and in another incident, a prisoner who refused to take his medication was grabbed by the collar and kicked by a prison officer.

37. The CPT recommends that the Greek authorities reiterate to custodial staff the clear message that physical ill-treatment and excessive use of force against inmates are unlawful and wholly unacceptable and will be dealt with accordingly. All staff should be properly trained on how to intervene to de-escalate a situation or manage a challenging prisoner using verbal techniques and, if required, physical control and restraint holds.

ii. inter-prisoner violence

38. The delegation gained the impression from interviews with prisoners in all establishments visited that the number of incidents of inter-prisoner violence resulting in serious injury appears to have diminished considerably since the Committee's 2019 visit, although no statistical data exist. Nevertheless, the CPT delegation found once again that there were regular tensions and intimidation or aggression between prisoners, including those concerning sexual assault (rape and attempted rape). This is hardly surprising, given that there are insufficient prison officers to intervene swiftly or even prevent these incidents from occurring.

Prison managers continue to rely on stronger groups of prisoners to impose and maintain order within the wings and to exert authority over other prisoners. The delegation received information that prisoners belonging to these stronger groups may have links to outside gangs and/or organised crime, and, in the absence of effective supervision of the wings by prison staff, impose their will and rules on other prisoners, who might not have financial means, physical strength or outside support. The groups are often formed along ethnic lines and keep control of the wings by means of intimidation, bullying and, at times, physical abuse. Detained persons also told the delegation that they felt the need to possess home-made knives, which could occasionally lead to violent incidents.³⁴

39. In all prisons visited apart from Chalkida, inmates informed the delegation that they felt unsafe, and many spoke about being intimidated by other prisoners. Most of the low-level violence and intimidation remained unreported. In fact, prisoners stated that complaining to the prison authorities or asking for protection was not an option as they had no trust that the system would protect them and that they would avoid reprisals (see also paragraphs 144 to 145 on complaints).

40. The delegation also heard accounts that families of inmates had to send protection money to the groups of stronger prisoners within their wings, as the latter exploited their links to outside gangs to intimate to the inmates concerned what would happen if no payment arrived. It was also apparent that prisoners had access to smuggled mobile phones in the prisons visited; indeed, mobile phones were rendered all the more necessary since many of the prison pay phones were broken.

41. The situation at Malandrino Prison is indicative. In this establishment, prison staff are explicitly prohibited from entering the wings since the murder, in March 2014, of a custodial officer by an inmate. Therefore, the 44 prisoners on each wing are largely left to manage themselves. While this may assist the management in maintaining order, it exposes vulnerable prisoners to intimidation and abuse, and these

34. One such incident, for instance, took place in June 2024 in Wing D of Korydallos I Prison.

prisoners do not believe that staff can support them, so they do not attempt to complain. When overt violence occurs, it is positive that the prison management will separate the protagonists. For example, in C Wing, a few days prior to the CPT's visit, it was reported that a prisoner was attacked by another inmate with a knife, and staff told the delegation that there was a standoff between various prisoners. Thereafter, prison management separated the two groups by effectively creating two separate units within the wing – one on each floor. However, apart from separating the prisoners, no other measures, whether disciplinary or otherwise, appeared to have been taken, or were envisaged, to hold the protagonists to account or to address the underlying tensions. Further, the delegation again observed how a prisoner from a stronger group of prisoners in B Wing appeared to move through the prison together with custodial officers, so that he could sit down with them in the prison's main control room and have a casual chat. The perception was one of clear collusion.

42. At both Chania and Nafplio Prisons, stronger groups of prisoners were permitted to manage life inside the wings with staff only intervening when there was a struggle for control within a wing between two groups. For example, during the visit to Chania Prison, following fights between two groups of prisoners, several sub-Saharan African prisoners, who had attempted to seize control of the wing, were confined to their cells for several days, and the presumed "leaders" were transferred to other wings to quell the unrest. In this case, the prosecutor had been informed of these incidents.

43. During a short visit to C Wing of Korydallos I Men's Prison, which was holding 426 prisoners in 117 cells, it became obvious very quickly that control within the wing was being exerted by certain groups of prisoners. This is illustrated clearly by the cell allocation policy. Cells on the ground floor and second floor were mostly extremely dilapidated and crammed with four or five persons in 9.5 m², with two or three persons sleeping on mattresses on the floor.

By contrast, nearly all the cells on the first floor accommodated only two prisoners and were in a good state of repair (some even with tiled flooring) and equipped with fridges and other modern amenities.³⁵ The contrast in living conditions was stark. The management was fully aware of this disparity, as were the prison officers working on the wing, but with only one or two officers responsible for 426 or more prisoners, they were not able to exert control.

44. As noted in previous reports, smaller prisons with a slightly higher staff to prisoner ratio and a different population mix had much less inter-prisoner violence. This was the case for Chalkida Prison, where the delegation found inter-prisoner violence or intimidation to be a rare occurrence, and the environment in the prison to be generally calm.

45. The CPT has repeatedly raised the issue of inter-prisoner violence and intimidation in previous reports.³⁶ Regrettably, its existence seems to have been normalised and no concerted efforts have been made to redress the situation. On the one hand, the prison authorities consistently referred to the dangers custodial officers would face if they were to enter the wings and interact with prisoners. On the other hand, no action was being taken to significantly increase the ratio of prison officers to inmates across the establishments visited, to enable prison officers to regain control of the accommodation wings.

The delegation observed once again at both Korydallos I and Patras Prisons that the prisons only "functioned" because the officers were assisted by certain prisoners who were essentially carrying out prison officer duties, such as receiving all requests for exiting a wing and recording which prisoners left and entered the wing.

Further, the CPT considers that the Greek authorities need to grasp the reality of the working conditions for prison officers (see paragraphs 89 to 101). For example, on C Wing at Korydallos I Prison, there were still only two officers responsible for transferring the 426 prisoners from the yard and corridors into their cells; the sense of vulnerability and the fear of being overwhelmed at any moment continued to place a great strain on these officers. The situation in other large prisons is less extreme but still totally inadequate; for

35. At the time of the visit, the 39 cells on each of the three floors accommodated 176, 80 and 170 prisoners, respectively.

36. See for example, CPT/Inf (2020) 15, paragraphs 18 to 24, CPT/Inf (2014) 26, paragraphs 98 and 99 (juveniles), CPT/Inf (2012) 1, paragraphs 53 and 54; and CPT/Inf (2010) 33, paragraphs 95 and 96.

example, at Chania Prison, one prison officer is responsible for two units accommodating up to 139 prisoners, while at Patras Prison two officers are on duty for each wing, which may accommodate 170 or more prisoners.

46. Inter-prisoner violence largely continues to be fuelled by a number of factors, notably, chronic understaffing, overcrowding, the influence exerted by stronger groups of prisoners, poor material conditions, a lack of activities and, in some prisons, a high prevalence of illicit drug use. At the same time, there is an absence of a proper risk and needs assessment of prisoners upon admission and of any categorisation of prisoners based upon such an assessment.

47. The Committee must reiterate that, under Article 3 of the European Convention of Human Rights, the duty of care which is owed by the state to those in their charge includes the responsibility to protect them from other inmates who wish to cause them harm. This role cannot be bequeathed to prisoners themselves. Any relinquishment of the responsibility for order and security, which properly falls within the ambit of custodial staff, is unacceptable and the influence of stronger groups of prisoners must be addressed and tackled effectively by the prison authorities. The authorities also have the positive obligation to conduct an effective official investigation into any alleged ill-treatment even if such treatment has been inflicted by private individuals.³⁷

48. Addressing the phenomenon of inter-prisoner violence first and foremost requires that staffing levels be radically increased (see paragraphs 89 to 94). In parallel, the existing skills and expertise of prison staff should be expanded by providing further specialised training. Prison staff must be alert to signs of trouble and be both resolved and properly trained to intervene. The existence of positive relations between staff and prisoners, based on the notions of dynamic security³⁸ and care, is a decisive factor in this context; this will depend primarily on staff possessing the appropriate interpersonal communication skills. It is also obvious that an effective strategy to tackle inter-prisoner violence and intimidation should seek to ensure that prison staff are placed in a position to exercise their authority in an appropriate manner.

In the absence of an increase in staff, any interim solutions, such as training for staff and circulars aimed at preventing and countering inter-prisoner violence, cannot realistically be expected to have any impact on the situation.

49. It is noteworthy that the new Action Plan 2025 – 2030 recognises the problem of informal prisoner hierarchy and its negative impact on security. The action plan identifies as main causes staffing shortages in the security personnel, overcrowding, reduced dynamic security, staff corruption, and the existence of a criminal sub-culture among prisoners, and proposes different interventions aimed at combating the prevalence of stronger groups of prisoners and enhancing dynamic security.

50. **The CPT once again calls upon the Greek authorities to devise an effective national strategy concerning the prevention of inter-prisoner violence and intimidation, in light of the above comments. Such a strategy must include:**

- **a risk and needs assessment of every prisoner entering the prison system;**
- **the regaining of control over the wings by prison staff;**
- **the separation of stronger groups of prisoners from other prisoners;**
- **a reduction in overcrowding;**
- **the provision of activities;**
- **an improved reporting and complaints system; and**
- **the conduct of an effective official investigation into any alleged inter-prisoner violence.**

37. See, for example, ECtHR, *Premiininy v. Russia*, application no. 44973/04, 10 February 2011, paragraphs 70-74 and 84.

38. Dynamic security is a concept and a working method by which staff prioritise the creation and maintenance of everyday communication and interaction with prisoners based on high professional ethics, and ensure that there is sufficient purposeful and meaning activity to occupy prisoners, bound by effective security. It aims at better understanding prisoners and assessing the risks they may pose as well as ensuring safety, security and good order, contributing to rehabilitation and preparation for release.

Above all, as a prerequisite, any strategy will require additional prison officers, over and above those currently being recruited, which necessitates the Greek Government allocating more resources to the prison system.

51. The lack of staff and the inability and/or unwillingness of prison directors to challenge stronger groups of prisoners mean that a culture of impunity persists in the prisons. The CPT has continuously sounded the alarm on the question of impunity in its previous visit reports. During the 2025 visit, the delegation was not informed of any investigations made into cases where prisoners are attacked by other prisoners. Transferring perceived troublemakers to another prison appeared to be the main approach towards breaches of the prison rules instead of addressing prisoners' behaviour. Moreover, the CPT delegation again found that incidents of inter-prisoner violence were still not diligently recorded in the incident register by management, or the trauma register by healthcare staff in any of the prisons visited.

The CPT calls upon the Greek authorities to ensure that any injury indicative of inter-prisoner violence be immediately brought to the attention of the competent prosecutor and properly investigated. Further, every incident of inter-prisoner violence should be diligently recorded in the relevant registers, and the persons examined by healthcare staff.

b. conditions of detention

i. material conditions

52. Once again, the delegation found that the provisions of the 1999 Greek Penitentiary Code (as amended in 2022) are simply no longer adhered to with regard to the standards of accommodation and norms for a safe environment, including healthcare and hygiene, to be provided to each prisoner. In far too many instances, persons in prison are left to fester in overcrowded and totally inappropriate conditions which may be considered as amounting to inhuman and degrading treatment. There has been little, if any, progress made in improving the living conditions for prisoners in Greece in the 14 years since the CPT issued a public statement on the poor state of prisons. Even the recently constructed facilities, such as Chania Prison, do not offer decent living conditions as they have been permitted to deteriorate through overcrowding, insufficient staff oversight and lack of maintenance.

53. At *Alikarnassos Prison*, most of the single occupancy cells of around 8 m² (including a partially partitioned toilet) were accommodating three to five prisoners. Cells were in need of refurbishment and the bathrooms were unsanitary, cold, and had broken windows. In the ground floor cells, prisoners had to flush the toilets using buckets. Despite ongoing maintenance efforts, the infrastructure remained in an advanced state of deterioration. The facility provided adequate levels of natural light, but there was inadequate ventilation. Outside, there was a big, pleasant yard, which was greatly appreciated by detained persons, with a few trees and plants, lines to hang clothes for drying, a basketball court and a football pitch, as well as gym equipment. In a separate section, a number of well-equipped workshops offered activities for approximately 30 prisoners.

54. At *Chalkida Prison*, all of the 10 dormitories were crowded, with Nos. 2, 4 and 6 only offering approximately 3 m² of living space (excluding the toilets) per prisoner.³⁹ The prison premises and living areas were in an advanced state of dilapidation. For example, in dormitories 2 and 6, the ceiling leaked when it rained, and parts of the ceiling plaster were breaking off and falling down, with a risk of injury to the prisoners.

55. At *Chania Prison*, material conditions are extremely poor in many parts of the establishment, despite the prison being relatively new. Cells of 12 m² (excluding the toilet) mostly accommodated three persons, but in a number of cells this number could rise to four or five prisoners, and even seven prisoners in one case. Several prisoners possessed neither a mattress nor a blanket and had no choice but to sleep on the concrete floor, lying on a piece of cardboard. In most of the wings, mould, rust and high levels of

39. Dormitory 2 was 46.5 m² and was accommodating 15 people; dormitory 4 was 80 m² and was accommodating 26 people; and dormitory 6 was approximately 33 m² and was accommodating 11 people.

humidity were evident, as well as unsafe, makeshift electric cables that could be found hanging in common areas and cells. In many parts of the prison, water leaked down from the roof, flooding the sanitary annexes, or dampening the walls and infiltrating down from the first floor to the ground floor. Prisoners had to use plastic bags attached to the ceiling with tape to catch the water, which would otherwise drip onto their mattresses. Some prisoners who slept on mattresses on the floor had to dry them every day, as they got wet from the leaks. Water in the flushes of toilets and the heating were often switched off to prevent the leaks.

56. The conditions of detention regarding *Korydallos I Men's Prison* remain more or less as described in the reports on the 2021 and 2022 visits.⁴⁰

57. At *Malandrino Prison*, the double-occupancy cells in each wing were of a good size, measuring 12 m², including a partitioned sanitary annexe consisting of a toilet, shower and sink, and had adequate access to natural light, artificial lighting and ventilation. Cells were equipped with a small table, chairs, storage space and a television. By contrast the dormitories offered poor living conditions. The dormitories measured approximately 25 m² and were equipped with four or five sets of bunk beds and often accommodated more than eight or 10 persons, with prisoners having to sleep on mattresses on the floor. The dormitories were also equipped with a table and a few chairs or stools but there was no personal lockable space. The sanitary annexes contained two toilets and one or two working showers; a third shower was usually used as storage space. The three stand-alone dormitory units measuring approximately 57 m² each in the centre of the prison were only suitable for short stays.⁴¹

The occupancy and conditions of the cells varied to a great extent from wing to wing. They were particularly poor in wings E, I and K,⁴² as well as in the dormitories. For example, wing E was accommodating 55 prisoners, primarily those of Roma origin, at the time of the visit,⁴³ while wing Θ was accommodating 42 prisoners. The overcrowding negatively impacted the living conditions.

In wing E, 10 of the 14 double-occupancy cells were accommodating three persons, with the third person sleeping on a mattress on the floor. The wing was dirty and dilapidated, with the showers in most cells broken; prisoners had to use plastic food containers or buckets to wash themselves. The delegation noted that the material conditions in wings A, B and Θ were much better, with the prisoners themselves investing in their upkeep, purchasing modern gym equipment and rendering the yard attractive. In general, the yards in all wings were in good condition and there was a common room on the ground floor of each wing which could be used for activities.

58. At *Nafplio Prison*, the cells in A and B wings measured some 14 m² (including the sanitary annexe). At the time of the visit, each cell often accommodated up to five and sometimes six prisoners. Access to natural light through the large windows was good and ventilation sufficient.

As regards C Wing, the two dormitories each measured approximately 57 m²; dormitory C3 was equipped with 12 bunk beds and was accommodating 15 persons, while dormitory C4 had 13 bunk beds and was accommodating 20 prisoners. Both rooms were equipped with a number of plastic chairs and tables (although insufficient for the number of persons accommodated), had good access to natural light and the artificial lighting was adequate. In sum, the conditions had not improved since the CPT's 2015 visit.⁴⁴

40. The Korydallos Complex was last visited by the CPT in 2022, see CPT/Inf (2023) 24.

41. They were equipped with five sets of bunk beds, plastic chairs, tables and a closet. There was sufficient natural light, but some light bulbs were missing. The dormitories were cold, and the walls and the floor were very dirty.

42. According to the prison management, in wings E, I and K, the prisoners themselves neglect to keep the premises clean and destroy the prison's equipment.

43. Prisoners in wing E mentioned that there have been up to 70 inmates in the wing, which resulted in four persons being placed in each cell.

44. See, CPT/Inf (2016) 4, paragraph 74.

The conditions were particularly poor in the special cell in Block B, where vulnerable persons such as older prisoners and people with disabilities were placed. At the time of the visit, 11 persons were crammed into the cell, which measured approximately 22 m², and they had to share one toilet. The air was damp, and the room was very dirty. Many of the occupants depended on their fellow inmates to take care of their daily needs. In addition, until the week preceding the CPT visit, eight or nine prisoners were accommodated in the corridor outside this cell, one of whom had had to sleep on a mattress on the floor. The conditions in the corridor were totally unacceptable as there was no access to natural light, little ventilation, there were cobwebs and dirt everywhere, and the air was humid and cold at night.⁴⁵ At the end of the 2015 visit to Greece, the CPT had already requested that steps be taken to stop using this corridor for accommodating prisoners and noted that, while the most vulnerable prisoners should be kept in the dormitory, the numbers had to be reduced.⁴⁶

59. At *Patras Prison*, in wings A, B and C, the accommodation mainly consisted of dormitories of approximately 23 m² in which up to ten prisoners were placed, and of cells with two connecting rooms of approximately 15 m² each, furnished with two sets of bunk beds. In addition to the bunk beds, all rooms were equipped with a table and a few chairs. Only some of the prisoners had nightstands with lockers. Access to natural light and artificial lighting was generally good and there was adequate ventilation. However, the material conditions were very poor. In all wings, there were broken windows, and prisoners told the delegation that when it rained water ran into the cells. Some fans and lightbulbs were not functioning, and the walls were dilapidated. The bathrooms in the cells were small and damp and the communal showers were dirty and mouldy, with many not working. For example, on the ground floor of C Wing, only five of the 12 showers were functional.

60. In all prisons visited, in most cells and dormitories, the mattresses were old, mouldy, and infested with bedbugs, cockroaches and, according to some allegations, mice. Even when disinfestations do take place,⁴⁷ they were insufficient to tackle the problem, as it is mostly the beds and the mattresses that are infested and which therefore need to be replaced.

The cells and dormitories in the prisons visited were often cold and damp during the winter, and in many places mould was apparent on the walls. Insufficient access to hot water remained a widespread problem in the Greek prison system.

61. **The CPT once again calls upon the Greek authorities to take urgent steps to improve the living conditions by significantly reducing the number of persons held in each cell or dormitory in the prisons visited, so that all types of multiple-occupancy accommodation offer at least 4 m² of living space per person (excluding the sanitary annexes).⁴⁸ Reference is also made in this regard to the comments and recommendation in paragraph 22.**

More generally, in all the prisons visited, greater investments are required to maintain the cells and common areas in a decent state of repair and cleanliness.

The CPT also recommends that the Greek authorities continue their efforts to move from large-capacity dormitories towards smaller living units, notably when building new prison establishments.

62. **In addition, the CPT reiterates its recommendation that the Greek authorities ensure that the number of persons held in the special cell at Nafplio Prison does not exceed five and that the corridor outside this cell is never used for accommodating prisoners. In this respect, the CPT wishes to receive details of the action taken by the authorities within three months.**

45. One prisoner told the delegation that he had to sleep on a mattress on the floor of the corridor for several nights and, as a result, had contracted pneumonia.

46. See CPT/Inf (2016) 4, paragraph 75.

47. For example, in Chalkida prison, disinfestations had indeed taken place on 28 June, 9 July, 7 August and 11 September 2024.

48. See Living Space per prisoner in prison establishments: CPT Standards, [CPT/Inf \(2015\) 44](#).

63. Prisoners in all the establishments visited complained about the food, in particular as regards the quality (lack of nutrition and fresh fruit) and monotony of meals served. This is unsurprising given the daily food budget per prisoner was limited to €3.20 per prisoner. Many prisoners supplemented the food provided by cooking their own meals, if they had the necessary resources. However, many prisoners had no additional resources. Given the appallingly decrepit state of the kitchen at Patras Prison, where the equipment was black, dirty and rusty, and the whole area in an extremely unhygienic state, it is fortunate that there were no serious instances of food poisoning. The long overdue renovation of the kitchen was scheduled to start in February 2025.

The CPT recommends that the Greek authorities ensure that hygiene norms are improved regarding the delivery and distribution of meals and that additional efforts are made to serve nutritious meals and offer fresh fruit on a regular basis. It would also like to receive details about the renovation of the kitchen at Patras Prison.

64. The provision of hygiene products and clothes for indigent prisoners was generally inadequate and the process was not transparent. A hygiene pack included a bottle of shampoo, some cleaning powder for the cell and one roll of toilet paper. At Nafplio Prison, where almost half of the prison population is classed as indigent, the delegation met many prisoners who did not have any personal hygiene or cleaning products. One prisoner had still not received a toothbrush several weeks after arriving in the prison, despite the fact that the delegation saw a box of new toothbrushes in the prison administration. Others complained about not receiving any shoes or winter clothes despite making requests. As a rule, prisoners who are indigent are provided with some assistance in kind through making a request to the prison's social worker; however, such assistance depended on donations provided to the prison and hence indigent prisoners did not always get the support they required.

65. The CPT calls upon the Greek authorities to ensure that all prisoners are provided with a minimum standard of basic living conditions in order to meet the decency threshold as set out in the CPT's 30th General Report of May 2021.⁴⁹ To this end, steps should also be taken to maintain the cells and dormitories in a decent state of repair, to ensure that they are regularly disinfected and that prisoners are provided with sufficient personal hygiene and cleaning materials to keep themselves and their cells clean.

The CPT also reiterates its recommendation that the Greek authorities ensure that all prisoners have regular access to hot water, both for reasons of personal hygiene as well as for washing their clothes and dishes, and that all showers be repaired.

Further, the Committee also recommends that indigent prisoners be provided with the necessary clothing and footwear when it is clear that they cannot rely on external support.

Moreover, the CPT wishes to receive confirmation that all persons held in Greek prisons have access to potable water free of charge.

66. Prisoners in Chalkida, Malandrino, and Patras Prisons complained to the delegation that the call bells in the units did not work and in emergencies they had to shout down the corridors or out of the windows to alert prison staff. They reported that this creates serious delays when responding to emergencies. For instance, in Patras Prison, the delegation was told that when, in 2024, one person attempted to commit suicide in B Wing, it took the custodial officers 20 minutes to arrive and 20 more minutes to bring a stretcher.

The CPT recommends that the Greek authorities ensure that the call bells in all prisons are maintained in a working state of repair.

49. See [CPT/Inf \(2021\) 5-part](#).

ii. regime

67. The legal basis governing the general daily routine in Greek prisons was described in the report on the CPT's 2005 visit⁵⁰ and has remained largely unchanged. In spite of legal provisions regulating the entitlement of all prisoners to educational activities and vocational training, work, organised physical exercise, cultural and recreational activities,⁵¹ the activities offered remain wholly insufficient for the number of prisoners.

68. The hours during which mainstream accommodation cells are unlocked and prisoners can move around freely in the wings (and in the exercise yards) are essentially the same across all Greek prisons, with minor local variations. These times are usually between 08:00 and 12:30 and again between 15:00 and 20:30 (21:00 in summer), with access to the yards until half an hour before sunset. As the Committee has stated in the past, the amount of out-of-cell time and access to daily outdoor exercise is good.

69. Work remains in essence a remission scheme (for example, a kitchen worker would obtain one day of remission for every one day worked) rather than a means by which to engage prisoners in a purposeful activity or to form part of a personal development plan or preparation for release. It is also a primary incentive for good behaviour.

70. In general, the prison management in all establishments visited made efforts to create as many jobs as possible.⁵² The vast majority of the jobs offered were for cleaners, which required one or two hours of work or even less per day. Other jobs played an important part in the functioning of the prison, such as kitchen workers and inmates with a skilled maintenance job.⁵³ Only Alikarnassos Prison had several workshops for prisoners such as a nursery for plants, pottery, prison maintenance, soap making, welding and woodwork, which allowed those prisoners engaged in activities to acquire vocational skills preparing them for release.

71. In the course of the visit, the delegation again learned that prisoners who are prescribed psychotropic medication or who have a transmissible disease, such as HIV and Hepatitis B or C, are deemed unfit to work. Such a rule has no justification, medical or otherwise, and not only deprives certain prisoners from working to gain remission from their sentences but, as the delegation learned, may also lead prisoners with psychotropic treatment to stop taking their medication, with negative implications for their wellbeing as well as posing the prison management further challenges.⁵⁴

III The CPT reiterates its recommendation that such a rule be rescinded.

72. In all establishments visited, prisoners attending schools functioning in the prison spoke positively about their experience. Every day of attendance at school counts as two days towards serving a prison sentence. For example, at Malandrino Prison, a "second opportunity school", with 54 registered students, was functioning but there was no primary school operating at the time of the visit. At Patras Prison, only 16 prisoners attended primary school, and a "second opportunity school" had not started to operate, while at Nafplio Prison there was a primary school with 20 students. While the schools are positive, they remain limited in scope and efforts should be made to increase the number of prisoners able to attend them.

50. See CPT/Inf (2006) 41, paragraph 93.

51. See Articles 34 to 50 of the Penitentiary Code.

52. For example, at Malandrino Prison, there were 340 workers for a population of 475 prisoners; at Nafplio Prison, there were 125 workers for a population of 345.

53. The most notable example was that of Chalkida Prison where, at the time of visit, 159 prisoners out of 172 were working or attending the primary school.

54. In Nafplio Prison, the delegation met with one prisoner who reported that he had to stop taking his psychiatric medication twice in a period of four months in order to be eligible for work. Both times, he signed solemn declarations for the interruption and the continuation of treatment without a prior mental status assessment.

73. The organisation of short-term vocational training seminars in cooperation with the Public Employment Service was also appreciated by prisoners. For example, at Chalkida Prison, these seminars, lasting 300 hours each and attended by 80 prisoners in total, were conducted from June 2023 to December 2024. They included training in warehouse management, waitering, IT, and administrative support, including through online courses. Prisoners talked positively about them. However, such vocational trainings remained ad hoc and were not linked to any individual prisoner sentence plan.

74. In all the prisons visited, there was still a clear lack of any organised recreational, sports/gym or vocational activities on offer. Sentenced prisoners were not provided with a sentence plan to map out their time in prison into which they could also provide input, with a view to preparing for their future release back into the community. For life-sentenced prisoners, in particular, there was little to structure their time. Further, there were no offender management programmes available.

Given that most of the work offered was largely notional (such as cleaning for an hour or two a day), for the vast majority of inmates in all the prisons visited, there was nothing with which to occupy their days other than watching television, hanging around the wing corridors, and walking in the yards.

75. The authorities must take proactive measures if they want to avert the prison system from becoming an even greater breeding ground for criminality. As prisoners approach release back into the community, they need to be prepared for that step, to possess a degree of self-worth and to feel capable of leading a life away from crime. A regime which provides for varied activities is a vital component in the preparation for release, as well as being beneficial for the running of the prison.

The CPT once again calls upon the Greek authorities to improve substantially the programmes of purposeful activities on offer to prisoners (both remand and sentenced), including educational, vocational, sports and recreational opportunities, in all prisons. The Committee also calls upon the authorities to introduce the elaboration of sentence plans for prisoners with their input; consideration might be given to starting with life-sentenced and other long-term prisoners.⁵⁵

iii. prisoners with disabilities and older persons

76. At all prisons visited, the delegation encountered prisoners with disabilities and older persons, many of whom should not have been detained in the conditions in which they found themselves. This included wheelchair users, persons with physical, sensory and intellectual disabilities and other persons who required specific care due to their condition.

77. None of the prisons visited addressed the specific needs of persons with disabilities and older prisoners, nor were they appropriately designed or equipped to accommodate these persons. Facilities lacked essential structural adaptations and equipment such as ramps, lifts, high-beds, accessible toilets with higher seats and showers with showering chairs, and adequate space for wheelchair users. Overcrowded cells, narrow and obstructed corridors, and the absence of adapted infrastructure significantly restricted the mobility of prisoners with physical disabilities, mobility impairments and older prisoners. Several persons with physical disabilities met by the delegation at Nafplio and Patras Prisons were fully dependent on other prisoners, including for their personal hygiene and care or their mobility support, as some could not even access the toilet without assistance. In certain circumstances, such a situation may amount to inhuman and degrading treatment, in line with the case law of the European Court of Human Rights.⁵⁶

There were no staff available to provide support for persons with disabilities, and their disability-related needs and vulnerabilities were often not even identified, let alone addressed. The delegation also came across a person who was deaf and noted that prisoners with intellectual, other sensory or other forms of disability, as well as neurodivergent persons faced communication barriers and

55. In this regard, reference is made to [Rec\(2003\)23](#), Recommendation of the Committee of Ministers to member states on the management by prison administrations of life sentence and other long-term prisoners.

56. See, for example, ECtHR, *Kargakis v. Greece*, application no. 27025/13, 14 January 2021.

lacked access to communication tools, such as sign language interpretation or alternative communication support. Further, no meaningful activities and work appropriate to their individual abilities were offered to persons with disabilities and older persons in detention. In this regard, the lack of equal access to activities and work for these prisoners was problematic.

78. The CPT considers that states should make structural adaptations to prisons to support prisoners with physical disabilities, in line with standards applied in the community.⁵⁷ Such persons should have access, on an equal basis with others, to reasonable accommodation and all essential facilities and services, including prisoner accommodation areas, toilets, showers, canteens, areas for activities, education and work, exercise yards, and medical units.

The Committee considers that if states deem it necessary to imprison persons with disabilities or older persons, they have a duty of care and a clear obligation to ensure that the specific needs and vulnerabilities of those prisoners are identified. All persons should have access to reasonable accommodation and be able to live in dignified conditions of detention which meet these needs. This includes full accessibility for persons with disabilities and older persons, the necessary structural adaptations and equipment, as well as access to healthcare, personal hygiene and care, in line with their needs. When required, they should receive assistance in daily activities, psychosocial support, and be provided with an appropriate range of purposeful activities, education and work, with programmes adapted according to their needs. If a prison is unable to offer reasonable accommodation, with suitable and dignified conditions, transfer to a specialised external institution should be considered.

79. The CPT recommends that these precepts be fully implemented within the Greek prison system and that the Greek authorities take steps to ensure that:

- every prison has at least one fully accessible, barrier-free cell with an adapted sanitary annexe for prisoners with physical disabilities;
- all prisoners with physical disabilities and older prisoners can move independently and access all essential facilities and services, including prisoner accommodation areas, toilets, showers, canteens, areas for activities, education and work, exercise yards, and medical units;
- facilities accommodating prisoners with physical disabilities and older prisoners are barrier-free and provided with the necessary equipment;
- all prisoners with intellectual or sensory disabilities are provided with access to communication tools, such as sign language, interpretation or alternative communication support;
- all prisoners with disabilities and older prisoners have access to meaningful activities and work appropriate to their individual abilities;
- a multidisciplinary approach is adopted for managing the detention of persons with disabilities and older persons, involving healthcare and mental healthcare professionals, social workers, close relatives, and the judiciary, to provide appropriate and tailored support and care, including for their personal hygiene where required, and to prepare individuals for their social reintegration;
- prison staff are appropriately trained in identifying and responding to the specific needs and vulnerabilities of prisoners with disabilities and older prisoners.

57. See the Council of Europe's Committee of Ministers Recommendation [R\(98\)7](#) on the Ethical and Organisational Aspects of Healthcare in Prison.

iv. segregation and isolation measures

80. In the prison establishments visited, solitary confinement was rarely used as a disciplinary measure.⁵⁸ Instead, the segregation units were mainly used for “operational reasons” such as for placing prisoners for medical reasons, those on hunger strike, or those committing acts of self-harm, as well as those considered vulnerable due to the crime committed, or those who were being intimidated in the regular wings. However, there were no registers or detailed information recording the placements of these persons in the segregation units, nor their treatment or daily regime as specific records were only maintained in relation to disciplinary sanctions.

81. At Alikarnassos Prison, the separate unit used for isolating prisoners for disciplinary, medical and protection reasons consisted of eight cells with a separate courtyard. The delegation met a prisoner with mobility impairments relying on a cane, who had a diagnosis of epilepsy and suspected tuberculosis, in one of these cells. He was confined to his cell for 23 hours a day, without sufficient access to fresh air and had to sleep on a concrete, floor-level platform, in inadequate conditions of detention and without appropriate supervision, medical oversight and care. Shortly before the visit, he had experienced an epileptic seizure and suffered a traumatic head injury after striking his head against the concrete platform on the floor.

82. At Chania Prison, there were two areas for segregation and isolation measures. The medical unit was located above the infirmary and consisted of eight cells or dormitories of different sizes, used for segregating persons for various reasons. These included for somatic and psychiatric conditions, those with specific vulnerabilities and those placed there for protection and observation purposes. At the time of the visit, 19 prisoners were accommodated in this unit in poor conditions of detention, including one person with severe psychosis. Persons could be held in the unit for extended periods (up to several months) without access to outdoor exercise or any organised activities.

The solitary confinement unit, located in a separate area near A Wing, contained 10 cells, each with a small adjacent yard. At the time of the visit, this unit was reportedly not being used due to electricity problems that required repair. The delegation was informed that, in 2023, a prisoner placed in one of the solitary confinement cells had immolated himself and could not be saved in time. This death case is indicative of the lack of prison staff for supervising the unit, leaving segregated prisoners mostly unsupervised, a situation that the CPT has already criticised in the past.⁵⁹ While the unit had since been renovated, the highly problematic and dangerous practice of inadequate supervision had not improved.

83. At Malandrino Prison, the segregation unit consisted of 10 cells, each with its own small adjoining yard. Cells were equipped with a concrete plinth bed, a moulded concrete table, and a shower and toilet facility. At the time of the visit, the cells were filthy, in a state of total disrepair and unfit for human habitation. The delegation learned that the unit had accommodated five persons for prolonged periods until two days before this visit.⁶⁰ A refurbishment of the segregation area was supposed to commence shortly.



The CPT would like to receive details of the refurbishment of the segregation unit and when it was completed. It would also like to be informed whether any persons have been held in the unit for longer than a week and, if so, for what purpose and what duration.

58. At Chalkida and Nafplio Prisons, the Directors informed the delegation that solitary confinement or segregation are not currently applied; at Malandrino Prison, there was evidence to suggest that since 2023, four men had been sanctioned with isolation for periods ranging from five to 10 days, although there was no evidence to confirm whether the award had been executed.

59. See CPT/Inf (2022) 16, paragraph 69, concerning a fire incident that occurred at the time of the visit of the CPT delegation to Nigrita Prison.

60. The last two men left segregation on 20 January 2025.

84. At Patras Prison, special unit no. 1 consisted of three cells and a large concrete floor area with no functioning artificial lighting at the time of the visit. There was one shower, accessed through a locked barred gate, but no access to outdoor fresh air. All three cells measured approximately 5 m² and were equipped with a concrete plinth but only cell 1 had an adjoining sanitary annexe. Cells Nos. 2 and 3 were dilapidated and filthy, with masonry and plaster littering the floor.

As neither of the cells had a toilet, the persons held in the cells often had to urinate in bottles and defecate in bags as staff were not present to escort them to the toilet and there were no call bells. At the back of both cells, a door, now sealed, with an unglazed window looked out on to a small outdoor yard, which was filthy and filled with bags of excrement and other rubbish and could be considered a health hazard.

85. At the end of the visit, the CPT delegation made an immediate observation under Article 8, paragraph 5, of the Convention and requested that cells Nos. 2 and 3 be taken out of service immediately and not used again until they have been properly reconstructed. It requested to receive confirmation that this has been done within two months.

By letter of 10 April 2025, the Greek authorities replied that the management of the facility had immediately closed the two cells and prohibited their use and that the process of complete reconstruction was underway and would be completed by the end of July 2025.

||| The CPT welcomes the response of the Greek authorities to address the immediate observation. It would appreciate receiving details of the renovation once it has been completed.

86. There were two other special isolation areas at Patras Prison. Special Area 2 consisted of two rooms and an entrance area, all open, and equipped with some 13 beds and a couple of broken bed frames. It was not appropriate for holding persons for more than a few hours. The temporary stay unit, located across the corridor, was a large dormitory equipped with six sets of bunk beds, a shower cubicle and two toilets. The area was accommodating five persons at the time of the visit, three of whom had been held there for between 15 and 20 days, during which time they had not been offered any access to outdoor exercise. The purpose of the temporary stay area was ill-defined: one person was apparently awaiting a disciplinary transfer for verbally abusing an officer, another was on food refusal, a third was awaiting transfer to Korydallos I and a fourth had recently been transferred from another prison.

87. The Committee recognises that the primary duty of the prison management is to safeguard the physical integrity of prisoners, which may mean placing them temporarily in special accommodation. However, this does not mean that these prisoners can be left to languish in sub-standard conditions of detention, without any regime or access to outdoor exercise, direct supervision by prison officers, or the daily attention of healthcare staff.

||| The CPT reiterates its recommendation that the Greek authorities ensure that all prisoners placed in segregation or isolation, for whatever reason, are offered at least one hour of outdoor exercise every day. The outdoor exercise facilities should be sufficiently large for prisoners to exert themselves physically. All cells should be equipped with call bells. Further, the recommendations already made in paragraphs 61 to 66 apply equally to the conditions of detention in segregation units.

||| In addition, all units containing segregation or isolation cells should always be supervised by custodial staff when occupied, and every placement of prisoners in segregation or isolation should be immediately brought to the attention of the healthcare service. The healthcare staff should visit the prisoner immediately after placement and thereafter, on a regular basis, at least once a day, and provide them with prompt medical assistance and treatment as required.

88. The CPT recognises that it may, at times, be necessary to remove prisoners from the general prison population and place them in separate accommodation for their own protection and the good order of the prison. As a rule, such separation should be for as short a period as possible; all appropriate measures should be taken to facilitate the reintegration of the persons into the general prison population, either in the same establishment or in another one. If a prisoner has to be separated for their own protection, that decision must be properly reasoned, documented and reviewed at regular intervals.

During the visit, the CPT found that most of the decisions taken to place prisoners in separate accommodation for their own protection (hunger strikes, acts of self-harm, isolation for somatic reasons or mental illness, or protection from bullying) were taken on an informal basis, without proper procedures and safeguards in place. This is not acceptable and a formal process of documenting all placements in segregation cells must be introduced.

The CPT calls upon the Greek authorities to ensure that all decisions to separate prisoners for their own protection or for “operational” reasons be properly reasoned and documented in a special register (recording the identity of the prisoner, the reasons for the measure, the date and time of the outset and end of the measure, the deciding authority and the precise place(s) where the segregated prisoner has been accommodated). Further, the measure should be reviewed at regular intervals.

c. prison staff

89. Sufficient numbers of staff, in particular custodial officers but also other categories, are essential for the proper functioning of a complex institution such as a prison. Further, staff should be properly trained and supported, and adequately remunerated. Insufficient staffing levels in Greek prisons have been a structural deficiency for many years. The CPT has met many dedicated and hard-working staff members, but they are often overwhelmed by the tasks facing them due to their limited numbers. Custodial officers are not present on the accommodation wings but remain in booths outside, merely controlling entry and exit to the wings, although in prisons such as Korydallos I and Patras, the one or two officers struggle even to keep a clear record of prisoners exiting the wings.

90. The CPT has repeatedly stressed that an inadequate number of custodial staff renders prisons insecure for both prisoners and staff; in particular, it impedes any efforts to maintain effective control, which often leads to stronger groups of prisoners being able to exercise unchecked their powers over other inmates. The delegation observed in the prisons visited how the inmate population was separated along ethnic or cultural lines and that, within each of these specific groups, there was a defined hierarchical structure, which all inmates adhering to that group were obliged to follow. It was also evident that prison staff in many instances relied upon the leaders of these groups to maintain order in an establishment. Indeed, as prison officers are located outside of the accommodation wings and have minimal contact with the inmates, this negates any possibility to apply a dynamic security approach.

Further, low staffing levels make it nearly impossible to provide an acceptable regime for prisoners.

91. The custodial staffing numbers in all the prisons visited were inadequate.⁶¹ These numbers were dangerously and unprofessionally low, in particular at Korydallos I Prison, with only 20 officers on duty in the morning and afternoon for over 1 800 prisoners, and at Chania Prison, with only 10 officers on duty for 663 prisoners during the day. At Patras Prison, the situation was also precarious, with 13 officers on the morning shifts and 10 in the afternoons to manage 540 prisoners.

61. At Chalkida Prison, 7 to 8 custodial officers were responsible for 172 prisoners during the day shifts while at Nafplio Prison, 11 custodial officers were on duty during the morning shift and nine in the afternoon shift for 345 prisoners. At Malandrino Prison, the overall numbers were slightly better with 105 officers for 475 prisoners.

92. The CPT notes that such low staffing levels, combined with a lack of professional management and appropriate training, and low salaries for custodial officers, result in a situation whereby corruption is at a high risk of occurrence. Indeed, the situation in the prison establishments visited gives significant credence to the numerous allegations received by the delegation from prisoners who suggested that some of the custodial officers were implicated in corrupt practices.

In this context, the professional training (initial and in-service) in ethics for custodial staff is of vital importance, taking into consideration the specificity of their duties and vulnerabilities, and with a practice-oriented focus. In addition, a regular communication strategy is necessary, in order to evidence ethical standards to the front-line workforce.⁶²

93. During the high-level talks of 19 June 2025, the CPT was informed by the Greek authorities that, between 2019 and 2024, a total of 1 107 staff members, including 1 020 security staff had been recruited across Greek prisons. However, many of them either replaced staff who had previously retired or they have already quit their job and, therefore, they do not represent a substantial net increase in staffing numbers. Nevertheless, it is positive that the authorities intend to hire an additional 417 staff members, including 352 security officers, within one year, and a further 460 prison officers, including 340 security officers, by the end of 2027. Emphasis will reportedly be given to streamlining and accelerating the recruitment process. Moreover, in the framework of the revision of the new organisational chart of the General Secretariat for Anti-Crime Policy, it is planned to increase the authorised staffing positions of prison officers from 5 845 to 7 500 (representing an increase of 28.3%), with the aim of improving the staff-prisoner ratio to 1.6, which will – if fully implemented – be a significant improvement.

94. The CPT recommends that the Greek authorities continue their efforts in recruiting prison officers across all branches, including security personnel, with the aim of improving the staff-prisoner ratio.

To obtain a full picture of the staffing situation in prisons, the Committee would like to receive information on the number of prison officers who have either retired or quit their job between 2019 and 2025. Further, in light of the of the authorities' plans to increase the authorised staffing positions of prison officers to 7 500, it would also like to be informed whether additional resources to recruit the necessary custodial officers have been reflected in the budgets for 2026 and 2027, as well as for their proper training. The CPT would also like to receive information on the initial training course that newly recruited custodial officers are required to undergo before being deployed to work in a prison and, for 2025, the numbers of new staff deployed to each prison.

Moreover, the working conditions of prison staff in Greece should be improved, notably by phasing out the widespread recourse to double shifts and unpaid overtime.

95. In all establishments visited, the CPT delegation spoke to prison staff who underlined the necessity of psychological support and referred to the cumulative effect of unaddressed psychological pressure. Many custodial officers interviewed had the best intentions, but were called to undertake disproportionate burden, and were at the verge of burnout. Many had accumulated rest days which they could not take (at least 200 for some officers at Patras Prison), while at some prisons such as Chalkida officers were called back from leave due to staff shortages.

62. See also, GRECO, Evaluation report-Fifth Evaluation Round on Greece, GrecoRC5(2020)4, <https://rm.coe.int/fifth-evaluation-round-preventing-corruption-and-promoting-integrity-i/1680a5a148>.

96. Custodial officers interviewed by the delegation also mentioned the need for crisis management and de-escalation training in order to react appropriately in cases of physical and verbal attacks and threats.

97. The Committee considers that the staffing within the prisons should mirror society and, to this end, mixed-sex staffing can have a positive impact. The presence of male and female staff in all prisons can have a beneficial effect in terms of both the custodial ethos and in fostering a degree of normality in a place of detention. In addition, greater efforts should be made to recruit staff members from some of the larger minority groups that make up the prison population such as Albanian, Arabic, Pashtu and Urdu speakers.

98. **The CPT calls upon the Greek authorities to develop a comprehensive plan for staff training, both from the outset of the employment and regular refresher courses, including on mental health, psychology, suicide prevention, anti-bullying, cultural awareness and interpersonal communication skills, in order to strengthen the motivation and performance of all staff.**

As part of the plan, the CPT would like to be informed about the in-service training envisaged for all prison officers, and the prospects of further promoting mixed-sex staffing within prisons and of recruiting staff with diverse language skills.

Further, all senior prison managers should be provided with professional training in management with a view to introducing a professional management career path within the Greek prison system. Increased resources should also be put towards supporting staff, such as mentoring and the provision of individual psychological counselling and team supervision. Moreover, the CPT recommends attracting prison officers from different cultural and ethnic backgrounds to reflect better the inmate population.

99. At Patras Prison, the CPT delegation was informed that in the event of a violent incident, the external guards on duty, equipped with firearms, would enter the prison to control and isolate the inmates under the orders of their outside commander, not the prison director. There was no detailed record of such interventions, even when use of force was applied.

100. **The CPT reiterates its recommendation,⁶³ that all staff, including perimeter guards, who are called into the wings or to the disciplinary cells in order to control situations of inter-prisoner violence and disobedience must be trained in the proportionate use of force. Further, perimeter guards should not bear any firearms when entering the accommodation wings. Further, there must be stringent recording of all instances of use of force, as well as of all interventions by the perimeter staff.**

Moreover, perimeter staff should only ever enter the prison under the direct orders and supervision of the Director or Chief Guard, or a senior custodial officer mandated by them. It is also imperative that after each intervention by the perimeter staff there is a full report drawn up on their actions both by the supervising officer and by the individual guards, notably if any use of force is applied, including an assessment of its necessity and proportionality.

101. Staffing levels must be aligned with the actual requirements of a modern penal system. Sufficient personnel are needed at all levels to ensure appropriate living and detention conditions. Without adequate staffing, it is impossible to run a modern penal system. This also requires that a range of specialist staff such as social workers, social education workers, psychologists, occupational therapists and teachers are present in sufficient numbers. According to the staffing plan and the information received by the prison management, there is not necessarily one psychologist in every prison.

63. CPT/Inf (2020) 15, paragraph 26.

The CPT recommends that the Greek authorities ensure that sufficient positions of specialist staff, including social workers, social education workers, psychologists, occupational therapists and teachers, are foreseen in the staffing plans and present across all Greek prisons. They should also be properly trained in how to prevent situations of violence from occurring, as well as in how to intervene in order to de-escalate a situation or manage a challenging prisoner using verbal techniques.

d. healthcare services

102. The CPT has repeatedly highlighted serious structural deficiencies in healthcare provision within Greek prisons.⁶⁴ During its 2025 visit, these deficiencies remained evident across all establishments visited. The Committee remains particularly concerned about the persistent severe shortage of healthcare staff and the continued absence of integrated healthcare management. These systemic deficiencies exacerbate many of the other longstanding shortcomings, including limited access to a doctor, unsafe dispensing of medication, inadequate medical screening upon admission, failure to properly record injuries, insufficient mental healthcare, and a high prevalence of untreated substance dependence. Addressing these challenges and achieving equitable healthcare for incarcerated persons will require fundamental, systemic reform and substantial investment, notably in healthcare staff.

The CPT recommends that the Greek authorities (Ministry of Health and Ministry of Citizen Protection) commission a comprehensive external assessment of healthcare needs and a review of prison healthcare services, to be carried out by an appropriate independent body. The findings and conclusions should serve as a basis for the elaboration of a strategy aimed at systemic reform of prison healthcare provision, ensuring that identified needs are effectively met. The strategy should notably address the allocation of sufficient financial and human resources necessary to deliver adequate healthcare services for prisoners.

103. Healthcare staffing levels were inadequate in all the prisons visited. Due to a serious shortage of medical doctors and nurses both within prisons and in the wider community – particularly acute in certain regions – the Greek authorities had implemented various ad hoc measures. These included contracting visiting doctors,⁶⁵ engaging physicians from the Special Regional Medical Centres (SRMC),⁶⁶ including rural doctors,⁶⁷ and providing permanent doctors employed by the General Secretariat for Anti-Crime Policy⁶⁸ or by the Ministry of Health.⁶⁹ This fragmented approach led to considerable disparities in healthcare provision, with an overreliance on visiting doctors and a lack of full-time, permanent medical staff. As a result, the capacity to provide timely and adequate healthcare to meet prisoners' complex medical needs was compromised, and the healthcare response was largely reactive, frequently requiring emergency transfers to community hospitals.

104. None of the male prisons visited had a full-time, resident general practitioner (GP). Alikarnassos, Chalkida, Chania, and Patras Prison each relied on one GP from the regional hospital,⁷⁰ while Malandrino Prison had a rural doctor working under the same scheme. At Nafplio Prison, a new rural doctor and a GP (employed by the General Secretariat for Anti-Crime Policy) had been recently appointed, following the departure of the previous GP in December 2024. Patras Prison also had a "replacement" doctor who rarely visited the prison, and one additional GP post had been approved but remained unfilled at the time of the visit. The presence and availability of doctors varied significantly: while some doctors attended four to five

64. See CPT/Inf (2022) 16, paragraphs 56 *et seq.*

65. See Article 27 (3) of the Penitentiary Code, which allows for contracting visiting doctors or nurses to cover the needs of the prison if there are no permanent health personnel available.

66. In addition to their duties in prisons, they also covered various 24-hour shifts per months at the SRMC.

67. Generally, young doctors work for 12 months as rural doctors to obtain a diploma in their specialisation.

68. Seven doctors of various specialities were employed by the General Secretariat of Anti-Crime Policy, including two at Korydallos Special Health Centre for Prisoners, two at Eleonas Women's Prison, one at Larissa Prison, one at Patras Prison and one at Drama Prison.

69. The Ministry of Health employed only 10 doctors, including nine at the Korydallos Special Health Centre for Prisoners and one at Patras Prison.

70. The GP at Chania Prison had just returned from maternity leave after a prolonged period of absence.

days per week, others visited the prison only once or twice weekly, as was the case at Malandrino Prison.⁷¹ Each of the five male prisons had a visiting dentist (usually weekly), and Alikarnassos and Chania Prisons also had a visiting orthopaedist. In contrast, Korydallos I Prison relied entirely on 13 visiting doctors (most once or twice weekly or on-call), none of whom was a GP.⁷² This marked a significant deterioration compared to the 2021 visit, when six GPs visited the prison weekly.

Considering the population and capacity of the prisons (see paragraph 31), the doctor presence was deemed satisfactory at Chalkida Prison and acceptable at Nafplio Prison, but inadequate or even entirely insufficient at all other establishments visited.

105. A similar situation existed regarding nursing staff. Except for Chania and Malandrino Prisons, which each had three nurses, most prisons had only one or two qualified full-time nurses.⁷³ At the time of the visit, a third nurse was to be appointed at Patras Prison. The situation at Chania Prison was particularly critical, with a single trained nurse overwhelmed by their workload and responsibilities. Nurses also reported that they had not received any professional ongoing training, some for decades.

To compensate for the shortage of qualified nursing staff, prison administrations appointed “custodial nursing assistants” – prison officers employed as medical orderlies – who had only basic first-aid training. Some were required to work 24-hour shifts. Their main task was to distribute medication and assist medical personnel. At Chalkida, Chania and Nafplio Prisons, the delegation observed that prisoners were acting as “nursing assistants”.

In sum, almost none of the prisons visited had qualified healthcare personnel present during night shifts or during weekends.⁷⁴ The CPT must stress that “custodial nursing assistants” cannot substitute for qualified medical professionals. Moreover, the practice of involving prisoners in healthcare tasks should be ended.

106. Given the serious staffing deficiencies outlined above, there is a clear need to reinforce healthcare staffing levels in Greek prisons. In light of the overall shortage of medical doctors in Greece, greater emphasis should perhaps be placed on increasing the nursing complement. The CPT has, as a general rule of thumb, considered that a prison ought to have one GP for 300 prisoners and one nurse for 50 prisoners. Of course, this figure is approximate as the real needs will vary from prison to prison depending on the profile of the prisoner population (turnover of prisoners, remand, age, comorbidity rates, etc.).

The CPT calls upon the Greek authorities to take immediate action to strengthen healthcare staffing in all prisons, in light of the above remarks. In particular, the authorities should significantly increase the number of qualified nurses to ensure daily 24/7 coverage, including at weekends, and ideally also including nurses with mental health qualifications. Vacancies of general practitioners should also be filled. The staffing levels should be adjusted if the number of prisoners in an establishment increases significantly.

71. At Alikarnassos Prison, the GP worked on average two to three days per week between 08:00 and 15:00, including on weekends; at Chalkida Prison, the GP was present almost every weekday between 08:00 and 14:00 (except when his presence was required at the SRMC); at Chania Prison, the GP was available from Monday to Friday between 08:00 and 15:00; at Malandrino Prison, the rural doctor visited the prison usually once a week – and rarely twice – between 10:00 and 16:00; at Nafplio Prison, the rural doctor usually worked in the prison up to four times per week, on weekdays, between 08:00 and 14:00, and the visiting GP came once a week between 09:00 and 12:00; and, at Patras Prison, the GP was present four times per week between 08:00 and 15:00.

72. This included two dentists, a dermatologist, a haematologist, a neurologist, an ophthalmologist, an orthopaedic doctor, a pathologist, a physiatrist, a pulmonologist, two psychiatrists, and a urologist.

73. There was one nurse at Alikarnassos Prison (working between 08:00 and 15:00 on weekdays and between 08:00 and 14:00 on weekends), two nurses at Chalkida Prison (working weekdays in two shifts between 07:00 and 15:00 and between 14:00 and 22:00), one nurse at Chania Prison (working weekdays between 07:30 and 14:00), three nurses at Malandrino Prison (working weekdays in two shifts between 07:00 and 14:00 and between 14:00 and 21:00), two nurses at Nafplio Prison (working weekdays in two shifts between 07:00 and 14:00 and between 08:30 and 15:30), and two nurses at Patras Prison (one working weekdays between 07:00 and 15:00 and one working every day between 08:00 and 16:00). The delegation did not assess in detail the healthcare situation at Korydallos I Prison.

74. With the exception of Alikarnassos and Patras Prisons.

107. The CPT also calls upon the Greek authorities to ensure that prisoners are no longer involved in healthcare duties, particularly the dispensing of medication. This practice should be discontinued at Chalkida, Chania, and Nafplio Prisons, and any other prison where it occurs. The Committee requests the provision of a concrete timetable for its phasing-out in all prisons.

In addition, the CPT reiterates its longstanding position that, in principle, prison officers should not perform medical functions. Until adequate healthcare staff are recruited, prison officers without medical qualifications should not carry out “nursing assistant” roles. Any qualified prison officer working in the healthcare service of a prison should operate under the authority of the senior doctor or nurse. Further, all nursing staff should receive appropriate supervision, support, and ongoing professional training. Reference is made to the Committee’s comments and recommendation in paragraphs 115 and 116 on preparing and dispensing medication as well as in paragraph 121 regarding medical confidentiality.

108. In their communication dated 11 April 2025, the Greek authorities informed the CPT that several legislative and regulatory measures are expected to significantly increase healthcare staffing levels in prisons. In particular, (a) Law 5161/2024 will enable all prisons and the three therapeutic facilities to collaborate with medical professionals (university education level) across all specialties, who will be remunerated per services rendered; (b) a draft Joint Ministerial Decision by the Ministers of Citizen Protection, Finance and Health – currently pending issuance – will increase the number of private visiting doctors assigned to prisons and therapeutic facilities; and (c) an additional 70 visiting doctors are expected to be recruited, completing the existing 151 visiting doctors across the prison system. Further, another draft Joint Ministerial Decision – also pending issuance – will set the framework for the remuneration and working conditions for visiting nurses in prisons, with plans to employ an additional 165 visiting nurses nationwide.

These measures would represent an important step towards addressing the chronic staffing shortfalls in prison healthcare.

The CPT would like to be informed of the number of doctors and nurses who have effectively taken up service in Greek prisons and the three therapeutic facilities as a result of these measures as of 1 December 2025.

109. Access to a doctor was generally controlled by custodial staff in all prisons visited. Further, prisoners were also required to inform custodial staff of the reasons for requesting a medical consultation, in at least two prisons. The situation at Chania was particularly concerning in terms of access to a doctor: the severe shortage of healthcare personnel, combined with overcrowding, placed an excessive burden on the sole qualified nurse. This nurse lacked support and supervision, while the general practitioner had only recently returned from a prolonged and repeated absence. As a result, waiting times for medical examinations, including initial medical screening, were lengthy, and many somatic health problems were either not detected in time or remained untreated (see, for example, paragraphs 111 and 114).

The CPT recommends that the Greek authorities ensure that prisoners at Chania Prison are granted timely access to a medical doctor. This will require improved organisation of healthcare services, additional staffing resources, and the prompt replacement of healthcare personnel on extended leave. Further, custodial staff should not screen or filter requests to consult healthcare staff or ask prisoners for the reasons for requesting a medical consultation. Instead, such requests should be collected by healthcare professionals, either in person or, for example, through dedicated locked letterboxes for requests for medical consultations placed within the wings to which only members of the healthcare team have access, in order to fully comply with the requirements of medical confidentiality.

The CPT also encourages the Greek authorities to continue expanding the use of tele-medicine as a means of ensuring prompt medical access in all prisons. It would like to receive updated information on the current implementation of telemedicine services in Greece, including a detailed breakdown by prison.

110. In their communication of 11 April 2025, the Greek authorities informed the CPT that the new Penitentiary Code provides for the issuance of temporary healthcare identification numbers for prisoners without health insurance. These numbers guarantee uninterrupted access to healthcare for both Greek and foreign national prisoners who do not hold, and are illegible for, a social security number (*Αριθμός Μητρώου Κοινωνικής Ασφάλισης – ΑΜΚΑ*) or a temporary insurance and healthcare number for foreign nationals (*Προσωρινού Αριθμού Ασφάλισης και Υγειονομικής Περίθαλψης Αλλοδαπού - ΠΑΑΥΡΑ*). Between September 2023 and March 2025, nearly 8 000 such temporary healthcare identification numbers were issued. This is a hugely important step forward, which the CPT welcomes, as it removes a major barrier to healthcare access for uninsured prisoners.

111. At the time of the visit, the inadequate provision of healthcare services at Chania Prison – largely due to a shortage of qualified healthcare staff and delays in access to a doctor – was a matter of serious concern. The delegation observed an alarming situation in which dozens of inmates were found in urgent need of medical care. Many were suffering from serious and deteriorating health conditions that were either neglected or left untreated, despite the return of a general practitioner and frequent transfers to the community hospital. The following two examples are illustrative:

- i) One prisoner suffered from a severe dermatological condition involving deep fissures and infection on his hands and feet. Despite repeated requests, he had received insufficient specialist care since his admission in May 2024. Diagnosed with severe psoriasis, he was not provided with the prescribed topical treatment (cream) at the time of the visit and his dermatological condition was progressively worsening. When examined by the delegation’s medical doctor, he was in extreme pain, with open wounds, contractures and limited mobility in his fingers and toes. As a result, he was unable to maintain personal hygiene and had to rely on his cellmate to assist him in urinating and defecating in plastic bags. When the delegation met with the prisoner, it observed a large bag containing several dozens of plastic bags filled with excrement which had not been collected by prison staff. In the CPT’s view, the neglect of this patient resulted in him being placed in a situation which may amount to degrading treatment.
- ii) Another prisoner, insulin-dependent and suffering from complications such as leg ulcers due to his uncontrolled diabetes, had been reliant upon the assistance of a prison officer since August 2024. The officer failed to administer the required doses of insulin at an appropriate time and frequency, and no monitoring or recording of blood glucose levels or insulin dosages was performed. The prisoner experienced frequent dizziness due to significant blood sugar fluctuations and, in December 2024, suffered a diabetic coma, requiring an emergency hospital transfer.⁷⁵

112. At the end-of-visit talks, the delegation made an immediate observation under Article 8, paragraph 5, of the Convention and requested urgent action from the authorities to:

- transfer the prisoner with severe dermatological condition to a dermatologist and provide appropriate nursing care; and
- ensure that the prisoner with uncontrolled diabetes receives care and assistance from a qualified nurse.

113. In their response of 11 April 2025, the Greek authorities informed the CPT that the first prisoner had been transferred, on 4 February, to the Korydallos Special Health Centre for Prisoners, where he has since received appropriate medical care and close monitoring. He is also undergoing specialist treatment at the psoriasis clinic of the dermatology hospital in Athens, with positive developments and additional lab tests ongoing. Regarding the second prisoner, the authorities stated that he is now receiving appropriate care and monitoring at the prison infirmary. Nursing staff perform three daily blood sugar measurements, which are systematically recorded in a special logbook along with administered insulin doses. These are welcome steps.

75. He was admitted in a critical condition, with suspected diabetic ketoacidosis (DKA) and severe hyperglycaemia (his blood sugar level was over 750 mg/dL).

114. However, these two cases were not isolated. The delegation also met another insulin-dependent prisoner at Chania Prison who self-monitored his blood sugar level. He had advanced diabetic foot syndrome, including ulcers on the left foot, and a high risk of gangrene. He also suffered from chronic kidney disease and monocular blindness in the left eye. His insulin therapy was stored in his cell which lacked refrigeration, compromising the drug's efficacy. Moreover, he had to rely on family support for purchasing insulin as no institutional assistance was provided. His medical condition posed multiple high-risk factors, particularly due to poorly controlled diabetes, chronic kidney impairment and inadequate wound management, requiring regular monitoring and urgent medical intervention to prevent potential life-threatening complications.

The CPT recommends that all insulin-dependent prisoners be provided with immediate diabetes control and a comprehensive, multidisciplinary assessment of their complex medical needs, including vascular, renal and infectious disease evaluations. Their insulin should be properly stored in a refrigerator, and they should receive essential medical supplies free of charge.

Further, the CPT recommends that a strict protocol be drawn up to ensure proper documentation and regular monitoring of blood sugar levels and insulin doses administered. The individuals concerned should also be provided with a tailored dietary plan. The CPT would also like to receive confirmation that all insulin-dependent prisoners at Chania Prison who require assistance are receiving insulin exclusively from qualified healthcare professionals.

115. Once again, the delegation observed that the practice of preparing and dispensing medication remained fundamentally unsafe in all the prisons visited. Only at Chalkida Prison was medication prepared by qualified nurses. At Chania Prison, for example, a custodial guard without formal medical or pharmaceutical training had been appointed as the prison "pharmacist". Similarly, medication dispensing was often carried out by "custodial nursing assistants", including during the presence of qualified nurses, who were insufficient in number. Further, at Chania Prison, medicines were not distributed according to a fixed evening schedule, and at Chalkida Prison, prisoners were tasked with medication distribution on weekends. The delegation also observed once again prisoners engaged as "nursing assistants" preparing in or distributing medication – including psychotropic drugs (see also paragraphs 0 to 264 regarding the prescription of psychotropic medication), in the absence of any healthcare or custodial staff supervision, as noted at Chania Prison.

Additionally, at both Chania and Chalkida Prisons, there was a lack of essential medicines, including painkillers and antibiotics, at the time of the visit. This was reportedly due to an inadequate supply, as medication was ordered only twice yearly,⁷⁶ combined with insufficient financial resources. At Alikarnassos and Patras Prisons, medicines were distributed from a communal stock rather than individually prepared supplies. In Patras Prison, the delegation observed medication containers filled with multiple different drugs at once, creating a high risk of errors, including dosage mistakes. Further, in all male prisons visited, almost all psychotropic medication was routinely crushed before administration.⁷⁷ However, this was reportedly done without fully emptying or cleaning the tablet crusher between uses, posing significant risks to patient safety and potentially affecting the bioavailability of medication.

116. The CPT calls upon the Greek authorities to urgently review the system for the preparation, dispensing, and administration of medication in all prisons to ensure it is both safe and accountable. In this context, reference is made to the recommendation in paragraph 107 concerning the gradual phasing out of prisoners and custodial staff involvement in healthcare tasks, to ensure compliance with Greek legislation.⁷⁸

76. In contrast, in the other male prisons visited, supply was ordered every three to four months.

77. This was reportedly done to prevent diversion and overdoses.

78. See Article 2 of Law 3418/2005.

In particular, there should be a procedure for psychotropic medication intake that is always supervised in person by qualified healthcare staff, who should verify the patient's identity and prescription. At Chania Prison, as in all prisons, medication should be distributed at consistent, scheduled times. At Alikarnassos and Patras Prisons, medicines should be prepared by qualified nursing staff in individual dispensers. The unsafe practice of routinely crushing tablets prior to dispensing psychotropic medication should be ended in all prisons.

Further, the CPT recommends that, at Chania and Chalkida Prison, medication is supplied more than two times per year to ensure continuous availability of essential drugs.

117. The CPT has repeatedly emphasised the importance of a proper medical screening of newly arrived prisoners, particularly in establishments which constitute points of entry to the prison system. Such screening is essential, particularly to prevent the spread of transmissible diseases and suicides, and for recording injuries in good time, and should be conducted within 24 hours, initially by a nurse and, if required, subsequently by a doctor.

However, this standard was still not met in most of the prisons visited. While newly arrived prisoners were generally seen by a qualified nurse within 24 hours, the screening often consisted merely of questions on the patient's medical history. At Chalkida Prison, a physical examination by a doctor was usually carried out within 72 hours. However, in the other male prisons visited, most prisoners had not been medically examined for more than a week. For instance, at Manadrino Prison, a prisoner with alleged injuries was examined only two weeks after admission.

Positively, in most of the male prisons visited, prisoners were generally screened for blood-borne and infectious diseases within one week of being examined by a doctor. However, at Nafplio Prison, only a limited number of prisoners were tested for HIV and Hepatitis B and C. By contrast, Patras Prison also screened for syphilis and tuberculosis (via X-ray or Mantoux).

The CPT calls upon the Greek authorities to ensure that every newly arrived prisoner, at Chania and Malandrino Prisons in particular, and in all other prisons, is comprehensively interviewed and physically examined by a doctor or a fully qualified nurse reporting to a doctor within 24 hours of admission. All newly admitted prisoners should be systematically offered screening for transmissible diseases such as Hepatitis B and C, HIV, and tuberculosis. In addition to screening for blood-borne and transmissible diseases, this process should assess mental healthcare needs, substance use disorders, or other vulnerabilities.

118. As in previous visits, the absence of a standardised procedure for screening and recording injuries remains problematic. The relevant entries in prisoners' medical files were generally cursory, and trauma registers, where they existed, mainly listed cases of self-harm or inter-prisoner violence. Moreover, no clear protocols were in place requiring doctors to report allegations of police ill-treatment to the competent prosecutor. Questionnaires and forms used for admission in the prisons visited did not even include a section on injuries.

In the CPT's view, the accurate and timely documenting and reporting of forensic medical evidence is essential to the effective investigation of ill-treatment allegations which, in turn, will act as a strong deterrent to future abuse. For prison medical services to fully play their role in preventing ill-treatment, it is incumbent on every prison doctor to systematically screen, record, and report all injuries observed on prisoners. Yet the CPT again met prisoners who alleged ill-treatment by police but were not properly examined upon admission, despite reportedly visible injuries at the time, which were not recorded in their medical files.

119. The CPT once again reiterates its recommendation that steps should be taken in all establishments to ensure that, upon admission to prison, every person undergoes a thorough medical examination following which a detailed record is established. The same procedure should apply following a violent incident in prison or when a prisoner is returned by the police after investigative activities.

The medical record should include:

- i) an account of statements made by the person which are relevant to the medical examination (including the description of their state of health and any allegations of ill-treatment made by them),
- ii) a full account of objective medical findings based on a thorough examination;
- iii) the healthcare professional's observation in light of i) and ii), indicating the consistency between any allegations made and the objective medical findings.

The record should also contain the results of additional examinations performed, detailed conclusions from any specialist consultations, and treatment applied for the injuries or any further procedures conducted.

Recording of the medical examination in cases of injury should be made on a special form provided for this purpose, with "body charts" for marking injuries that will be kept in the medical file of the prisoner. Injuries should be photographed, and the photographs filed in the medical record of the person concerned. In addition, documents should be compiled systematically in a special trauma register, in which all types of injury should be recorded.

The existing procedures should be reviewed to ensure that whenever injuries are recorded by a healthcare professional which are consistent with allegations of ill-treatment made by a prisoner (or which, even in the absence of allegations, are indicative of ill-treatment), the report is immediately and systematically brought to the attention of the relevant investigative authority.

The healthcare professional should advise the prisoner concerned that the writing of such a report falls within the framework of a system for preventing ill-treatment, that this report must automatically be forwarded to a clearly specified independent investigative authority and that such forwarding is not a substitute for the lodging of a complaint in proper form. The results of every examination, including the above-mentioned statements and the healthcare professional's opinions/observations, should be made available to the prisoner and to their lawyer.

The national authorities should offer special training to healthcare professionals on the manner in which medical screening of prisoners is to be performed, on the recording of any injuries observed and on the reporting procedure, in line with the revised Istanbul Protocol.⁷⁹

States should also ensure that there are no reprisals against any healthcare professionals in their duty to record and report injuries.

79. Office of the United Nations High Commissioner for Human Rights (OHCHR), Manual on the Effective Investigation and Documenting of Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment ([Istanbul Protocol](#)), Professional Training Series No. 8/Rev. 2, 2022.

120. More generally, medical records were often inadequately kept and incomplete. This was particularly problematic when external doctors visited prisons, as most maintained their own personal logbooks, separate from institutional records. Documentation was frequently scant, omitting diagnoses or reasons for hospitalisation, thereby rendering effective follow-up extremely difficult.

The delegation was informed that the prison computer system, which includes electronic medical records, had been updated in 2024 following a long period of inactivity, and that a ministerial order had mandated its systematic use. Nevertheless, in most prisons visited, the system was not or not fully being used in practice, and there appeared to be no effort being made to replace paper records with electronic records.

The CPT recommends that the Greek authorities take steps to improve the quality and completeness of medical records in all prisons. Further, the Committee would like to receive information on the concrete measures taken to ensure the systematic use of electronic medical files for prisoners across the prison system, and whether the necessary IT infrastructure is in place to support their effective operation.

121. In contrast to previous visits, the delegation found that medical confidentiality was generally respected during medical examinations of prisoners by healthcare staff, with prison officers usually being absent, which is an improvement. However, the continued involvement of custodial officers and prisoners in nursing tasks, including the distribution of medication, undermines medical confidentiality. While “custodial nursing assistants” had access to medical files, “prisoner nursing assistants” reportedly did not.

Reference is made to the Committee’s recommendations in paragraph 107 regarding the gradual phasing out of the involvement of custodial staff in healthcare-related tasks, to ensure that medical confidentiality is strictly adhered to in all prisons. By contrast, the CPT calls upon the Greek authorities to end immediately the use of “prisoner nursing assistants” in healthcare-related tasks.

122. Mental health provision was either severely deficient or entirely absent in the prisons visited. Many prisoners had mental health problems, including disorders due to substance use, often exacerbated by inadequate conditions of detention, which were typically addressed only through pharmacotherapy, but otherwise left untreated. Access to a psychiatrist varied across the different prisons visited: there were reportedly two visiting psychiatrists who visited Korydallos I Prison, one psychiatrist visited both Alikarnassos and Chania Prisons, once per week and at Patras Prison, a psychiatrist visited only once per month. There was no regular psychiatric presence at all in Chalkida, Malandrino, or Nafplio Prisons. Chalkida Prison did not even provide access to community mental health services. At Malandrino Prison, telemedicine sessions were held three times per month on a rota basis by two psychiatrists from the Psychiatric Hospital of Attica. At Nafplio Prison, only two patients had access to a community psychiatrist every second week. Further, apart from Chalkida and Chania Prisons,⁸⁰ the other male prisons visited had no psychologist at all.

Given the high prevalence of mental healthcare needs among prisoners, the CPT recommends that the Greek authorities significantly increase the mental healthcare provision in the prisons visited.

The CPT also recommends the expanded use of telemedicine consultations in all prisons where a regular on-site psychiatric presence by a visiting psychiatrist cannot be regularly guaranteed.

Further, the CPT recommends that, as a first step, vacant positions for psychologists, if possible clinical psychologists, be urgently filled, with the aim of addressing mental health needs with a multidisciplinary therapeutic approach, rather than exclusively by pharmacotherapy.

80. Even in these two prisons, the psychologist did not have the time to provide clinical therapy sessions.

123. The delegation was struck by the very poor practice of prescribing psychotropic medication, which appears closely linked to the lack of psychiatric care for prisoners. Across many prisons, many prisoners were receiving medium to high doses of psychotropic drugs over prolonged periods, often for years on end, with polypharmacy being common. Many prescriptions lacked a proper International Classification of Diseases (ICD)-coded diagnosis, and medical files examined by the delegation’s medical doctors often failed to document the original prescription, or the medical reason or duration for the treatment.

At Chalkida Prison, for instance, over half of all psychotropic prescriptions were issued without any documented medical justification, often at high doses. Pregabalin was frequently overprescribed by certain psychiatrists, and general practitioners reported ethical dilemmas in managing substance dependence stemming from inappropriate prescribing. Approximately 80% of prisoners at Chalkida Prison were receiving psychotropic medication, and half were prescribed Pregabalin;⁸¹ benzodiazepines were also widely used. In many cases, it appeared that GPs simply renewed previous prescriptions based on prisoners requests, without re-evaluating medical necessity. This led to widespread dependence on psychotropic medication, which was described as a major problem in most prisons visited.

Further specific examples illustrate the problem. At Nafplio Prison, a prisoner who was continued on a dangerously high dose of psychotropic medicine,⁸² originally prescribed two years earlier. The community psychiatrist recommended the dosage be reduced slightly which led to the prisoner resorting to self-harm and refusing to see her again and the prison nurse contacting the psychiatrist to request that the previous, higher dose be reinstated to keep the prisoner calm. Another prisoner who had temporarily requested to stop his psychotropic medication twice as a prerequisite to gain access to work signed “solemn declarations” but, in both instances, later resumed treatment due to severe withdrawal symptoms (heightened anxiety, sleep problems and hand tremors) linked to the abrupt cessation of treatment, again, without psychiatric review. At Patras Prison, a prisoner initiated a hunger strike and self-harmed after his medication dose was reduced. He received no regular psychiatric monitoring or counselling, due to insufficient staffing.

124. In light of the above findings, the CPT recommends that the Greek authorities fundamentally review the prescription policy and practices for psychotropic medication in all prisons. In particular, the resort to polypharmacy and the prescription of pregabalin and other psychotropic drugs should be brought into line with recognised clinical guidelines. To this end, clear guidelines and prescribing protocols should be developed and adhered to. All prescribers should be clearly informed of the risks and potential for abuse of psychotropic medications, notably pregabalin. The initiation and discontinuation of such medications should only be gradually increased or decreased, be closely monitored and regularly reviewed to prevent adverse effects and dependency. Accurate ICD-coded diagnoses should underpin all prescriptions.

125. The treatment of substance use disorders has been examined in previous CPT reports.⁸³ At the time of the visit, Medication for Opioid Use Disorder (MOUD) was now being provided by the Organisation Against Drugs (*Οργανισμός Κατά των Ναρκωτικών – ΟΚΑΝΑ*) at two male prisons, namely Korydallos I and Patras Prisons. While this represented progress in implementing a long-standing CPT recommendation, these services remain insufficient, given the high prevalence of dependence among prisoners, including in other prisons visited. Although prisoners with significant dependence issues were reportedly transferred to Korydallos I or Patras Prisons, the delegation heard consistent accounts, both from prisoners and healthcare staff, of long waiting periods for such transfers, sometimes stretching over several months.

81. While the usual prescribed dose of Pregabalin is between 150 mg and 600 mg a day, split in two or three separate doses, some prisoners in Greek prisons were prescribed over 2 000 mg (seven 300 mg tablets per day) for unknown reasons, based on inadequate diagnoses.

82. Seven doses of 300 mgs of pregabalin per day, for a total of 2 100 mgs per day.

83. See, for instance, CPT/Inf (2022) 16, paragraphs 66 to 68.

This situation frequently led to the abrupt discontinuation of MOUD initiated in the community. For instance, at Nafplio Prison, one prisoner had his buprenorphine treatment – maintained for over three years – terminated abruptly upon admission. The European Court for Human Rights has previously held that such treatment discontinuation may amount to inhuman treatment in breach of Article 3 of the European Convention of Human Rights.⁸⁴

126. In addition to the Therapeutic Department for Drug-Dependent Prisoners at Eleonas, which offers a voluntary, multi-phase, rehabilitation programme over approximately two years but without MOUD, pre-community detoxification groups were available in four prisons, including Korydallos I and Thessaloniki Prisons. The Centre for the Treatment of Drug-dependent Persons (Κέντρο Θεραπείας Εξαρτημένων Ατόμων – KETHEA) operated 27 psychosocial and motivational counselling stations for substance dependence treatment, offering a weekly two-hour “drug-free” group therapy session in 26 prisons. However, the number of counsellors remained low. Additional support initiatives at Korydallos I Prison included a weekly counselling and awareness group and a self-help group.

The Greek authorities informed the CPT that several memoranda of cooperation had been signed between the General Secretariat for Anti-Crime Policy and KETHEA, to further strengthen and expand these services.

127. The CPT acknowledges the efforts made by the Greek authorities to strengthen treatment for persons suffering from substance use disorders and to enhance drug-dependence programmes. In view of the high level of need among prisoners, the CPT considers that further action is necessary. These measures should aim, *inter alia* at reducing the supply of drugs into prisons; identifying and engaging prisoners who use drugs, and providing comprehensive treatment options with appropriate throughcare; developing standards, monitoring and research on drug issues; and enhancing staff training and development. The substance use strategy for prisons should be an integral component of the national drugs strategy.

In light of the above remarks, the CPT recommends that the Greek authorities further expand and promote treatment and support for prisoners with drug-related problems, within the framework of a national strategy. The CPT would like to receive a copy of the strategy on dealing with prisoners with substance use disorders.

In particular, the Committee recommends that MOUD, provided by OKANA, be extended to additional prisons and to a greater number of prisoners. Under no circumstances should MOUD be abruptly discontinued. Further, the number of KETHEA counsellors should be increased to meet with demand.

128. The delegation also carried out a targeted visit to the two Therapeutic Departments at Korydallos Prison Complex.⁸⁵

The Korydallos Special Health Centre for Prisoners was accommodating 115 prisoners at the time of the visit (82 patients and 33 workers). Material conditions had improved: the bathrooms had been renovated and increased efforts to maintain hygiene were evident. Donations had enabled the acquisition of new equipment, including for physiotherapy, as well as hospital beds and special beds for older patients. Educational activities were also offered to both patients and workers.

Healthcare staffing had significantly improved since the 2022 visit. The Special Health Centre now had 11 permanent doctors (including nine from the Ministry of Health and two from the General Secretariat of Anti-Crime Policy),⁸⁶ and 11 visiting doctors (visiting once or twice a week),⁸⁷ allowing for 24-hour doctor coverage. In addition, there were 11 nurses from the Ministry of Health and five assistant nurses from the General Secretariat of Anti-Crime Policy (one being on extended leave).

84. See, for example, ECtHR, *Wenner v. Germany*, application no. 62303/13, 1 September 2016.

85. See CPT/Inf (2023) 24.

86. This included two doctors with speciality in internal medicine and one in general medicine, a urologist, an otolaryngologist, a dentist, a psychiatrist, a microbiologist, a surgeon, an orthopaedic doctor and a radiologist.

87. There was a general surgeon, a dermatologist, a neurologist, an ophthalmologist, a pathologist, a pulmonologist, and five general practitioners.

These improvements were generally attributed to the transfer of responsibility from the Ministry of Citizen Protection to the Ministry of Health, implementing a longstanding CPT recommendation.

129. At the time of the visit, the Korydallos Psychiatric Hospital for Prisoners held 273 persons (253 patients and 20 workers), slightly exceeding its official capacity of 261.⁸⁸ The delegation observed some improvements in material conditions, following refurbishment works that had taken place.

However, the healthcare staffing situation remained inadequate and had further deteriorated since 2022. Critically, there was still no resident psychiatrist for the 253 patients in the hospital – a situation the CPT finds wholly unacceptable. Psychiatric input was limited to 15 hours per week provided by two visiting psychiatrists, each attending once weekly, and there were only two qualified nurses for the entire hospital. This is clearly insufficient. Despite the 14 visiting doctors,⁸⁹ the plans initiated in 2018 to recruit a full-time psychiatrist, a GP, and seven nurses had not been implemented.

130. The Greek authorities informed the CPT that, on 1 February 2025, Law no. 5129/2024 on the completion of the psychiatric reform entered into force. The legislation forms part of the National Action Plan for Mental Health (2021 – 2030) and notably aims at improving the mental health services provided to prisoners by integrating them into the National Network of Mental Health Services under the framework of the National Health System. To this end, a programme contract was signed between the Deputy Ministers of Citizen Protection and of Health to transform the Korydallos Psychiatric Hospital for Prisoners into a Mental Health Unit under the National Network of Mental Health Services. Following this inclusion, the psychiatric hospital has been staffed with five psychiatrists, one internal medicine specialist, and five nurses to meet urgent needs and ensure provision of specialised mental health services at all levels. Three more psychiatrists are currently being recruited and there are plans to hire a total of 60 permanent healthcare staff members. The process is being accompanied by a complete transformation of the hospital and a full restructuring of its services, including the development of guidelines and protocols, improving clinical governance, transitioning to the ICD-10 diagnostic system and electronic medical records, as well as introducing risk assessment and cognitive assessment tools. Further steps are planned to reduce overcrowding in the establishment. These measures are highly welcome as part of the reform process to provide psychiatric care for particularly vulnerable persons.

131. The CPT recommends that the Greek authorities pursue their efforts to appoint a sufficient number of resident psychiatrists, qualified nurses, and occupational therapists at the Korydallos Psychiatric Hospital for Prisoners. To this end, it would also like to receive detailed information on the number and effective presence of psychiatrists and nurses currently working in the Psychiatric Hospital, as well as other changes introduced regarding the provision of specialised services. Further, in light of the reforms, it would like to be informed about the tasks and numbers of the custodial officers and prisoners working in the Psychiatric Hospital as well as their numbers.

132. The delegation also found that a comprehensive policy on seclusion and other means of restraint had still not been established. The same procedure remained in place as described in 2022, namely, placing agitated patients or those at risk of self-harm or suicide in the admission room under CCTV surveillance and, following written authorisation by the psychiatrist, in the separation area on the ground floor, which continues to contain cells with multiple ligature points and sharp edges.

The Committee reiterates its recommendation that the Greek authorities develop a comprehensive, carefully developed policy on restraint at Korydallos Psychiatric Hospital for Prisoners. Further, a safer quiet room should be created on the ground floor for accommodating agitated, aggressive, or auto-aggressive patients, who should be placed under direct and continuous staff supervision.

88. In November 2024, the number of patients had reached as high as 290.

89. Who included three general practitioners, a cardiologist, two psychiatrists, a pathologist, a dermatologist, an otolaryngologist, a surgeon, a doctor in general medicine, a dentist, a biopathologist, a doctor in physical medicine, and a rehabilitation specialist.

e. other issues

i. contact with the outside world

133. The CPT attaches considerable importance to the maintenance of good contact with the outside world for all persons deprived of their liberty. The guiding principle should be to promote contact with the outside world as often as possible; any restrictions on such contact should be based exclusively on security concerns of an appreciable nature.⁹⁰ The importance of maintaining good contact with the outside world is recognised in Article 51 of the 1999 Penitentiary Code.

134. The CPT welcomes the fact that, in the establishments visited, prisoners were allowed to receive visits from their spouses and children without partitions. However, many prisoners complained that they had to have partitioned visits with their parents. Consequently, prisoners who were not married or did not have children did not benefit from open visits. The CPT considers that the rule should be to offer open visits to all prisoners with closed visits being the exception, based on security considerations.

135. Prisoners are still only entitled to one visit “lasting at least half an hour, at least once a week”,⁹¹ which is below the minimum advocated by the CPT of at least one hour per week. For prisoners whose families live far away from the establishment in which they are held, the possibility to accumulate visits should be permitted.

136. The CPT reiterates its recommendations that the Greek authorities take steps to increase the visiting time for sentenced prisoners to one hour per week and that prisoners whose families live far away be allowed to accumulate visiting time. Further, visits with a physical separation between the prisoner and the visitor(s) should be the exception rather than the rule.

137. On a positive note, the CPT welcomes the fact that the 2022 modification of the Penitentiary Code included the possibility to conduct special visits for minors until 11 years old. In particular, the Prison Council, upon the request of the prisoner or an expert of the prison establishment, can decide the special configuration of the place and the means of communication, guided by the best interest of the minor.⁹² The other parent is allowed to be present during the visit.

This is a step in the right direction. The Committee considers that every prison should have a designated children’s space (a changing table, toys, books, drawing materials, games, etc.) where children can feel safe, welcomed and respected. Every effort should be made to ensure that prison visits by children take place in an environment conducive to play and interaction with the parent, and that visits are part of a policy to promote, maintain and develop child-parent relationships in prison.⁹³ However, the CPT considers that the restriction of the age-limit for special visits of children to the age of 11 is not conducive to keeping close family contacts between detained parents and their older children. For this reason, it should be expanded to all minors, regardless of their age.

The CPT encourages the Greek authorities to expand, including by amending the relevant legal provisions, the possibility for prisoners to have open visits with their children, regardless of their age. It would also like to be informed about the steps being taken to ensure that prisons have appropriate child-friendly visiting spaces.

90. See also European Prison Rule 24.2.

91. Article 52 § 1 of the Penitentiary Code.

92. Article 52 § 2 of the Penitentiary Code.

93. See, *inter alia* paragraph 20 of Recommendation [CM/Rec\(2018\)5](#) of the Committee of Ministers to Council of Europe member States concerning children with imprisoned parents, adopted on 4 April 2018.

138. However, in the prisons visited, these positive developments were undermined by the insufficient possibilities to maintain contact with the outside world other than visits. Telephone communication was particularly difficult for prisoners without means and whose families live abroad. As a result, prisoners could not necessarily contact their families in order to arrange visits. Further, many of the pay phones in the prisons visited were not functioning.

139. The modification of Article 51 of the Prison Code, providing for the possibility of electronic communication through computers installed in prison establishments, is to be welcomed as a viable solution to improve contact with the outside world, particularly for foreign nationals. However, in practice, its use continued to be limited with, for example, only 10 prisoners using Voice over Internet Protocol (VoIP) in Malandrino and Nafplio Prisons. The opportunities to use VoIP should be increased, particularly in those prisons located on the islands or large distances from major urban areas and accommodating large numbers of foreign nationals. This also entails reviewing the extensive documentation that foreign nationals and their families are required to produce in the Greek language to qualify for the use of VoIP, which left many indigent prisoners, including foreign national prisoners, without any contact with the outside world.

The CPT recommends that the Greek authorities revise their policy with the view of easing the documentation requirements to increase the opportunities for prisoners, including foreign nationals, to maintain contact with their families using VoIP, in light of the above remarks.

ii. discipline

140. The provisions of the 1999 Penitentiary Code dealing with disciplinary sanctions and procedures have been described in previous reports and do not call for any particular comment.⁹⁴

141. The CPT delegation examined the disciplinary procedures and the sanctions imposed in each of the prisons visited. In general, the formal disciplinary system in all establishments visited seemed proportionate and there was limited use. Solitary confinement as a disciplinary punishment was applied sparingly. For example, at Patras prison, there were 212 disciplinary hearings in 2024 and, in 2025, until the day of the visit in January, there were 22 disciplinary hearings. Of the latter, five resulted in the imposition of the sanction of solitary confinement, in five cases penalty points were awarded, in four cases disciplinary transfers were imposed, seven cases were dismissed, and one case was adjourned. The procedures followed were according to the law.

However, the CPT delegation observed that there was a lack of clear communication concerning disciplinary proceedings. In particular, foreign national prisoners were not always properly informed about the disciplinary procedure, or the specific penalty imposed. For example, at Patras prison, the delegation met a prisoner who erroneously thought that he had received the penalty of withdrawal from work for six months.

142. The CPT reiterates its recommendation that the Greek authorities ensure that the disciplinary proceedings be explained to all prisoners in a language and form they can understand and that prisoners are not required to sign documents that they do not understand. The right to appeal any disciplinary decision by the Prison Council must be clearly explained to all prisoners.

iii. information on rights and complaints

143. In all the prisons visited, prisoners complained about the lack of transparency in prison procedures and the absence of information to assist them in understanding how the prisons operated and to what rights they were entitled. The prisoners interviewed by the CPT delegation all stated that they were not provided with any brochures informing them about the regime or other details of the institution, and that

94. See Articles 21.3 and 65 to 71 of the Penitentiary Code. The 2022 amendments of the Penitentiary Code mainly modified the range of applicable penalty points.

they usually learned about the rules, rights and obligations from other prisoners. In none of the prisons was the publication “*Prisoner’s A-Z on rights and obligations*” available or being distributed to new arrivals. It was also unfortunate that there was no information on the establishment and its routines, let alone in different languages, in any of the waiting rooms where prisoners were placed when they first entered a prison.

The CPT reiterates its recommendation that all newly admitted prisoners be provided with the introductory brochure about prison life. Further, all prisoners, including foreign nationals and persons with special needs or who are illiterate, should be provided with information in a language and form they understand. Prisoners unable to understand the information brochure should receive appropriate assistance including where necessary, using alternative modes, means and formats of communication.

144. The CPT delegation noted that there is still no proper system of internal complaints available within the prison system.⁹⁵ There was no clear policy regulating the complaints system, with timelines for responses and possibilities to appeal to a higher body if the complaint was rejected, or even indicating who should be responsible for investigating a complaint, especially if it concerned the Director or Chief Guard. Nor were the complaints recorded or any attempt made to compile statistics on the various types of complaint which might inform management and prison policy.

At Malandrino Prison, for example, the delegation was informed that there is no provision for a complaints system or to record such requests. The prisoners can merely introduce a request to be heard by the prison director, and a file with such hearings is kept. According to the information provided by the Ministry of Citizen Protection, one group complaint of five inmates was submitted in 2023. No investigations into complaints were carried out, as “there were no reported incidents”.

145. The CPT repeats that a proper internal complaints system needs to be put in place; for example, prisoners ought to be able to make written complaints at any moment and place them in a locked complaints box on a prison landing (forms should be freely available); complaint boxes should be easily accessible for all prisoners, as well as outside of the direct vision of officers; all written complaints should be registered centrally within the prison before being allocated to a particular service for investigation or follow up. In all cases, the investigation should be carried out expeditiously (with any delays justified) and prisoners should be informed within clearly defined time periods of the action taken to address their concern or of the reasons for considering the complaint unjustified. In addition, statistics on the types of complaints made should be kept as an indicator to management of areas of discontent within the prison.⁹⁶ A robust complaints system is part of a healthy and professionally managed prison and supports the management in learning lessons and improving procedures.

The CPT calls upon the Greek authorities to introduce a formal system of complaints in all Greek prisons, taking into account the above remarks. It wishes to be informed of the concrete steps taken by the authorities in order to ensure the functioning of an efficient complaints system in all Greek prisons.

3. The situation of adult women in prison

a. introduction

146. The CPT carried out follow-up visits to the two prisons for women in Greece, namely Korydallos II Women’s Prison for women on remand and Eleonas Women’s Prison in Thiva for sentenced prisoners.

147. As in many countries, women represent a small proportion of the prison population in Greece. At the time of the visit (January 2025), approximately 600 women were detained, constituting around 5.2% of the total prisoner population of more than 11 500 persons – a figure that has only slightly increased in

95. See, *inter alia* CPT/Inf (2020)15, paragraph 75.

96. See also the 27th General Report of the CPT: [CPT/Inf \(2018\) 4](#), paragraphs 68 *et seq.*

recent years. Despite some legislative changes aimed at decriminalising petty offences, the CPT notes that many of the women in prison were serving short prison sentences or had been convicted of non-violent offences, including fraud, non-payment of fines, or drug-related offences. Many of the women met had experienced poverty or homelessness, were from the Roma community, or were foreign nationals, including mothers of young children. A significant number also presented with vulnerabilities such as mental health issues, a heightened risk of self-harm or suicide, or a history of substance use and dependence.

The Committee considers that the use of non-custodial alternatives to imprisonment and community-based responses for women who do not present a high risk of harm for others remains insufficient.⁹⁷

The CPT recommends that the Greek authorities further promote the use of non-custodial alternatives to imprisonment for women, such as bail, community sanctions and measures, as well as suspended sentences or conditional release, and significantly expand probation, notably as regards non-violent offences and short sentences. To this end, the CPT recommends that the authorities should put in place a strategy, including legislative reform, to significantly reduce the number of women in custody, especially targeting those in pre-trial detention, for non-payment of fines, for non-violent offences, and for short sentences. The Committee would like to receive a copy of the strategy on the use of non-custodial alternatives to imprisonment for women.

148. Moreover, the CPT wishes to emphasise the need for the Greek authorities to address more effectively the specific situation of women in prison, which are facilities historically designed by men for men. This requires a gender-focussed and trauma-informed approach⁹⁸ in the management and care of female prisoners. Such an approach should include gender-sensitive risk and needs assessments, gender-responsive prisoner classification, and the implementation of tailored, gender-specific programmes. These programmes should respond to the biological and psychosocial needs of women, address their specific vulnerabilities, including their history of victimisation, trauma, and caretaking responsibilities, and foster a secure and stable prison environment which supports their social reintegration.

The CPT recommends that the Greek authorities develop clear, gender-sensitive and trauma-informed policies and regulations governing the management and care of female prisoners. These should aim to protect women from all forms of gender-based violence and re-traumatisation, while promoting a prison environment that prioritises safety, stability, and dignity.

b. ill-treatment

149. Most of the women met by the delegation stated that they were treated correctly by custodial staff at both prisons.

However, as described hereafter, at Eleonas Prison, the delegation received several allegations of physical ill-treatment of female prisoners by male custodial staff, including incidents of hair pulling, arm twisting, slapping, and kicking. At Korydallos II Prison, it also received complaints about an isolated incident concerning a woman who was allegedly pulled by the hair and dragged naked out of the shower by a female prison officer, in full view of other prisoners, for failing to comply with the officer's instructions.

97. Reference is made to Rule 61 of the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the Bangkok Rules), which highlights the importance of considering women's caring responsibilities and typical backgrounds when imposing custodial sentences.

98. Trauma-informed policies acknowledge the history and the context that violence against women and trauma play in the way that those women may behave and react, and seek to increase their feelings of safety and security.

Further, in both establishments, the delegation received multiple accounts regarding verbal abuse, shouting, and the use of disrespectful or discriminatory language as well as threats, primarily by male officers, aimed at intimidating the women prisoners. Roma women at Eleonas Prison and transgender women at Korydallos II Prison notably complained about some custodial officers who behaved in a disrespectful and demeaning manner, which created an atmosphere of fear and discomfort among them. One officer reportedly refused to address transgender prisoners by their chosen names, which is unacceptable and was perceived by the person concerned as degrading.

150. At Eleonas Prison, the delegation received consistent and serious allegations by three female prisoners, interviewed in two different wings, concerning ill-treatment by the same male custodial officer. All three had previously self-harmed, and two of them alleged that the officer had punched them. A particularly severe incident was reported to have taken place approximately three weeks before the delegation's visit: a Roma woman detained in E Wing was allegedly dragged by the hair to the entrance of the wing, where she was handcuffed by an injured arm to the bars of the gate for several hours. Several women met by the delegation stated that they had witnessed the incident through the hatches of the doors of their dormitories and confirmed that the officer punched the woman to the face and poured alcohol on her wound, causing visible pain and distress. The woman concerned perceived it as a punishment. Her request to use the toilet was reportedly denied, and she was told by the officer to relieve herself in place. Such treatment could be considered inhuman and degrading.

151. Contrary to initial information provided to the delegation at the time of the visit, the Greek authorities later stated in their communication of 14 April 2025 that a complaint had already been lodged prior to the delegation's visit, and an investigation into the officer's conduct was underway. In a separate communication dated 18 February 2025, the Director of the prison affirmed that explicit instructions had been issued to prohibit any form of ill-treatment and that all such complaints received would be forwarded to the supervising prosecutor.

However, it appears that additional, more proactive measures are required to prevent ill-treatment. In the Committee's view, handcuffing persons to fixed objects for several hours after they have self-harmed can be considered degrading punishment. Such excessive and abusive measures may exacerbate feelings of powerlessness and echo past traumatic experiences.

152. The CPT recommends that the Greek authorities deliver and regularly reiterate a clear message to all prison officers serving at Eleonas and Korydallos II Women's Prisons that prisoners must be treated with respect and that all forms of ill-treatment, including verbal abuse and threats, are unlawful and will be the subject of appropriate sanctions. Prison management should demonstrate increased vigilance in this area, including through their regular presence in all detention areas. This also requires sufficient staffing levels, direct interaction with prisoners, the effective investigation of complaints by prisoners, and enhanced staff training – particularly regarding gender-sensitivity, mental health issues, de-escalation techniques, and managing vulnerable prisoners.

Further, the CPT would like to be informed about the outcome of the investigation into the serious incident described above, including any other follow-up measures taken. The practice of handcuffing prisoners who have self-harmed to fixed objects must end.

153. While serious incidents of inter-prisoner violence did not appear to be common in the two women's prisons visited, the delegation received several complaints about frequent tensions, verbal altercations, and occasional low-level physical confrontations between female prisoners. At Eleonas Prison, such tensions and disputes in certain wings occasionally escalated into physical fights involving slapping and kicking. At Korydallos II Prison, tensions were notably exacerbated by limited access to telephones, which were both insufficient in number and frequently malfunctioning. A contributing factor in both establishments was the accommodation of women with mental health conditions or substance use disorders in shared, multi-occupancy dormitories alongside other prisoners.

The delegation observed that custodial staff were often unable or slow to intervene, notably due to insufficient staffing levels. This hampered their capacity to monitor the wings effectively, intervene when needed and effectively prevent inter-prisoner violence. Some incidents of violence reportedly occurred out of the sight of staff, in areas not covered by CCTV, and were not promptly detected or reported; they were resolved instead by other inmates. Where more serious incidents were noticed by staff, the head warden and the duty officer would generally intervene and initiate disciplinary procedures against those involved.

154. The CPT has repeatedly underlined the importance of a proactive approach by prison authorities in preventing inter-prisoner violence and intimidation. This requires custodial staff to be both attentive to signs of trouble and trained and empowered to intervene effectively when necessary. The existence of positive relations and a dynamic security approach, grounded in a balance between maintaining order and security and fulfilling a duty of care, is essential. Achieving this objective will depend on the presence of a sufficient number of adequately trained staff in the detention areas (see paragraphs 185 to 188).

The CPT recommends that the Greek authorities pursue their efforts to prevent inter-prisoner violence at Eleonas and Korydallos II Women's Prisons. This should include ensuring that custodial officers are present in sufficient numbers and intervene proactively to prevent intimidation and violence between prisoners. Further, all confirmed and suspected incidents of inter-prisoner violence should be systematically recorded, reported, and thoroughly investigated.

c. condition of detention

i. material conditions

155. Most women in the two female prisons visited were accommodated in large-capacity dormitories, which inevitably imply a lack of privacy in their everyday lives. Further, such dormitories bring a greater risk of intimidation and inter-prisoner violence and can render proper staff control extremely difficult, if not impossible. With such accommodation, the appropriate allocation of individual prisoners, based on a case-by-case risk and needs assessment, also becomes an almost impossible exercise. All these problems are exacerbated when the numbers held go beyond a reasonable occupancy level; further, in such a situation the excessive burden on communal facilities, such as washbasins or lavatories, and the insufficient ventilation for so many persons will often lead to deplorable conditions.

The CPT must nevertheless stress that any move away from large-capacity dormitories towards smaller living units, especially for women in prison, must be accompanied by measures to ensure that prisoners continue to spend a reasonable part of the day engaged in purposeful activities of a varied nature outside their living unit.

The CPT recommends that the Greek authorities move progressively towards accommodation of prisoners, and especially women, in smaller living units. This principle should be strictly adhered to when building new prison establishments.

156. Material conditions at Korydallos II and Eleonas Women's Prisons varied significantly from wing to wing, ranging from extremely poor to generally acceptable. At Korydallos II Prison, which is housed in buildings dating back to the 1960s, the infrastructure was visibly aged and dilapidated. Similarly, the main wings at Eleonas Prison, which has been in operation since 2008, also required refurbishment due to wear and tear.

157. At the time of the visit, there was overcrowding in the main accommodation wing for women at *Korydallos II Prison* (connecting A and B Wings), which had an occupancy rate exceeding 150%, due to the prison's reduced operational capacity. Larger dormitories (measuring 46 m²), originally intended for 10 persons and containing four to six sets of bunk beds, were accommodating up to eleven prisoners and lacked privacy. The delegation was informed that additional beds and mattresses could be added when required, which regularly happened. On the night prior to the visit, one cell (number 16) had accommodated 17 women. Smaller cells (measuring 9 m²), intended for two individuals, were holding up to four prisoners, leaving very limited space in the rooms.

The lighting and ventilation were adequate, and the delegation noted positively that air conditioning units for both heating and cooling had been installed in all dormitories and cells a few months prior to the visit (see paragraph 161).⁹⁹ However, several sanitary annexes were in a poor state of repair, with broken or non-functioning showers and sinks. The delegation also received numerous complaints about infestation of cockroaches and bed bugs.

153. The CPT recommends that, at Korydallos II Women’s Prison, dormitories and cells should never accommodate more persons than their intended capacity, even temporarily. Cells measuring 9 m² should hold no more than two persons, and preferably only one. A rolling programme of refurbishment and maintenance should be implemented for all accommodation wings, including regular disinfection measures.

159. At *Eleonas Prison*, the five main wings (A to E) mainly consisted of large dormitories for up to 20 persons (83 to 85 m², with three toilets and two showers), medium-sized dormitories for up to eight persons (40 m², with two toilets and one shower), and a few single-occupancy cells with ensuite sanitary annexes. These were arranged around spacious central atriums.

The delegation did not observe overcrowding, and dormitories and cells had sufficient access to daylight and ventilation. However, conditions of detention were particularly poor in C and E Wings, which predominantly accommodated foreign national prisoners and women from the Roma community. Many dormitories in these wings were run-down and in a poor state of maintenance, with broken windows, damaged furniture, broken lightbulbs,¹⁰⁰ and dilapidated sanitary facilities – many lacked hygiene or had toilets with blocked or broken flushes, showers with missing shower heads or sinks with broken or leaking pipes. Walls in some dormitories were damp due to water infiltration, and the roof of the prison was reportedly in need of urgent repair. Mattresses were often filthy and worn-out, and prisoners also complained of cockroaches and bedbug infestations, while several women also regularly had lice. Further, the central atriums of these wings lacked any furniture for communal use, such as tables or chairs, and had no recreational equipment. The conditions of detention in the remaining wings were generally acceptable, though many dormitories and sanitary annexes also required maintenance.

Although hot water was available for limited hours each day, the delegation received numerous complaints about the lack of heating, with many women indicating that they were cold, particularly at night. According to the prison management, the central heating system was dysfunctional, with radiators not working in several parts of the prison. While some prisoners were able to purchase small electrical heaters and a limited number were distributed to particularly vulnerable individuals, they were insufficient to heat the dormitories adequately during the winter months. Moreover, the electrical infrastructure could not support the simultaneous use of multiple electrical heaters.

160. The CPT recommends that the Greek authorities take urgent steps to repair the roof and central heating system at Eleonas Women’s Prison to ensure that all accommodation areas can be adequately heated and are devoid of humidity. Measures should also be taken to ensure that dormitories and cells, including the sanitary annexes, are refurbished, maintained in a decent state of repair, and regularly disinfected.

161. As noted above, the installation of air conditioning units at Korydallos II Prison was made possible only through external donations – illustrating the extent to which both prisons relied heavily on such contributions to meet prisoners’ basic needs. Detained women were required to purchase personal hygiene products, including sanitary pads, which were only distributed to indigent prisoners upon request, but often in insufficient quantities, as they were essentially collected through donations. As a result, most female prisoners had to purchase their own hygiene products. Some prisoners also indicated that they did not have adequate winter clothes or shoes and several complained that, despite the prison not providing these items, the strict rules regarding parcels did not allow them to receive clothing from their families.¹⁰¹

99. In addition, some washing machines and refrigerators had been donated to the prison for communal use.

100. In several cells only one or two lightbulbs out of nine were functioning.

101. In addition, the women had to buy items such as chairs, fridges or cooking and heating devices, as these were not provided by the prison authorities.

162. In both prisons, numerous complaints were received regarding the poor quality of food. Given the limited daily food budget of €3.20 per prisoner, this is not surprising. At Korydallos II Prison, recurrent issues raised by the women concerned the presence of insects, rodent droppings, hair, and even metal fragments in the food served. Fruit was rarely distributed, and women who had the means resorted to ordering and cooking additional food for themselves. At Eleonas Prison, some wings lacked continuous access to water, including drinking water, particularly affecting sentenced women. In these wings and dormitories, water supplies were reportedly cut off during the day and only made available for limited hours in the morning and evening, which had a severe impact on the women accommodated there. As a result, several women had to collect water from the central kitchen every day to drink, prepare food, wash themselves or their dishes, or launder clothing. In particular Roma women in E Wing expressed a strong sense of neglect and abandonment by the prison authorities, in this regard.

163. The Committee recognises the financial constraints faced by the Greek authorities. However, these limitations must not result in situations where the basic needs of prisoners are not being met. A lack of essential provisions, such as ready access to sufficient and clean water, including potable water, adequate food of sufficient nutritional value, heating, hygiene products and clothing inevitably compromises the dignity and quality of life of prisoners, particularly of indigent and vulnerable prisoners, further exacerbating already existing inequalities among prisoners.

The CPT must emphasise that the Greek authorities cannot relieve themselves of their duty to provide decent conditions of detention to all persons deprived of their liberty by relying on donations or on prisoners and their families to meet these fundamental needs.

In its 30th General Report, the Committee set out minimum standards that must be guaranteed in all custodial settings to ensure that prisoners are held in human and dignified conditions of detention. These include, *inter alia*: (1) ready access to sufficient clean potable water; (2) adequate food, both in quantity and nutritional value; (3) decent conditions and cleanliness, including sufficient hygiene and cleaning products, free of charge.¹⁰²

The Committee regrets that many of these minimum standards were not being met at Eleonas Prison.

164. The CPT recommends that the Greek authorities take the necessary measures, including through the allocation of sufficient budgetary resources, to ensure that all female prisoners at Eleonas Women's Prisons are granted a minimum standard of basic living conditions to ensure that their fundamental needs are met. This includes the provision of sufficient clean water, including potable water, a wide variety of foods in the right proportions to enable prisoners to maintain an adequately nutritious, sufficient calorific and well-balanced diet, as well as access to plenty of fluids, adequate heating, and sufficient supplies of basic personal hygiene and cleaning products, free of charge. This is notably important for women, including to keep themselves and their cells clean.

The continued failure to meet the basic decency threshold outlined in the 30th General Report of the CPT risks exposing prisoners to conditions amounting to inhuman and degrading treatment. Particular attention should be paid to meeting the specific sanitary needs of women, including the provision of sanitary pads, free of charge, to all female prisoners, irrespective of their financial situation. Further, the strict rules for receiving parcels should be revised if the prison is unable to provide prisoners in need with basic provisions such as winter clothing and footwear.

Further, action must be taken to ensure that Roma and foreign national prisoners are not subjected to discriminatory treatment.

102. See [CPT/Inf \(2021\) 5-part](#).

ii. *regime*

165. It is positive that women detained at both Korydallos II and Eleonas Prisons benefited from daily out-of-cell time of around 10 hours, including outdoor exercise for two hours in both the morning and afternoon. However, most outdoor yards at Eleonas Prison (except those of the annexes) and those attached to the basement units of Korydallos II Prison (used by transgender prisoners) consisted of bleak concrete spaces, lacking shelter and sufficient means of rest, allegedly for safety reasons. The Committee sees no valid justification for these restrictions in female prisons, especially given that several male prisons are better equipped, featuring green areas, shelters, and adequate seating or recreational material.

||| The CPT recommends that the design of the outdoor yards at Eleonas Women’s Prison and those attached to the basement units at Korydallos II Women’s Prison be entirely reviewed with the aim of making them less bleak. All yards should be equipped with a means of rest, shelter from the elements, and – preferably – some vegetation to create a more humane and pleasant environment for female prisoners.

166. Regarding the regime of activities, many female sentenced prisoners were engaged in different forms of work,¹⁰³ including in the kitchen, food distribution, maintenance, laundry, prison shop, canteen, library, and cleaning tasks. Women at Eleonas Prison also had access to school education.¹⁰⁴ However, the number of work positions and school places was insufficient, and many women were prevented from working for medical reasons, including prisoners being HIV positive or under psychotropic medication.

||| The CPT recommendation in paragraph 71 is equally applicable for female prisons.

167. The situation was less favourable for remand prisoners, for whom no work opportunities were available, except for those few who were cleaning the corridors. Further, no formal education was provided at Korydallos II Prison, apart from Greek language classes for foreign nationals and illiterate prisoners.¹⁰⁵ It is nevertheless positive that, through donations, a classroom, an additional activities room, and the prison library were refurbished, partly addressing the previously identified lack of space for education and organised activities.

168. Both prisons offered the possibility to follow several vocational programmes which allowed female prisoners to acquire practical skills and obtain attendance certificates, potentially assisting in their future social reintegration and in finding an employment.¹⁰⁶ In addition, some recreational, creative, and sports activities were available, including a drama club, creative writing, documentary filmmaking, painting, handicraft, singing and music courses, and volleyball. While these activities are commendable and represent a positive step towards social reintegration, they were limited in number and not available to all inmates. As a result, many prisoners not engaged in work or activities spent their days idly in the dormitories without access to meaningful occupation. Moreover, the delegation noted a lack of social reintegration support to prepare women for their release back into the community, symptomised by the inadequate number of psychologists; the few psychologists who were present were mostly tasked with organising activities.

103. As previously highlighted by the CPT, the approach to work in Greek prisons is essentially a remission scheme, whereby the sentence of prisoners would usually be reduced by one day for every day worked, rather than forming part of a personal development plan or preparation for release.

104. At the time of the visit, 65 inmates attended elementary school education, 35 persons a second opportunity school providing junior high school education, 12 women followed upper high school education through private tutoring classes, and five students attended open university classes.

105. Only two detained women attended open university classes, one inmate was able to follow university courses through electronic monitoring, and there were three private tutoring students.

106. This included, for instance, courses in hairdressing, make-up and manicure, dressmaking, cooking, barista or waiting courses, as well as online courses on tourism, sales or book-keeping.

169. The CPT recommends that the Greek authorities pursue their efforts to expand the range of work opportunities and purposeful activities of a varied nature, preferably with vocational value, as well as to increase access to education, sports, and organised recreational activities for female prisoners, with a view to preparing them for their social reintegration. In particular, female remand prisoners, some of whom had been detained at Korydallos II Women’s Prison for months or even years, should be granted access to work and educational opportunities. Further, the Greek authorities should provide social reintegration support to prepare women for their release back into the community.

iii. vulnerable categories of prisoners

170. Pregnant women serving sentences at Eleonas Prison were transferred to the medical unit at Korydallos II Prison from the seventh month of pregnancy onwards for ante- and postnatal monitoring and care (see also paragraphs 198 and 199). The delegation received some complaints from mothers previously held there concerning the poor material conditions and hygiene in the unit. It is therefore positive that, at the time of the visit, refurbishment works were underway in the medical unit, including the sanitary facilities, which are intended to accommodate pregnant women and mothers with newborn babies.¹⁰⁷

The CPT would like to receive updated information on the progress in refurbishing the medical unit at Korydallos II Prison.

171. The delegation met a woman in her seventh month of pregnancy and a female prisoner under protection, both held in two of the three operational segregation cells of the medical unit. These cells had inadequate natural light, and the call bells were not functioning. Both women stated that they felt isolated, as contact with staff was minimal and they could only communicate with each other by speaking through the wall. The pregnant woman was also denied outdoor exercise due to her condition. This policy has no valid justification and should be reviewed.

The CPT recommends that special care be taken to ensure that women prisoners held in segregation at Korydallos II Women’s Prison, whether for somatic, mental health, or protection reasons, are not held in conditions akin to solitary confinement. Prisoners held in segregation should be offered a structured programme of purposeful and preferably out-of-cell activities and provided with meaningful human contact for at least two hours every day, and preferably more, either with staff or fellow prisoners. Further, pregnant women and, if applicable, other patients accommodated in the medical unit, provided there are no medical contraindications, should have access to at least one hour of outdoor exercise every day.

172. The delegation also visited the separate annexe at Eleonas Women’s Prison in Thiva, which houses both the mother-and-child unit (ground floor) and the female juvenile unit (first floor). Sentenced mothers with newborn babies are normally transferred to the mother-and-child unit 40 days after childbirth, where they may stay with their children until the age of three. They were accommodated in cells with the same lock-in times from the evening to the morning and after lunch as other prisoners. Such a cell-type environment is not suitable for mothers caring for their babies and infants and does not sufficiently consider the best interests of the child.¹⁰⁸

107. The delegation was informed that a second sanitary area was being created, which would allow pregnant women or mothers with their newborn babies to be accommodated separately from female prisoners held in the medical unit for medical, mental health or other reasons.

108. See Rule 46 of the Bangkok Rules.

Rather, mother-and-child units in prisons should offer a child-centred environment, free from the visible trappings of incarceration, such as uniforms and jangling keys. As much as possible, accommodation should be modelled around domestic life, with units that comprise individual sleeping quarters, appropriate nursing facilities and furnishings, access to cooking and washing facilities and, if possible, a shared living area and kitchen. As a matter of principle, infants and young children held in custodial settings should be supervised by specialists in child development.

||| The CPT recommends that the Greek authorities create a mother-and-child unit which caters to the best interests of the child, in light of the above remarks.

173. Moreover, the Committee considers that custody for pregnant women and mothers of young children should be limited to exceptional circumstances where the women pose a real danger to the community.

||| The CPT recommends that imprisonment for pregnant women and mothers of young children only be used as a last resort for women convicted of the most serious offences. This requires that gender-responsive, community-based alternatives to detention be developed and applied in practice.¹⁰⁹

174. At the time of the visit, the unit was accommodating three mothers with babies or toddlers and one pregnant woman. It comprises 18 single-occupancy cells, an indoor patio with a play and sitting area, a spacious outdoor yard with a playground and an adjacent volleyball pitch (also used, at separate times, by those detained in the juvenile unit), a kitchen, and a laundry area. The unit's interior was bright and pleasantly decorated with colourful cartoon murals painted by other sentenced women. Mothers were provided with basic items for their children, such as strollers, cots, nappies and baby formula.

However, several cells were in poor condition (broken lightbulbs, blocked drains, and damaged electrical sockets) and did not provide a child-appropriate environment. Central heating was lacking, and small electric heaters were inadequate – one mother who complained of the cold had not been provided with any heater. Playground equipment was unsafe due to rusty nails and missing bolts. Mothers also indicated that the monthly supply of baby wipes was insufficient. In addition, exposed electrical wires and blocked drains rendered the kitchen unusable.

||| The CPT recommends that these deficiencies be remedied.

175. Moreover, mothers complained that they were not permitted to work or participate in activities alongside other sentenced women. For up to three years, their only occupation was childcare, with limited opportunities for social interaction and association – for both the mothers and their children.

||| The CPT recommends that mothers in the mother-and-child unit at Eleonas Prison be allowed to participate in at least some organised activities. The regime of the prison should be flexible enough to respond to the needs of nursing mothers and women with children. Consideration should be given to providing access to childcare facilities or arrangements in order to enable women prisoners to participate in prison activities¹¹⁰ and, wherever possible, the opportunity to leave the establishment and maintain contact with other members of the family to experience ordinary life outside its walls.

176. At the time of the visit, the female juvenile unit at Eleonas Prison was not accommodating any minors but held five young adult women. The unit, identical in layout to the mother-and-child unit on the floor below, also consisted of 18 cells and a large communal area furnished with sofas, chairs, a carpet, a dining space, a cooking area, and access to a small adjacent outdoor yard.

109. See Rule 64 of the Bangkok Rules.

110. See Rule 42 of the Bangkok Rules.

However, both the cells and communal facilities were in a dilapidated state, with dirty mattresses, broken windows and showers, a deteriorated kitchen, only one functioning phone out of three, and both exercise machines out of order. Further, the young women complained of infestations of bed bugs and cockroaches.

||| The CPT recommends that these material shortcomings be remedied. In particular, the female juvenile unit at Eleonas Women’s Prison in Thiva should be refurbished and regularly maintained.

177. The young adults also complained that they were offered insufficient purposeful and organised activities. While some attended school or participated in a dependence programme, others had no access to activities and rarely left the unit.

||| The CPT recommends that further measures be taken to ensure that young female adults – and, where relevant, juveniles – are offered a range of purposeful, organised activities (juveniles should benefit from a full daily programme including education, sports, vocational training, recreation, and other out-of-cell activities).

178. The delegation noted some progress regarding the treatment of transgender women detained at Korydallos II Prison since the Committee’s 2022 visit.¹¹¹ Notably, in 2024, the General Secretariat for Anti-Crime Policy issued a reference framework providing basic guidelines for prison officers on the treatment of LGBTQI+ prisoners, following a CPT recommendation.¹¹² While this document represents a step forward in raising awareness among prison staff, it lacks clear operational protocols to support prison staff in dealing with specific issues relating to their treatment. Further, most staff working directly with transgender prisoners had received training, delivered with NGO support, aimed at improving understanding of their specific needs. All six transgender women interviewed stated that they were generally treated respectfully by staff, and that the women were supported by the prison management. Further, transgender women could now also benefit from gender-affirming hormone treatment. While one person continued treatment initiated in the community, three others began hormone therapy while in detention, albeit at their own expense.

||| While these developments are positive, the CPT recommends that consideration be given to providing gender-affirming hormone treatment in prison free of charge, equivalent to hormone treatment provided in the community.

179. Nevertheless, the delegation received complaints about insufficient psychosocial support, considering the particular vulnerability of the transgender women, as only one NGO provided occasional counselling. This contributed to high levels of stress, frequent tensions in the confined space of their unit, and likely exacerbated the trauma and discrimination several of them had experienced prior to incarceration.

One of the women, who was gradually losing a significant part of her hair on the front of her head, was not allowed to wear a wig despite this being an important aspect in affirming her gender identity.

||| The CPT recommends that the rule of not allowing women to wear a wig for security reasons be reviewed.

111. See CPT/Inf (2023) 24, paragraphs 42 to 47.

112. The guidelines notably highlight the international, European and national framework on non-discrimination as well as sexual orientation and gender identity, and notably refer to the National Strategy for the Equality of LGBTQI+ persons and Principle 9 of the Yogyakarta Principles on the right to treatment with humanity while in detention. It is also recalled that Article 3 of the Penitentiary Code (2776/1999), as amended by Law 4895/2022, prohibits discrimination based on gender or gender identity and sexual orientation.

180. The dedicated unit for transgender women in the basement of B Wing at Korydallos II Prison consisted of a narrow corridor and four operational single-occupancy cells of 8.5 m² (a fifth cell was out of order) each equipped with a bunk bed; two cells were used for double occupancy. Sanitary areas were only semi-partitioned, natural light was limited, and the unit showed signs of wear and tear. One call bell and one of the two telephones in the corridor did not function. These conditions of detention were suitable only for short stays, yet some transgender prisoners had been held in the basement for several years. The delegation was informed of plans to establish a dedicated wing for transgender women at Eleonas Women's Prison in Thiva.

Transgender women could participate in certain organised activities, including a theatre workshop facilitated by a transgender activist and the psychologist, which was particularly appreciated, and a creative engagement programme including dance, painting or craft activities, held twice weekly with other women on remand, under the supervision of staff. They could also take part in occasional events, like a singing contest, organised for all women. However, transgender women were excluded from work, vocational training, and sports, and therefore spent much of the day confined in their unit with limited contact and few purposeful activities.

181. At Eleonas Prison, the delegation interviewed a non-binary person, who had ceased hormone treatment, and a lesbian woman. Both underlined the hostile attitude of some staff and fellow inmates towards LGBTQ+ persons. Several lesbian couples had been deliberately separated by decision of the Prison Council and felt discriminated against due to their sexual orientation, which many concealed. The Director confirmed the policy of separating lesbian couples, citing complaints from other sentenced women. Alternative arrangements should be explored to uphold the rights of LGBTQ+ and all other prisoners.

182. The CPT recommends that the Greek authorities pursue their efforts to improve the treatment and conditions of detention of transgender prisoners at Korydallos II Women's Prison, notably by providing them with access to work, vocational training, and sports. Further, the material conditions should be improved by equipping all double-occupancy cells with fully partitioned sanitary areas and functioning call bells. At Eleonas Prison, the policy of separating lesbian couples should be discontinued.

All custodial officers should be reminded of their duty to respect the gender identity of transgender prisoners, including the use of their chosen names.

Moreover, the existing reference framework should be supplemented by detailed written protocols covering issues such as placement, risk assessment, and segregation for protection reasons; prevention of violence and bullying; association with cisgender prisoners and access to activities; staffing, body searches, and use of force; prevention of self-harm and suicide; access to healthcare and mental healthcare services, including psychosocial support and gender-affirming treatment, taking into account CPT standards on transgender persons in prison.¹¹³

Further, the Committee would like to receive additional information about the Greek authorities' plans to establish a dedicated unit for transgender women at Eleonas Women's Prison, including its timeline.

183. In both women's prisons, women complained about insufficient or total lack of psychological support provided for vulnerable categories of prisoners, including pregnant women, mothers with children, female juveniles or young adult women, or transgender women. This is the more necessary, given that many women in prison often have previous experiences of being victims of gender-based violence, including physical, psychological and/or sexual abuse, have mental health problems such as anxiety, depression, and post-traumatic stress disorder (PTSD), or have been separated from their children despite being the main caregivers. This situation was particularly evident at Korydallos II Prison, where the position of a psychologist had already been unfilled for several years.

113. See CPT prison standard on transgender persons in prison ([CPT/Inf \(2024\) 16 - part](#)).

At Eleonas Prison, although there were two psychologists, they were tasked mostly with carrying out initial assessments and organising activities and therefore had insufficient time to provide individual therapeutic or counselling sessions.

The CPT recommends that for all vulnerable categories of prisoners, notably pregnant women, mothers with young children, female juveniles or young adult women, and transgender women, additional psychosocial support should be provided. To this end, the vacant positions of psychologists should be filled, and psychologists should also be providing individual therapeutic or counselling sessions.

184. Moreover, the delegation also came across several women with disabilities, including two wheelchair users, women with restricted physical mobility and one woman with intellectual disabilities.

Reference is made to the considerations and recommendation outlined in paragraphs 76 to 79, which are also fully applicable to female prisoners.

d. staffing

185. The chronic shortage of staffing resources was also evident in the two female prisons visited. Both establishments had numerous vacancies among custodial and administrative staff, a situation acknowledged by their respective managements.

For instance, at Eleonas Prison, only 64 of the 94 positions for custodial officers were filled (30 vacancies), with more than half assigned to specific duties, including as heads of shift, for gate or entry control and searches, as “custodial nurses”, or in the administration, and five officers on long-term sick leave. This left just 22 officers (mainly male but some female officers) to carry out front-line duties, on a rotational basis, across all detention areas. As a result, during the day, one officer was responsible for each of the five main wings, accommodating up to 95 women each, and at night, only three officers were on duty for all five wings.¹¹⁴ This level of staffing was totally inadequate and, in the Committee’s view, presented a serious security risk. Unsurprisingly, many female prisoners complained about long delays before their calls for assistance were answered, particularly at night. Staffing challenges were compounded by retirements and requests for transfers, as many officers commuted long distances daily. Of the 18 custodial officers appointed two years earlier, 12 had already left. A similar situation existed at Korydallos II Prison, where only 42 of 64 custodial posts were filled (22 vacancies) at the time of the visit.

186. In short, staffing levels were critically low in both prisons, with custodial staff covering for roles such as nurses, administrative workers, or technicians, for which they were neither qualified nor trained. Women detained at Eleonas Prison were frequently left with poor or no supervision in the wings, sometimes for extended periods, and complaints about unresponsive staff were common. These conditions made it impossible to implement a dynamic security approach. Further, staff in both prisons were overworked and subject to constant psychological stress and pressure.

The CPT’s recommendation outlined in paragraph 94 applies equally to women’s prisons. As a first step, all vacancies of custodial and other prison staff should be filled without delay to ensure the effective functioning of the institutions. This will require a significant increase in investment in staff by the Greek authorities.

187. Several staff members also emphasised the lack of support in carrying out their demanding duties. Initial and ongoing training was insufficient, and low staffing levels often prevented their participation in training at all. The delegation met many officers who had started working several years earlier with no training at all, both initial and ongoing. This is unprofessional and puts prison staff at risk.

114. This arrangement was made possible as there was one central staff office for four of the main wings and an additional staff office for E-Wing and the attached isolation area, from where officers monitored the wings via CCTV on their screens. In addition, a head of shift, a custodial nurse and an officer responsible for controlling and unlocking the doors for the entire prison were present in different parts of the prison.

Further, staff received no specialised training relating to the gender-specific needs of female prisoners and their special social reintegration requirements. The CPT considers it essential that gender-sensitive and trauma-informed approaches in the treatment, management and care of female prisoners become an integral part of basic and ongoing training for all custodial staff in women's prisons.

Such training should equip staff to understand the impact of trauma, identify mental healthcare needs and risks of self-harm or suicide, avoid re-traumatisation and to promote safety and respect. The CPT also considers it good practice to provide training on the UN Bangkok Rules¹¹⁵ to all staff assigned to women's prisons.

188. The CPT recommends that the Greek authorities ensure all custodial officers undergo an initial training curriculum before being deployed to a prison establishment. Further, all officers assigned to a women's prison should be trained in gender-sensitive and trauma-informed approaches to the treatment and management of female prisoners, enabling them to address their specific needs appropriately. Regarding the need to improve working conditions and to provide mandatory initial and ongoing training for all prison staff, reference is made to the comments and recommendation in paragraph 98.

e. healthcare services

189. As in the male prisons visited, healthcare staffing levels in the two women's prisons were clearly insufficient. It is striking that neither facility had a permanent general practitioner, and each had only one qualified full-time nurse, both of whom seemed to be on the brink of a burnout.

At Eleonas Prison, a gynaecologist and a dentist (both employed full-time by the General Secretariat for Anti-Crime Policy) were available, alongside a rural doctor (from the Special Regional Medical Centre) present from 07:00 to 14:00 on weekdays. Additionally, 14 (Korydallos II) and six (Eleonas) visiting specialists were contracted, working either for a few hours on regular scheduled visits or ad hoc, paid per visit.¹¹⁶ Due to the severe shortage of nursing staff, prison management had assigned "custodial nursing assistants" – prison officers employed as medical orderlies and assigned to perform nursing duties, including administering injections, dressing wounds, distributing medicines, and maintaining medical records, for which they lacked training. For example, at Eleonas Prison, the only qualified nurse worked only the morning shift (07:00 to 14:00), leaving a "custodial nursing assistant" responsible for the health needs of 417 women during the remaining hours of the 24-hour shift. On the first day of the visit, no officer was even available for this task.

There was no round-the-clock healthcare presence, no effective coordination across visiting specialists, and no guarantee of timely or continuous treatment. Even transfers to hospitals, often necessary due to inadequate healthcare in the prisons, were sometimes delayed or cancelled due to a lack of external perimeter guards.

190. The CPT recommends that the Greek authorities urgently reinforce the healthcare staffing complements in the two establishments, in particular:

- **at Korydallos II Women's Prison, by recruiting a resident general practitioner and at least two additional full-time qualified nurses;**
- **at Eleonas Women's Prison, by ensuring the presence of a resident general practitioner and at least four additional full-time qualified nurses.**

115. United Nations Office on Drugs and Crime (UNODC), United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders with their Commentary ([the Bangkok Rules](#)), A/RES/65/229, adopted by the UN General Assembly on 21 December 2010.

116. See Article 27, paragraph 3, of the Greek Penitentiary Code. At Eleonas Prison, for instance, this included a psychiatrist (visiting the prison once a month), an otolaryngologist, three pathologists and one general practitioner.

191. Unsurprisingly, the delegation received numerous complaints in both prisons concerning inadequate access to a doctor and insufficient healthcare provision. At Eleonas Prison in particular, some women reported waiting weeks or even months to see a healthcare professional. Requests to see a doctor were often filtered by prison officers, including those acting as “custodial nursing assistants”, who were not able to offer appropriate medical assistance, except for calling an ambulance in emergencies. Further, many women stated that stocks of medication were inadequate. Prescriptions were reportedly not followed, either because medications were unavailable or doses were reduced. Prison management confirmed that a new budget was pending approval to allow for medication purchases. This situation is unacceptable, as it left detained women without necessary treatment.

||| The CPT recommends that the Greek authorities take the necessary steps to ensure that, at Eleonas Women’s Prison in Thiva, medication is ordered more frequently to ensure the continuous availability of essential medicines.

192. The severe consequences of insufficient healthcare staffing levels, poor access to medical services and inadequate healthcare provision in both women’s prisons were starkly illustrated by the following three cases, two of which resulted in the death of the individuals concerned:

- i) at Korydallos II Prison, the delegation met a woman suffering from breast cancer in an advanced stage, diagnosed in 2024. Since her admission in December 2024, she had been repeatedly referred to a community hospital for medical tests and chemotherapy but was never admitted due to the lack of inpatient healthcare services for women. Given the gravity of her condition, which could not be adequately addressed in prison, the delegation made an immediate observation under Article 8, paragraph 5, of the Convention, requesting her urgent transfer to an appropriate healthcare facility.

By communication of 11 April 2025, the Greek authorities informed the CPT that she had been granted conditional release.

- ii) also at Korydallos II Prison, on 19 June 2024, a woman reportedly killed herself by strangling herself with an improvised rope in her dormitory. Records reviewed by the delegation’s medical doctor indicated that she was found unconscious by fellow prisoners. Since her admission two months earlier, she had been repeatedly transferred back and forth to a community hospital for chronic heart and lung conditions, due to the absence of adequate care and follow-up in the prison. The delegation could not confirm with certitude the official conclusion of suicide,¹¹⁷ as no autopsy had been conducted and no thorough investigation undertaken. It therefore cannot be ruled out that a fatal deterioration of her serious medical condition (chronic heart and lung problems), which had remained undetected, contributed to or caused her death.
- iii) at Eleonas Prison, on 13 January 2025, a 61-year-old woman with a history of severe pulmonary disease and respiratory failure, with lesions in both lungs, died suddenly. Detained in a dormitory in E Wing, she had complained of breathing difficulties before fainting. Prison officers and external security guards reportedly attempted to transfer her using a police car, as a proper medical transport vehicle was unavailable, but this proved unfeasible.

Delays in contacting a doctor, who had to be escorted by police, further compromised her condition. Though she was eventually transferred by ambulance to Korydallos II Prison and then to the Korydallos Prison Health Centre, she was pronounced dead upon arrival.

While her condition may have been terminal – a matter which the delegation could not elucidate due to the absence of an autopsy report – the lack of timely treatment, the absence of immediate medical care, and the disorganised and undignified chaos and delay in contacting a medical doctor and in organising her emergency transfer were symptomatic of an unprofessional and poorly organised approach towards healthcare services.

117. According to the medical records, 10 days prior to her death, she had displayed a lesion in the tracheal area, indicative of inter-prisoner violence. The same lesion had led to the conclusion that she had died by suicide.

193. The CPT recommends that the Greek authorities urgently re-examine healthcare provision at Korydallos II and Eleonas Prisons, ensuring it addresses the specific healthcare needs of female prisoners. This should include responding promptly to requests for medical assistance and reducing reliance on emergency transfers by ambulance. This requires a 24/7 presence of healthcare staff in both prisons. As an initial step, a medical doctor should always be available on-call.

Further, the Committee recommends that all cases of unexpected prisoner death be subject to an autopsy, as prescribed by law, unless a medical authority independent of the establishment determines it unnecessary. There should always be both an internal inquiry and an independent external investigation into the circumstances of such deaths.

194. Medical screening of newly admitted female prisoners, including screening for injuries and blood-borne or transmissible diseases, was generally conducted within one week, once the general practitioner visited the prison, while a nurse typically saw the prisoner within 24 hours (on weekdays). However, there was no specific admission checklist during the initial medical examination. Further, it was problematic that, at Korydallos II Prison, no needs assessments were conducted in a gender-sensitive and trauma-informed way to address the special needs of women.

The CPT recommends that the Greek authorities further improve the admission process at Eleonas and Korydallos II Women's Prisons. At Korydallos II Prison, to better identify the gender-specific needs and vulnerabilities of women prisoners, the CPT recommends that the screening process upon arrival should also include a needs assessment to identify mental health needs, substance use disorders and, within a few weeks of admission, experiences of sexual abuse or other forms of gender-based violence prior to incarceration, as well as mental health problems, including PTSD.

195. As with male prisoners, the delegation found that the use of custodial officers to perform nursing tasks, without appropriate training, compromised medical confidentiality. The confidentiality of medical examinations was not systematically respected in the two prisons visited and it was not uncommon for prison staff to be present in the consultation room.

196. The CPT must stress that there can be no justification for custodial staff being systematically present during medical examinations/consultations of prisoners. Their presence is detrimental to the establishment of trust required of the relationship between the healthcare professional and the patient, and is usually unnecessary from a security point of view, more so given that confidentiality appeared to be mostly respected in male prisons. Moreover, the presence of non-medical staff during medical examinations/consultations may discourage the person concerned from disclosing sensitive information to the healthcare professional, such as information about ill-treatment.

Therefore, the CPT considers that, as a general rule, all medical examinations should be conducted out of the sight and hearing of custodial officers, under conditions fully guaranteeing medical confidentiality. However, the Committee recognises that the presence of non-medical staff at the request of the healthcare professional may be warranted in exceptional cases.

Such exceptions should be specified in the relevant regulations and should be limited to those cases in which, based on an individual risk assessment, the presence of custodial staff during the prisoner's examination is considered absolutely necessary to ensure the safety of the healthcare professional. Moreover, an exception should only be permissible if other, less intrusive security measures are considered not to fully contain the perceived risks posed by the detained person. As a possible alternative, consideration should be given to the setting up of a secure room or ensuring the presence in the room of additional healthcare personnel. Another possibility may be the installation of a call bell system, whereby healthcare professionals would be in a position to rapidly alert custodial staff in those exceptional cases when a detained person becomes agitated or threatening during a medical examination. The healthcare professional should be duly informed of any relevant prior behaviour on the part of the detained person, the applicable rules and how to react in high-risk situations.

The CPT recommends that the Greek authorities take the necessary measures to ensure that the above-mentioned precepts are fully implemented in practice. Further, the Committee refers to its recommendations in paragraph 107 on phasing out the involvement of custodial staff in the performance of healthcare tasks.

197. A full-time gynaecologist employed by the General Secretariat of Anti-Crime Policy was working at Eleonas Prison. Free gynaecological services were provided at least once a year to all female prisoners, including cervical screenings. The CPT positively notes that, at the time of the visit to Korydallos II Prison, a mobile team was present to conduct mammography screenings. Further, prisoners were offered other preventive healthcare measures, including health education and awareness-raising sessions on cancer prevention and transmissible diseases. These developments represent a notable improvement compared to previous CPT visits.

198. As noted earlier (see paragraph 170), pregnant women serving sentences at Eleonas Prison were transferred to the medical unit at Korydallos II Prison from the seventh month of pregnancy for ante- and postnatal care. The CPT welcomes the fact that women gave birth at a public maternity hospital in Athens, without additional security measures. However, one mother indicated that her partner and mother were not permitted to attend the birth.

The CPT encourages the Greek authorities to review this policy.

199. After delivery, women and their babies typically remained for up to 40 days at Korydallos II Prison for postnatal care. The delegation received complaints about the poor quality of the food, and it appears that women were not provided with the special nutrition required during pregnancy or after childbirth, aside from some cheese and fruit. Further, no monitoring was carried out by healthcare staff regarding breastfeeding. One mother told the delegation that she had to stop breastfeeding after 20 days due to insufficient nutritious food and lack of resources to purchase additional food to supplement her diet. While a paediatrician and a gynaecologist were available, no practical support or advice was offered to mothers in taking care for their newborn babies.

The CPT recommends that the Greek authorities ensure that the specific dietary needs of pregnant women and mothers with newborn babies are met, including an adequately nutritious, sufficiently calorific and well-balanced diet, rich in fresh fruit and vegetables. Further, mothers should receive practical support from a qualified nurse or midwife in taking care of their newborn babies, and breastfeeding should be actively monitored.

200. The lack of psychiatric care for female prisoners was alarming and recognised by both prison Directors as one of the most critical issues. Neither of the two establishments had a resident psychiatrist. At Korydallos II Prison, a psychiatrist visited once a week and, at Eleonas Prison, a psychiatrist came monthly, supported by a volunteer neurologist who visited once a week. This was totally insufficient given that many female prisoners had mental health problems and required psychiatric treatment. Medium to high doses of psychotropic medication were frequently prescribed which, in the absence of appropriate psychiatric or psychosocial care, presented the only form of relief available. For instance, 73 of the 88 women in E Wing at Eleonas Prison were prescribed psychotropic medication. Women experiencing acute psychiatric crises were temporarily taken to outpatient hospital services in the community for several hours as there were no psychiatric inpatient services available for female prisoners, and then returned to prison, without further follow-up, care or treatment other than pharmacotherapy.

201. This major deficiency was tragically illustrated by the suicide of a woman diagnosed with psychosis on 25 October 2024. Detained at Korydallos II Prison from 10 October, she was transferred to an out-patient service in a psychiatric hospital four times within two weeks. The last referral took place on 24 October, following an episode of self-harm. After less than three hours, she was returned to prison in a disturbed state late that night. Despite an exacerbation of her condition, during which she attacked a "custodial nursing assistant", tried to self-harm, and threatened to burn herself, she remained in segregation at the Korydallos Prison Health Centre for an entire day on 25 October while awaiting her retransfer to a

psychiatric hospital, which could not be organised promptly. At 22:30, she was found dead by a custodial officer, having strangled herself with a trouser waistband. A visiting psychiatrist had seen her earlier and confirmed her psychotic state. The circumstances of her death underline the urgent need for proper inpatient psychiatric care for female prisoners.

202. In light of the above, the CPT recommends that the Greek authorities ensure that, at both Korydallos II and Eleonas Women's Prisons, the presence of a psychiatrist is significantly increased to at least three days per week, and that the vacancy of a psychologist at Eleonas Prison is filled. The authorities should also introduce adequate psychosocial rehabilitative programmes for prisoners with mental disorders with the aim of addressing mental health needs with a multidisciplinary therapeutic approach, rather than exclusively by pharmacotherapy.

203. To address the lack of inpatient care for female prisoners, the Greek authorities and prison management informed the delegation that, according to Law no. 5129/2024, it is planned to establish psychiatric and hospital departments for female prisoners at Eleonas Prison, functioning as mental and special health centres under the Ministry of Health, which would provide the necessary staffing. While preparatory steps had reportedly begun, no timeline for their operation was provided.

Given the deficiencies in both somatic and psychiatric healthcare, the CPT considers that urgent steps are required to establish the special health and mental health centres for female prisoners, along with the transfer of healthcare responsibilities from the Ministry of Citizen Protection to the Ministry of Health, as prescribed by law.

The CPT recommends that the Greek authorities ensure the prompt establishment, proper functioning and full staffing of the planned psychiatric and hospital departments at Eleonas Prison, to guarantee adequate care for female prisoners in need of medical or psychiatric treatment.

Further, the Committee would like to be informed of the timeline and operational details of the planned facilities, including bed capacity and staffing resources.

In the meantime, all female prisoners requiring inpatient care should be hospitalised without delay.

204. The case described above also highlights the broader issue of self-harm and suicide among female prisoners. According to incident and disciplinary records from both prisons, self-harm incidents were frequent, with occasional suicide attempts. To ensure some level of supervision in the absence of adequate staffing, women with mental health disorders, including substance use disorders, dependence issues, or a high risk of self-harm or suicide were placed in shared dormitories with the general prison population. However, this approach led to tensions and complaints from other detained women.

There was no comprehensive policy at prison level for suicide prevention, allocation and risk-assessment, or medical and psychosocial support for women presenting a high risk. Further, self-harm was often met with a punitive response, including disciplinary sanctions. Many staff, including senior management, expressed the view that women usually self-harmed "to obtain a benefit" (see paragraph 208).

205. The CPT must underline that acts of self-harm are often symptomatic of severe psychological distress and should be addressed from a therapeutic rather than a punitive standpoint. Women who self-harm should receive appropriate medical care and psychosocial support to evaluate any physical injuries and their mental health status, with the aim of reducing recurrence. This also requires sufficient custodial, healthcare, and psychosocial staff, all of whom should receive ongoing training to recognise trauma, detect mental health issues, and identify risks of self-harm or suicide. More generally, prisoners showing severe signs of suicidal or (auto-)aggressive behaviour should be placed under medical observation and, where necessary, transferred immediately to a psychiatric establishment.

The CPT recommends that the Greek authorities develop or adapt clear guidelines at Korydallos II and Eleonas Women’s Prisons for managing prisoners at high risk of self-harm or suicide, in line with the above-mentioned precepts. In particular, all women presenting such a risk should be medically assessed and benefit from psychosocial counselling and support. Where required, they should be placed under close medical supervision or transferred to a psychiatric establishment. As regards the law and practice of imposing disciplinary sanctions for acts of self-harm, the CPT refers to its comments and recommendation in paragraph 208.

206. The delegation also met a significant number of women with drug-related dependence issues in both prisons. Although the special Therapeutic Department for Drug-Addict Prisoners is located adjacent to Eleonas Women’s Prison in Thiva, it only admits male prisoners. Female prisoners can participate in a counselling programme at Korydallos II Prison and a counselling and rehabilitation programme (therapeutic detoxification group) at Eleonas Prison, all run by the NGO KETHEA, as well as a self-help group offered by another organisation. However, the number of places and counsellors were limited, and demand far exceeded supply. Further, Medication for Opioid Use Disorder (MOUD) was not available for women in prison.

The CPT recommends that the Greek authorities enhance support for female prisoners with drug dependence, by expanding resources and increasing capacity for counselling and rehabilitation programmes, and by ensuring access to MOUD for women in prison, in line with equivalent services available in the community. In all cases, the abrupt discontinuation of MOUD should be avoided. Further, consideration should be given to extending the long-term dependence treatment programme at the special Therapeutic Department for Drug-Dependent Prisoners to female prisoners.

f. other issues

207. In both prisons visited, disciplinary sanctions did not appear to be applied excessively, and the procedures were generally carried out appropriately.¹¹⁸ Disciplinary solitary confinement was not applied frequently and usually only in cases involving violence, for an average of two to three days, never exceeding the legal maximum of 10 days.¹¹⁹ Disciplinary transfers were only pronounced for the most serious offences.

However, the imposition of disciplinary penalty points (typically between 40 and 100 points) or exclusion from employment or vocational training programmes was more common and, in some cases, accompanied other disciplinary sanctions. The delegation noted several instances in which disciplinary sanctions were imposed for acts of self-harm, and isolated cases where penalties were applied for submitting complaints or pressing the call bell at night. Moreover, several prisoners alleged that they had been threatened with disciplinary measures by custodial officers should they complain, use the call bell, or self-harm.

This punitive approach is problematic and appears disproportionate, particularly as such measures had an influence on the assessment of prisoners’ behaviour for conditional release, leave, or sentence reduction. Prisoners were typically excluded from such benefits if more than 100 penalty points were accumulated.¹²⁰ This practice can, in effect, extend the time spent in prison and thereby indirectly contribute to the persistent problem of overcrowding.

118. At Korydallos II Prison, 159 disciplinary decisions were taken in 2024 and 117 in 2023, while, at Eleonas Prison, 122 disciplinary cases had been processed in 2024 and 95 in 2023. Of these decisions, less than half resulted in disciplinary solitary confinement following violence against other prisoners or staff.

119. Article 69 (1) of the Penitentiary Code (as amended by Law 4985/2022). According to Article 69 (5), disciplinary solitary confinement shall be imposed on elderly persons, women, sick persons and minors only in special circumstances and following a specially reasoned decision of the competent body.

120. Article 69 (2) and (3) of the Penitentiary Code. On the other hand, disciplinary penalties were often merged or written off no later than two years after they were imposed.

208. Article 68 of the Penitentiary Code provides that a “(g) false suicide attempt or self-harm or swallowing of objects to avoid fulfilling obligations or to obtain a benefit”, and the “(i) systematic formulation of unfounded and false complaints”, constitute a Category B disciplinary offence, both of which are punishable by decision of the competent Disciplinary Council.

In the Committee’s view, complaints – which constitute a fundamental safeguard against ill-treatment, arbitrary conduct, and poor detention conditions – and pressing a call bell – particularly in a medical or other emergency – should never result in disciplinary action. Likewise, acts of self-harm should be addressed from a therapeutic rather than a punitive standpoint (see paragraphs 204 to 205).

Therefore, the CPT recommends that the Greek authorities take the necessary steps to amend the relevant provision of the Penitentiary Code to ensure that acts of self-harm and complaints are no longer subjected to disciplinary punishment.

209. The security measure most frequently applied to female prisoners was placement in a solitary confinement cell. At Eleonas Prison, the seven isolation cells attached to E Wing were austere and dilapidated, each containing only a concrete plinth with an old and dirty mattress. Detained women had to request to be escorted to the nearby toilet. Women sentenced for drug-related offences or with dependence issues were routinely segregated in these cells for three days upon each transfer or (re)admission. However, the CPT received complaints that these women were denied access to outdoor exercise and were not seen by healthcare staff, which is of particular concern in the case of women with vulnerabilities or at risk of self-harm or suicide.

The CPT recommends that the solitary confinement cells at Eleonas Prison be regularly maintained, and mattresses replaced. Women placed in these cells should be granted access to outdoor exercise and be seen daily by healthcare staff. Further, the Greek authorities should take into account the generally lower risk posed by female prisoners and the particularly harmful impact of high-security and isolation measures on women.¹²¹

210. As described previously (see paragraph 150), several women at Eleonas Prison were reportedly handcuffed by a particular prison officer to the bars at the entrance of at least two wings following incidents of self-harm. The Director confirmed that restraints might be applied in cases of insubordination or self-harm, in accordance with Article 65 of the Penitentiary Code, which permits the use of security measures, including handcuffs or confinement, when a prisoner poses a risk to the health or life of staff and other prisoners. This provision also allows for the application of “precautionary isolation or restraint measures” in cases of, *inter alia* attempted suicide, ingestion of objects, or mental illness. It explicitly requires a prior medical opinion and prohibits the use of restraints as punishment.

211. In the cases examined, the delegation found no evidence that restraints were applied preventively; instead, they appeared to have been applied as a punishment, after the women had self-harmed. This was also obvious by the lack of recording of the measure, including its duration (reported to last for several hours), the location (bars at the wing entrance), and the absence of a medical assessment. No medical opinion had been obtained in the three reported incidents.

212. As highlighted above, the practice of handcuffing prisoners who have self-harmed to fixed objects (see paragraph 151) is unacceptable.

The CPT recommends that the Greek authorities end the use of means of restraint on women following acts of self-harm at Eleonas Women’s Prison. The Penitentiary Code should be amended accordingly. If necessary, agitated prisoners who pose a serious risk to themselves or others may, as a last resort (when all other reasonable options, such as de-escalation strategies vis-à-vis the prisoner concerned have failed to contain these risks satisfactorily), be temporarily placed in an appropriate cell under close supervision of healthcare staff.

121. See in this respect Rule 41 of the Bangkok Rules.

Further, any use of seclusion or restraint should be thoroughly documented, including the start and end time of the measure, circumstances, reasons, medical opinion, and any injuries sustained by the prisoner or staff.

213. At Eleonas Prison, the delegation also received allegations, particularly from Roma women, that they had been subjected to full strip searches and that, while naked, they had to squat and cough, which they perceived as degrading. Further, some women complained that they were not always being searched by female prison officers, despite clear rules and instructions in this regard.

The CPT considers that strip searches are highly intrusive and potentially degrading and should only be used based on an individual risk assessment, under strict criteria and supervision, and in a manner that respects human dignity. Every reasonable effort should be made to minimise embarrassment; persons being searched should not normally be required to remove all clothing at once, for example, a person should be allowed to remove clothing above the waist and put it back on before removing any further clothing. In addition, searches should never be conducted by, or in front of, staff of a different gender. Staff should be aware that such practices may retraumatise women who have experienced sexual abuse or domestic violence in the past.

The CPT recommends that the Greek authorities review current procedures and practices for carrying out of strip-searches of female prisoners, in light of the above principles. In particular, alternatives to strip searches should be explored, such as the use of security technologies (for instance body scanners), in line with relevant international standards.¹²²

214. The delegation received numerous complaints regarding the limited ability of female prisoners to maintain contact with the outside world, primarily due to persistent technical problems with payphones which were out of order. At Korydallos II Prison, access to telephones was a recurring source of tension, particularly in the main wing. Many destitute prisoners indicated being unable to make phone calls for extended periods, some for several months, which severely hindered contact with their families. Several women stated that they had received no news from their children and were unable to arrange visits. This situation particularly affected Roma and foreign national women, whose families either lived far away or lacked the means to travel. In addition, although Voice over Internet Protocol (VoIP) services were available once a month at Eleonas Prison, access was limited to those whose families could provide extensive documentation – effectively excluding many indigent and foreign national prisoners.

The Committee recalls that women prisoners' contact with their families must be encouraged and facilitated.

The CPT recommends that the Greek authorities ensure that telephones are regularly maintained and promptly repaired at Korydallos II and Eleonas Women's Prisons. Indigent prisoners should be provided with additional support to maintain family contact, including access to phone cards. Further, the documentation requirements for prisoners for VoIP calls should be reviewed to facilitate access for indigent and foreign national prisoners.

215. The CPT positively notes that women could generally receive one visit from family members per week. Two well-furnished and decorated rooms had also been created at Korydallos II Prison which allowed women to receive visits from their children in a decent environment. However, the visiting facilities at Eleonas Prison were in poor condition. Moreover, some mothers complained that they could not receive open visits from their children.

The CPT recommends that the visiting area at Eleonas Prison be refurbished. It would also like to receive clarification on restrictions imposed on mothers to receive open visits from their children in the prison.

122. See Rule 52 (1) of the United Nations Standard Minimum Rules on the Treatment of Prisoners ([Nelson Mandela Rules](#)) and Rule 20 of the United Nations Rules for the Treatment of Women Prisoners and Non-custodial Measures for Women Offenders (the [Bangkok Rules](#)).

B. Police establishments

1. Preliminary remarks

216. In the course of the 2025 visit, the CPT delegation reviewed the treatment of criminal suspects deprived of their liberty by the police. To this end it visited a number of regional police headquarters and police stations and also interviewed recently admitted prisoners on remand in relation to their treatment by the police. Further, the delegation examined the implementation of the safeguards afforded to persons apprehended and detained by the police, their conditions of detention, and various deaths in police custody. It also looked once again into the arrangements for transferring prisoners around the country.

217. The legal framework governing police custody in Greece has remained unchanged since the CPT last examined policing matters in 2019.¹²³ In brief, criminal suspects may be detained by the police, on their own authority, for up to 24 hours, at which point in time the person shall be brought before the competent examining magistrate (either a prosecutor or an investigating judge, depending on the criminal offence). The examining magistrate must, within the next three days, either release the detainee or decide on the person's continued detention. Upon application by the detained person, or in exceptional circumstances, this time-limit can be extended by two more days. Thus, a criminal suspect may remain in police custody for up to six days.

218. The delegation again met many police officers carrying out their challenging tasks in a professional manner. Nevertheless, as was the case during previous visits, it found that there remains a real risk that certain persons deprived of their liberty by the police may be subjected to excessive use of force and ill-treatment upon apprehension. Little action appears to have been taken to implement the Committee's long-standing recommendations or to put in place a comprehensive strategy to combat police ill-treatment effectively.¹²⁴

2. Ill-treatment

219. In the course of the 2025 visit, the delegation interviewed a large number of persons who were or had recently been held in police custody. The large majority of detained persons indicated that they were treated correctly by the police. However, the delegation once again received a number of credible allegations of physical ill-treatment of persons deprived of their liberty by the Hellenic Police. In particular, the delegation received allegations of excessive use of force and physical ill-treatment, both during or after apprehension and at various police stations, notably in Athens (in particular, Acharnon and Aghios Panteleimonas Police Stations and Alexandras Street Police Headquarters).

The alleged physical ill-treatment consisted of slaps, punches and kicks as well as the banging of the head against the wall. The purpose of the ill-treatment was apparently to coerce suspects to admit to certain offences or as a punishment for their behaviour. It also received many complaints of excessively tight and prolonged handcuffing and, in a number of cases, could document the injuries from such handcuffing days and even weeks later. Excessively tight and prolonged handcuffing can have serious medical consequences.¹²⁵

220. The delegation also received a significant number of allegations of verbal abuse, including racist/xenophobic remarks, of persons deprived of their liberty by the Hellenic Police, as well as threats of ill-treatment and intimidation and psychological ill-treatment, especially during police interviews of criminal suspects by the police, reportedly with the aim of obtaining a confession or a signed statement.

123. CPT/Inf (2020) 15, paragraph 77.

124. See CPT/Inf (2020) 15, paragraphs 78 to 92; CPT/Inf (2017) 25, paragraphs 64 to 67; CPT/Inf (2016) 4, paragraphs 15 to 44; and CPT/Inf (2014) 26, paragraphs 14 to 25.

125. For example, sometimes causing a severe and permanent impairment of the hand(s) or thrombophlebitis in the arms.

221. The following is given as an illustrative example: On 16 December 2024, a group of around 17 persons were apprehended separately by officers of the “anti-racketeering department” and taken to the 7th floor of Alexandras Street Police Headquarters (GADA) to be interviewed. They were held together overnight in a holding cell and interviewed one by one. The delegation met several persons of the same group in different prison establishments who made similar allegations of being beaten in the corridor outside the holding cell. In particular, they stated that they were dragged across the floor and subjected to kicks, slaps and punches as well as a variety of insults and debasing treatment. A few said they were stripped of their clothes and expressed fear of reprisals.

222. In the past, the CPT has criticised the fact that allegations of ill-treatment appeared to be considered isolated cases or fabricated stories by the Greek authorities. It is true that, on most occasions, the Greek authorities no longer seem to hold this viewpoint, or to consider that ill-treatment by the police is not a problem in Greece. However, regrettably, the Greek authorities still consistently fail to recognise the seriousness, and the extent, of the problem and to take the required action.

223. The CPT has consistently highlighted the need to promote a change in police culture, which refers to an all-encompassing shift in the attitude, behaviours, values and norms within police organisations. The aim is to foster a professional policing culture that values evidence, respect for rights and ethical conduct.¹²⁶ Changing police culture is a complex, long-term process requiring sustained effort, strong leadership, community involvement and structural reform. Despite the many challenges making it difficult, such changes are critical for rebuilding trust, ensuring accountability and making policing more equitable and effective. Achieving this desired cultural change will have a direct effect not only on the perceptions and attitudes of law enforcement personnel but on a more practical level, on the procedures, processes and techniques employed by the authorities during the investigation of an offense and the exercise of their other duties.

224. An important pillar of this cultural shift includes the move away from the “confession culture”, in which guilt is proven primarily through admissions to focus instead on evidence. Previous CPT reports as well as allegations received by the delegation during the 2025 visit indicated occasional use of coercive techniques, especially in high-profile or urgent cases. The CPT has repeatedly underlined the need to carry out police interviews in a professional and non-coercive manner. To this end, a system of ongoing monitoring and the systematic review of police interviewing standards, procedures and practices should be established in order to facilitate the investigation of any allegations of ill-treatment.

225. The CPT strongly supports the use of investigative interviewing as a humane and effective alternative to coercive interrogation methods. Investigative interviewing is a structured method used by law enforcement, regulatory agencies and other professionals to gather accurate and reliable information. The main elements are designed to ensure that the process is ethical, effective and legally sound. The CPT believes that the Hellenic Police would benefit greatly from the adoption of the evidence-based and non-accusatory investigative interviewing approach as well as from its underpinning principles of fairness and ethics, transparency, and focus on accuracy over confession. The arguments to support such an approach include the respect of human rights, the gathering of more reliable information as well as the minimisation of the risk of false confessions and miscarriages of justice. The CPT has also outlined the added value of the methodology of investigative interviewing in its 28th General Report¹²⁷ and in its previous visit reports concerning Greece.

226. In this respect, the Committee notes that the Principles on Effective Interviewing for Investigations and Information Gathering, also referred to as the “Méndez Principles”, were adopted in May 2021 by a group of international legal and police experts in the field of policing and torture prevention.¹²⁸ They provide a universal framework for ethical and non-coercive interviewing, with guidance on obtaining accurate and reliable information in full respect of the human rights and dignity of all, by changing how public authorities conduct interviews and through the effective implementation of procedural safeguards in the first hours of police custody.

126. See, for example, CPT/Inf (2016) 4, paragraph 23, and CPT/Inf (2020) 15, paragraph 81.

127. See Preventing police torture and other forms of ill-treatment – reflections on good practices and emerging approaches, Extract from the 28th General Report of the CPT, [CPT/Inf \(2019\) 9](#), paragraphs 73-81.

128. Principles on Effective Interviewing for Investigations and Information Gathering ([Méndez Principles](#)).

They are considered to be a key element in the global framework aimed at preventing torture and ill-treatment, particularly in the context of law enforcement and detention. As a result, the CPT urges the Greek authorities to formally adopt the Mendez Principles as national policy.

227. The CPT has also stressed on several occasions that the systematic electronic recording of interviews (preferably video and, if not possible, audio) represents an important additional safeguard against the ill-treatment of detainees. Such a facility can provide a complete and authentic record of the interview process, thereby greatly facilitating the investigation of any allegations of ill-treatment. This is in the interest both of persons who have been ill-treated and of law enforcement officials confronted with unfounded allegations that they have engaged in physical ill-treatment or psychological pressure. Greater police accountability, clear reporting procedures and “whistle-blower” protective measures should also be put in place.

However, regrettably, the Greek authorities have not undertaken any concrete steps in this regard as, with the exception of specific circumstances, especially for vulnerable persons or in certain legal contexts, the systematic electronic recording of all police interviews is still not compulsory or uniformly applied.

228. The CPT calls upon the Greek authorities to reinforce their efforts to eradicate police ill-treatment. To this end, the leadership of the Hellenic Police should reiterate to police officers throughout the country that any form of ill-treatment (including threats) directed against detained persons constitutes a criminal offence and will be prosecuted accordingly. This implies the existence of a clear reporting line as well as the adoption of whistle-blower protective measures (namely a policy framework and an effective mechanism for the legal protection of individuals who disclose information on ill-treatment and other malpractice).

Police officers should also be firmly reminded, in particular through ongoing training, that no more force than is strictly necessary should be used when effecting an apprehension and that there can be no justification for striking apprehended persons once they have been brought under control. Where it is deemed essential to handcuff a person at the time of apprehension or at a later stage, the handcuffs should under no circumstances be excessively tight and should be applied only for as long as is strictly necessary.

The CPT also calls upon the Greek authorities to actively promote a culture change within the ranks of the Hellenic Police. Further, regular professional training for police operational officers and investigators should be provided, which is well structured and covers appropriate interview and investigation techniques, as well as the prevention of ill-treatment. Inspiration should be drawn from the methodology of investigative interviewing and the Méndez Principles.

In addition, steps should be taken to monitor police interviewing standards and procedures, and to introduce systematic electronic recording (preferably video and, if not possible, audio) of all police interviews, including the initial stage of the interviews.

229. The CPT notes that the disciplinary law of police officers underwent a reform through Presidential Decree no. 61/2024.¹²⁹ In particular, it is now obligatory to suspend from active-duty officers accused of serious criminal or disciplinary offenses, even if they are not placed in remand detention or under restrictive conditions. In addition, officers of normal rank on active duty who are convicted of serious criminal offenses by a final judgment are automatically dismissed. Further, it is now explicitly foreseen that, in cases involving the use of firearms, ill-treatment and racist or other “extreme behaviour” towards citizens involving police officers, the administrative investigations are conducted by a police officer who has no administrative or hierarchical link with the officers under investigation. These are positive developments.

129. The provisions of Presidential Decree 120/2008 were extensively modified.

The CPT would like to be informed of the number of officers who have been suspended from active duty since the entry into force of Presidential Decree no. 61/2024. Further, it would be interested to receive information on the number of officers who have been disciplined or prosecuted for offences related to excessive use of force or assault for the years 2023, 2024 and 2025.

230. The delegation again received frequent claims from detained persons about the passive role of prosecutors and judges when ill-treatment allegations were brought to their attention. In certain cases, detained persons alleged that they had appeared before prosecutors and investigating judges with visible injuries, but no further action was undertaken to question the origin of these injuries, investigate allegations of ill-treatment, or secure forensic medical evidence.

It is self-evident that prosecutors and judges should take resolute action whenever there are indications that ill-treatment by the police may have occurred. In this regard, whenever criminal suspects brought before prosecutorial or judicial authorities allege ill-treatment, those allegations should be recorded in writing, a forensic medical examination should be immediately ordered, and the necessary steps taken to ensure that the allegations are properly investigated. Such an approach should be followed whether or not the person concerned bears visible injuries.

The CPT reiterates its recommendation that prosecutors and judges be reminded firmly, through the appropriate channels, that they should act in accordance with the above-mentioned principles.

3. Safeguards against ill-treatment

231. The CPT has repeatedly advocated for the effective implementation of three procedural safeguards against ill-treatment, namely the rights of notification of custody, access to a lawyer and to a doctor, as well as the right to be informed of these rights. All these safeguards should apply from the very outset of deprivation of liberty by the police.

232. In the course of the 2025 visit, the delegation received many complaints from persons who were – or had recently been – in police custody that they did not have the possibility to notify a family member or have access to a lawyer from the outset of their deprivation of liberty.

For example, at Alexandras Street Police Headquarters, the delegation found that persons deprived of their liberty were first held in the various police departments within the Attica General Police Directorate (*Γενική Αστυνομική Διεύθυνση Αττικής – GADA*) for the purpose of being interviewed over many hours, without being offered any procedural safeguards. They were only offered the right to contact a third party or a lawyer just prior to being transferred to the holding cells on the 7th floor of the Police Headquarters.

The delegation heard further allegations of delays in access to a lawyer or to contact a third person about their apprehension from across the country, notably at Heraklion Police Headquarters.

233. This situation is not surprising, as, to this day, the Greek authorities consistently put forward the argument that the procedural rights apply only from the moment a detained person is formally “accused” with a criminal offence.¹³⁰ However, as the CPT has already noted in its 2019 visit report, this argument is not convincing. In particular, the European Union (EU) Directive on the right of access to a lawyer in criminal proceedings and on the right to have a third party informed upon deprivation of liberty was transposed into Greek law in June 2017. Therefore, the right of notification of custody is legally protected and a detained person has the right to communicate, “without undue delay”, “with at least one third person” from the outset of deprivation of liberty.¹³¹

130. Articles 97 to 99 of the Greek Code of Criminal Procedure.

131. Directive 2013/48/EU of the European Parliament and of the Council of 22 October 2013 on the right of access to a lawyer in criminal proceedings and in European arrest warrant proceedings, and on the right to have a third party informed upon deprivation of liberty and to communicate with third persons and with consular authorities while deprived of liberty.

234. In light of the foregoing, the CPT reiterates its recommendation that the Greek authorities take the necessary steps to clarify the legislative provisions on the rights of notification of custody and access to a lawyer by extending their application to criminal suspects as from the very outset of deprivation of liberty. Further, clear instructions should be issued to police officers with a view to ensuring that the rights of notification of custody and access to a lawyer become fully effective in practice as from the moment when a person is obliged to remain with the police.

235. At the 2nd Patras Police Station, the delegation met in a cell a Roma boy of 12 years of age who had been detained overnight. He stated that police officers had apprehended him at home and that, upon arrival at the station, he had been questioned in a 3rd floor office by one uniformed officer and one officer in civilian clothes. He was then questioned by a prosecutor in the presence of two other officers. The officers gave him a paper to read and sign, although he told them that he was unable to read or write. His grandfather visited him the first night and brought him some food, but he had not been assisted at any moment by a lawyer or a trusted adult.

236. The CPT must stress that the point of special provisions for juveniles is to protect this age group, owing to the vulnerable nature of a child, and to provide them with adult support so that they do not have to make decisions with important legal implications on their own. Minors should never be subjected to police questioning or requested to make any statement or to sign any document concerning the offence(s) they are suspected of having committed without the presence of a lawyer and, in principle, a trusted adult person.¹³²

The CPT recommends that the Greek authorities take steps to ensure that detained juveniles are not questioned, do not make any statements or sign any documents related to the offence of which they are suspected without the benefit of a lawyer and, in principle, of another trusted adult being present and assisting the juvenile. Police officers interviewing minors should preferably be dressed in civilian clothes.

237. The right of access to a doctor is regulated by Greek law.¹³³ However, once again, this right remained ineffective in practice for most persons detained by the police with whom the delegation met. As was the case during previous visits,¹³⁴ only in the case of a medical emergency was a detained person transferred to the nearest health centre or hospital, subject to the availability of transportation arrangements. Further, several detained persons, including persons with severe drug withdrawal symptoms, were in need of medical evaluation or assistance, but had not yet been transferred in order to be examined by a doctor.¹³⁵

The CPT once again calls upon the Greek authorities to ensure that all detained persons who require it are provided with swift and effective access to a doctor in practice.

238. The efficient application of the procedural safeguards presupposes that persons deprived of their liberty are duly informed of their rights, both orally upon apprehension and, as soon as possible, in writing in a language they understand. However, the delegation received many complaints from persons deprived of their liberty that their rights were not or not sufficiently explained to them, which resulted in them signing documents which they did not understand. On one occasion, the person concerned was allegedly even told to “shut up” when they asked for clarification of their rights. The delegation also received

132. In this regard, it is noted that, by Law no. 4689/2020, Greece transposed into national law Directive (EU) 2016/800 of the European Parliament and of the Council of 11 May 2016 on procedural safeguards for children who are suspects or accused persons in criminal proceedings.

133. Section 99A (3) (h) of the 1951 CCP mentions the right to emergency medical treatment. Article 60 (3) of Presidential Decree 141/1991 provides for medical care and the right to ask to be examined by a doctor of the detainee’s choice. See also paragraph 3 (g) of Police Circular 4803/22/44, which states that the protection of detained persons’ health is a basic duty of the police authorities.

134. See, for instance, CPT/Inf (2020) 15, paragraph 99.

135. In this respect, see also the section on deaths in custody.

numerous complaints by foreign national detainees who stated that they had not been informed of their rights in a language they could understand and that they had not been provided with the assistance of an interpreter.

The CPT calls upon the Greek authorities to ensure that all persons apprehended by the Hellenic Police are informed of their rights, both orally and in writing, in a language and form they can understand as from the outset of their deprivation of liberty. All persons deprived of their liberty should obtain information about their procedural rights in a format accessible to them, depending on their needs. Detained foreign nationals who do not understand the Greek language should be promptly provided with the services of an interpreter and should not be requested to sign any statements or other documents without such assistance.

The CPT considers that practical steps must be taken to ensure that detained persons are actually able to understand their rights. Reference is made in this context to the EU Directive on the right to information in criminal proceedings,¹³⁶ which makes it clear that written information to be provided to persons in police custody should be drafted in simple and non-technical language so as to be easily understood by a lay person without any knowledge of criminal procedural law. It further stipulates that the information should be provided in a simple and accessible language, taking into account any particular needs of vulnerable suspects or accused persons.

The Committee also recommends that a specific information form, setting out the particular position of detained juveniles and including a reference to the presence of a lawyer/another trusted adult, be developed and given to all such persons taken into custody. Special care should be taken to explain the information carefully, in a simple, child-friendly manner, preferably with the use of a pictogram, to ensure comprehension.

239. In the course of the 2025 visit, the CPT delegation observed, once again, that custody records were poorly kept in most police stations visited (for instance, the exact time of arrival, departure or transfers were not always mentioned). Following the 2019 visit, the Greek authorities informed the CPT that, by the end of 2019, the handwritten custody records would be replaced by electronic custody registers which ought to ensure a systematic and comprehensive record for every person detained by the police. However, at the time of the 2025 visit, this was still not the case.

The CPT calls upon the Greek authorities to ensure that custody registers are properly maintained, accurately record the times of actual apprehension, admission, placement in a cell, release or transfer, and reflect all other aspects of custody. Further, every placement in a detention cell, even if it concerns a short-term holding cell, must be diligently recorded.

The Committee would also like to receive information about the timing of the introduction of electronic custody registers in all police stations.

136. Directive 2012/13/EU of the European Parliament and of the Council of 22 May 2012 on the right to information in criminal proceedings.

4. Conditions of detention

240. In its previous reports, the CPT has been highly critical of the substandard conditions of detention in most Greek police stations, emphasising that such facilities are unsuitable for holding persons for periods exceeding 24 hours. During the 2025 visit, echoing findings from the 2019 visit,¹³⁷ the Committee again observed significant disparities in the material conditions across different police establishments.

241. The CPT welcomes the efforts undertaken by the Greek authorities to renovate detention areas in several police stations in the Attica region. According to information provided by the Hellenic Police in their communication of 1 April 2025, refurbishment works were ongoing at Acropolis, Kolonos and Daphne-Hymettus Police Stations, while more extensive renovations were in progress at Kypseli and Kallithea Police Stations. Additional maintenance efforts were also underway at Vyrona Police Station (locks and doors) and Pagrati Police Station (plumbing system), while remaining refurbishment works were scheduled to begin at Omonia, Aghios Panteleimonas and Patissia Police Stations. Further, as of April 2025, Police Commanders in the Attica region were instructed to submit regular reports on refurbishment needs. This is positive.

Material conditions at *Omonia Police Station* had notably improved compared to previous CPT visits. The five cells on the first floor, and the two short-term holding cells located on the second and third floors (the latter being under the responsibility of the Security Police) had all been renovated and repainted. Plumbing and ventilation systems had been repaired, and new lighting had been installed. At the time of the visit, all cells were clean, and the detention area on the first floor had a large stock of newly purchased mattresses and blankets. It was noted that persons were normally no longer held overnight in the short-term holding cells.¹³⁸ In addition, material conditions at *Alexandra Street Police Headquarters* were also deemed acceptable. All detention cells and sanitary facilities were in a decent state of hygiene and maintenance. However, many mattresses and blankets were worn out and dirty, and these should be replaced. Further, the cells in both police establishments were still not equipped with call bells and, despite persons being held for periods of up to 10 days or longer, no daily access to outdoor exercise was offered.

242. In all other police stations visited, the conditions of detention remained unsuitable for holding persons beyond 24 hours. Many detention areas were regularly overcrowded, dirty, and dilapidated. Deficiencies included poor hygiene conditions, inadequate ventilation, insufficient or no access to natural light, and poor artificial lighting – some cells were found to be almost entirely dark. Persons held in police custody were typically provided only with a mattress and blanket, both often dirty and worn out. They were not supplied with bed sheets, towels, or basic hygiene items, such as soap, toothbrushes, or sanitary pads for women. Further, most of the police stations visited had no functioning call bells, or heating and cooling systems. They also did not provide access to outdoor exercise.

For example, the detention and holding cells at *Aghios Panteleimonas Police Station* had still insufficient or no access to natural light, and artificial lighting was dysfunctional in the small holding cell on the third floor. At *Exarcheia Police Station*, the three basement cells and adjoining corridors were found to be extremely dirty. The cells offered insufficient access to natural light, and the mattresses and blankets were shabby and had evidently not been cleaned for a while. The presence of a bottle filled with urine suggested that detained persons did not always have prompt access to the toilet.

243. The material conditions were particularly dire and unhygienic in the two poorly designed detention areas on the first floor of *Chalkida Police Station*. The first area, confined to a very narrow space, contained a small holding cell for women measuring approximately 6 m², divided into two sections with small plinths, and a partitioned toilet.¹³⁹ This cell did not have access to natural light and had very dim artificial lighting, and the concrete plinths were too narrow to accommodate a mattress. The detention area for men comprised two cells designed to hold six persons each (the second was kept locked if fewer than six persons were detained), neither of which offered sufficient access to natural light; there was one separate toilet for both cells. In both detention areas, floors were filthy and strewn with garbage, and toilets were covered in excrement, presenting a severe hygiene hazard.

137. See CPT/Inf (2020) 15, paragraphs 103 *et seq.*

138. There were also plans to install CCTV and fire detection and protection equipment.

139. The police officer on duty claimed that the cell could hold up to three women.

The CPT recommends that, at Chalkida Police Station, the Greek authorities stop holding women overnight in the holding cell for women and that men are no longer detained in the cell at the rear of the male detention area, until such time as the cells are able to offer appropriate conditions of detention. Further, facilities must be deep cleaned and thereafter maintained in a decent state of cleanliness.

244. Moreover, the CPT is concerned that foreign nationals under administrative detention continue to be regularly held in police stations for prolonged periods. While in the Attica region persons were generally transferred to one of the two pre-removal detention centres within a few days, the delegation met two foreign nationals at *Acharnon Police Station* who had been detained for over a month in the detention cell on the ground floor, together with criminal suspects, under cramped and poor conditions, without seeing the light of the day. The cell was inadequately lit, did not have a call bell, and the sanitary facilities were in a poor state of hygiene.

245. At the *Transfer Departments at Chania and Heraklion Police Headquarters*, the delegation found that foreign nationals were even being held for months on end in conditions of detention which are inadequate for keeping persons for such lengthy periods. At the time of the visit, 23 persons, including two women, were being held in seven cells at the Chania facility (six for men and one for women), with a total capacity of 34. In Heraklion, 18 persons, including one woman and three persons claiming to be unaccompanied minors (see paragraph 249), were detained in nine cells (seven for men, and one each for women and juveniles), with a total capacity of 68. Most were foreign nationals held under immigration legislation who had been in detention for periods ranging from several days to three months. The delegation was also informed that, in Chania, two persons had previously been detained for up to six months.

While it remains positive that, unlike all other police establishments visited, detained persons at Chania Transfer Department were allowed daily access to outdoor exercise, no such provision existed in Heraklion.

In both departments, cells were equipped only with a concrete plinth and thin mattresses – some of which were dirty, torn, or without covers – and blankets, many of which were dirty. In Chania, some detained persons were forced to share mattresses, including air mattresses, as there were insufficient mattresses available for all. Many cells were cramped and lacked cleanliness, and several persons complained of bed bugs. Lighting and ventilation were poor in both establishments, and several cells in Chania had little or no access to natural light. No call bell system was available. Numerous detained persons, particularly in Chania, complained about the inadequate quality and quantity of food, with several stating that they had often remained hungry.¹⁴⁰ In sum, the material conditions in both Transfer Departments were inadequate for holding persons for periods exceeding a few days, due to the absence of an appropriate regime.

246. The CPT recalls its long-standing position that foreign nationals held under immigration legislation should not be placed for extended periods in police stations or transfer centres, as such facilities are not designed or equipped to offer appropriate conditions of detention for this purpose.

The CPT recommends that the Greek authorities ensure that police stations and transfer centres be used exclusively for the short-term detention of criminal suspects for periods not exceeding a few days. Foreign nationals held under administrative procedures should be promptly transferred to dedicated pre-removal detention facilities. The Committee would like to be informed of the number of persons being held under immigration legislation in police stations for the first nine months of 2025.

140. It remained that persons held for immigration detention purposes received an equivalent of €5.87 per day.

247. In light of the findings outlined in the preceding paragraphs, the CPT calls upon the Greek authorities to take the necessary measures to ensure that, in all police stations and transfer centres:

- every detained person is provided with a clean mattress, clean blanket, clean bedding and a means of rest, such as a bed or a plinth. Dirty or torn mattresses and blankets should be replaced without delay;
- all detention areas, including sanitary facilities, are maintained in a satisfactory state of repair and cleanliness;
- all detention cells have adequate access to natural light and adequate artificial lighting, proper ventilation, and are equipped with a functioning call bell. These minimum standards should also be applied when designing new detention facilities in police establishments;
- all detained persons have ready access to a toilet facility at all times, including at night;
- all persons detained beyond 24 hours are granted daily access to outdoor exercise.

The CPT also invites the Greek authorities to intensify efforts to refurbish and modernise police detention facilities throughout the country, to ensure that all persons deprived of their liberty by the police are held in decent conditions of detention.

248. The delegation also noted that persons detained by the police, both in police stations and in transfer centres, were generally not provided with basic sanitary items, except in a few facilities in Athens. This also included sanitary pads for women, due to the absence of a dedicated budget. In some police stations, detained persons were not even provided with soap. Some police officers stated that hygiene products were expected to be brought by family members – an arrangement that is clearly impractical and discriminatory, particularly for foreign nationals held for immigration reasons, who often have no support.

The CPT recommends that all persons detained for periods exceeding 24 hours be systematically provided, free of charge, with a basic sanitary kit, including soap, toilet paper, shampoo, toothbrush and toothpaste, shaving materials for men, and sanitary pads for women. The Greek authorities should ensure that the necessary budgetary resources and stocks are in place to guarantee consistent availability of basic sanitary items in all police detention facilities.

249. The delegation met three young persons detained at the Heraklion Transfer Department who claimed to be unaccompanied minors but who had not undergone proper identification. A similar situation was encountered at Chania Transfer Department. It therefore appears that there is still no reliable age assessment system in place for persons detained by the police. The delegation received confirmation that the status of these persons would be reassessed.

The CPT recalls its position that any person claiming to be a juvenile should have access to a proper age assessment procedure and be treated as a minor unless the claim is manifestly unfounded.

The CPT would like to receive detailed information from the Greek authorities on the current procedures in place for identifying unaccompanied minors detained by the Hellenic Police.

250. At Chania Transfer Department, two women were being held in the sole cell designated for women, which measured approximately 9 m². A few days prior to the visit, up to seven women had reportedly been detained there for several hours overnight. The women indicated that they felt unsafe and intimidated by the male detainees, who had almost unrestricted access to the corridor in front of their cell, while they remained locked up for most of the day. The door frame of the cell showed visible signs of previous intrusion attempts. Monitoring of the corridor was limited to CCTV, which was clearly insufficient to ensure the women's safety. The staff acknowledged that it was unsuitable to hold women in this cell and tried

to help the women by allowing them to use the sanitary facilities of staff. This is totally unacceptable. The Committee considers that holding women in such an environment, without appropriate protective measures or sufficient supervision, places them at serious risk.

||| The CPT recommends that women no longer be detained at the Transfer Department at Chania Police Headquarters unless effective protective measures and supervision are put in place to guarantee their safety.

251. Moreover, foreign nationals detained at both Chania and Heraklion Transfer Departments did not have appropriate access to a doctor and lacked medical care. Several detained persons stated that they had repeatedly requested to see a doctor, including persons with substance use disorders or serious skin rashes, but their requests were allegedly ignored or refused by police officers. The situation was particularly problematic at Chania Transfer Department, where the delegation identified three foreign nationals in need of urgent medical attention:

- i) One person displayed signs of a severe mental disorder. He had previously been admitted to a psychiatric hospital and still presented signs of sedation, with significant difficulties in communicating with others, detained persons and staff alike.
- ii) A second individual showed symptoms consistent with scabies, which remained untreated.
- iii) A third person reported chronic abdominal pain and blood in his urine. Despite him presenting clear symptoms, previous medical certificates, and repeatedly requesting for medical assistance, he had not been examined by a doctor. According to the delegation's medical doctors, he required urgent hospitalisation and surgery. His serious medical condition had remained undetected and unaddressed due to persistent inaction by custodial staff.

252. Following the delegation's intervention, the authorities of Chania Police Headquarters reported, in their communication of 30 January 2025, that the two latter individuals had been transferred to a hospital for diagnosis and were receiving appropriate treatment.

||| 253. The CPT recommends that the Greek authorities ensure that persons with serious or acute mental health conditions detained in police establishments, such as the Transfer Departments of Chania and Heraklion Police Headquarters, are promptly transferred to specialised medical or psychiatric institutions when their mental health condition deteriorates. Further, all foreign nationals detained beyond a few days should undergo systematic medical screening upon arrival. This screening should enable acute or chronic health issues, mental health conditions, and transmissible diseases to be identified, injuries to be detected, and potential vulnerabilities to be assessed.

||| The CPT also recommends that all detained persons be guaranteed prompt access to medical care. Requests to consult a doctor should never be filtered or obstructed by custodial staff, who are not trained to make a medical assessment.

5. Deaths in custody

254. The delegation was informed of several deaths which occurred in various police stations in the months preceding the visit. Notably, Greek media reported the death of a Pakistani national on 21 September 2024 while in custody at Agios Panteleimonas Police Station. Published autopsy photos showed multiple bruises all over his body, suggesting severe ill-treatment and raising serious concerns about the cause of death.

255. According to data provided by the Hellenic Police, 27 deaths in police custody were recorded between 2022 and 2024 (six in 2022, 11 in 2023 and 10 in 2024), which represents a marked increase compared with previous years. Reported causes of death included suicide (15 cases) and sudden death due to various medical reasons (four cases), while in eight instances, the cause of death remained undetermined or had not yet been established, pending administrative inquiries or autopsy results.¹⁴¹ Among these, three deaths occurred at Amygdaleza Immigration Detention Centre, and two each at the Police Departments of Agios Panteleimonas, Omonia and Veria (all Attica) and Chalkida (Euboea). In their communication dated 1 April 2025, the Greek authorities indicated that the Hellenic Police had issued instructions that the pending administrative inquiries in these cases be expedited.

256. The CPT would like to receive the following information from the Greek authorities:

- **the number of deaths in police custody in 2025, with a breakdown by police station and cause of death;**
- **information on any lessons learned following the cases of suicide which occurred in 2022, 2023 and 2024;**
- **the exact cause of death in those among the eight cases in 2022, 2023 and 2024 in which the cause of death had not previously been established;**
- **whether any of these cases resulted in disciplinary or criminal sanctions against the police officers involved and, in the affirmative, a detailed summary of the case, the findings of the investigation, and any sanctions imposed.**

257. In light of the above, the delegation decided to examine for itself the recent deaths in police custody at several of the police stations visited, notably at Acharnon (one death), Agios Panteleimonas (two deaths), Chalkida (two deaths), and Omonia Police Stations (two deaths). The CPT is particularly concerned about the following cases:

- i) As mentioned above, a 37-year-old Pakistani national with a known history of drug dependence and mental health issues died on 21 September 2024 at Agios Panteleimonas Police Station. Based on information from police officers, his lawyer, police records and public reports, the delegation could establish that he had reportedly been arrested on 13 September and detained for several days in various police stations, without access to a lawyer and without the possibility to notify anyone of his detention. According to a statement from the Hellenic Police Headquarters, he was arrested on 18 September in a state of intoxication, for harassment. Records confirmed his admission to Agios Panteleimonas Police Station at 01:15 on 18 September. After an altercation with other detained persons in one of the cells on the first floor, he was moved to the holding cell on the ground floor.

Police reported that he was agitated and aggressive during his detention, attacked an officer and broke a bathroom sink. He was restrained, and an ambulance was called.

During his custody at the police station, he was brought twice before the competent public prosecutor and was notably sentenced in summary proceedings for damage to public property, but was then returned to the police station, pending transfer to prison.¹⁴² Neither the holding cell nor the bathroom area on the ground floor was covered by CCTV.

On the morning of 21 September, he was found unconscious in the holding cell on the ground floor and his death was confirmed by ambulance staff. While the exact cause of death is still being investigated, the autopsy report reportedly cited an “unspecified cause of death” and significant bruising on the body consistent with a “prior beating”. Despite several requests, the delegation was not provided with a copy of the autopsy report (in this regard, (see paragraph 5). On 27 September 2024, the Ministry of Citizen Protection stated that the police investigation would be supervised by the Greek Ombudsman.¹⁴³

141. Based on the information available to the CPT, there have been three additional cases of death in custody between January and March 2025 alone.

142. See Hellenic Police, [26-09-2024: Announcement by the Hellenic Police Headquarters](#).

143. See Hellenic Police, [27-09-2024: Announcement by the Ministry of Citizen Protection](#).

- ii) The delegation also examined several cases of suicide. On 9 September 2024, a Greek national detained in one of the two cells in the detention area for men at Chalkida Police Station ended his own life by hanging himself. According to the police, he strangled himself in the narrow corridor at the rear, near the toilet area. The corridor was not covered by CCTV, and due to the poor layout of the cell space, this required officers to enter physically the detention area in order to ensure a proper visual inspection, which they had apparently not done. A case file was opened against the officer concerned for “negligent homicide – criminal offence committed by omission”.

In a similar incident, a foreign national detained in the one of the cells on the first floor at Agios Panteleimonas Police Station hanged himself with his shoelaces in 2024 while, on 1 October 2024, another foreign national with a reported mental disorder was found by other detained persons hanging by his shirt in one of the cells on the first floor at Omonia Police Station. In all cases, the deaths were not immediately detected by the police officers on duty, reportedly due to staff shortages.

In another case, on 28 May 2023, a foreign national held at Omonia Police Station, who was under the influence of alcohol and who reportedly suffered from panic attacks, jumped from of a window on the second floor of the station. He sustained fatal injuries to the head, neck, right hemithorax, abdomen and lower limbs.

- iii) Moreover, even in case of reported natural deaths, detained persons with specific vulnerabilities or at risk, due to health or substance use issues, were not appropriately identified or assessed by healthcare professionals. For example, on 4 November 2024, a 45-year-old Greek national with a reported heart problem and substance use history was found unconscious in his cell at Achanon Police Station (initial conclusions pointed to a potential cardiac arrest).

258. In the first case, despite repeated requests, the delegation has still not been given a plausible explanation for the extensive bruising on the body of the Pakistani national, following his death in police custody; injuries that had reportedly gone undetected and undocumented at the time of his admission. While it is for the competent prosecutorial authorities to shed light on the circumstances of the death, the European Court of Human Rights has consistently held that individuals in custody are in a vulnerable position and that the authorities have a duty to protect them. When a person is taken into police custody in good health and is later found injured on release, it is incumbent on the state to provide a plausible explanation for those injuries.

This obligation to account for the treatment of an individual is even more stringent in cases involving death in custody, and it includes a procedural obligation to carry out an effective investigation.¹⁴⁴



The CPT would like to receive a copy of the autopsy report, the findings of the administrative and criminal investigations into the case.

259. The CPT is of the view that many of the above-mentioned deaths or suicides in police custody might have been prevented had there been adequate measures taken by both the central authorities of the Hellenic Police and the police officers involved. It is, for instance, unacceptable that the police stations visited did not even have a written safety and security protocol outlining basic procedures for managing security incidents, fire safety, or medical emergencies, and handling persons with specific vulnerabilities or at risk. This notably includes persons with specific medical needs, agitated or aggressive persons, including those at risk of self-harm and suicide, with mental health issues or with substance use or dependence problems. Currently, officers rely on verbal instructions issued by the commander of the police station.

144. See European Court of Human Rights, *Salman v. Turkey* [GC], no. 21986/93, 27 June 2000, paragraphs 99 to 100; *Tanli v. Turkey*, no. 26129/95, 10 April 2001, paragraph 141; *Tekin and Arslan v. Belgium*, no. 37795/13, 5 September 2017, paragraph 83. See also *S.F. v. Switzerland*, no. 23405/16, 30 June 2020, concerning the Swiss authorities’ failure to prevent the suicide of a vulnerable detained person who had been left unattended in a police cell for forty minutes, despite a clear and repeated threat of suicide; and *Tsalikidis and Others v. Greece*, no. 73974/14, 16 November 2017, regarding the Greek authorities’ failure to carry out an adequate and effective investigation into the circumstances surrounding the death of the person concerned.

260. The delegation was informed that, following the above-mentioned suicides, some police stations had taken limited steps to improve monitoring and search procedures. However, these cases point to broader structural shortcomings and insufficient measures were taken to prevent similar incidents in the future. Notably, persons with specific vulnerabilities or at risk were often not properly identified and did not have access to a medical doctor for the assessment of their somatic or mental health conditions, or issues related to substance use or dependence. Instead, ambulances were only called in cases of emergency. As a result, police officers – who lacked appropriate medical training – were left alone to determine whether the medical assistance was required and to monitor the health of detained persons.

The only meaningful effort to genuinely address these issues came from the newly appointed Director of Omonia Police Station, who took office in October 2024 and who informed the delegation that he was developing a new safety and security protocol for managing persons in custody. This protocol aims to establish clear and consistent procedures, particularly for persons with vulnerabilities or at risk. Such a written, comprehensive protocol could potentially present good practice and might be implemented in all police stations.

The CPT would like to receive a copy of the new safety and security protocol being developed at Omonia Police Station. It recommends that the Hellenic Police taken the necessary steps to ensure that all police stations throughout Greece have a written, comprehensive protocol for managing persons in custody. Such a protocol should include clear procedures for the management of persons with specific vulnerabilities or at risk, including persons with medical or mental health conditions, those at risk of self-harm or suicide, and individuals with substance use or dependence problems.

261. Another key shortcoming is the apparent lack of sufficient staffing and adequate training of officers, particularly in identifying and managing persons with specific vulnerabilities or at risk. For instance, it appears that police officers are reportedly instructed to check on persons held in their custody every 30 to 40 minutes – a frequency the CPT considers insufficient. In practice, even these instructions were not consistently observed, mainly due to staffing shortages. As a result, persons with vulnerabilities or at risk may be left in a police cell unsupervised for extended periods of up to several hours, without adequate monitoring.

The CPT considers that adequate supervision – particularly in areas not covered by CCTV or where visibility is reduced – and regular monitoring of persons in custody must be guaranteed under all circumstances.

This requires urgent and comprehensive measures to prevent further instances of death or suicide in police custody. The efforts to instil a more professional ethos, as promoted by the new Director of Omonia Police Station, including through the introduction of regular oversight and monitoring of persons with specific vulnerabilities or at risk, represents an important step forward.

262. The CPT recommends that the Hellenic Police conduct a comprehensive review of staff levels in police stations equipped with detention facilities, and of the training provided to police personnel. A dedicated custody officer, explicitly tasked with the supervision and monitoring of detained persons, should be appointed in all police stations.¹⁴⁵

Training should include identification and management of persons with specific vulnerabilities or at risk, management of medical or mental health cases, and prevention of suicide.

145. See in this respect the CPT's 28th General Report concerning "centralised police detention and designated custody officers – a promising practice" ([CPT/Inf\(2019\)9](#), paragraphs 82 to 85).

Additionally, the CPT recommends that the Hellenic Police take steps to improve the care of individuals with specific vulnerabilities or at risk, with a focus on proper identification and risk assessment, supervision and monitoring. Such identified persons should be placed under close observation in a secure environment. A medical doctor should be called whenever necessary, and individuals presenting a danger to themselves or others should be promptly transferred to a healthcare facility to receive appropriate care.

6. Transfer of prisoners by the Hellenic Police

263. As regards the transfer of prisoners organised under the authority of the Transfers Directorate of the Hellenic Police, the situation remained the same as that described in the reports on the 2019 and 2021 visits.¹⁴⁶ Moreover, the Greek authorities had not responded to the recommendations set out in the 2019 and 2021 visit reports intended to improve the conditions under which prisoners were transferred around the country. In particular, the delegation found that no steps had been taken to reduce the occupancy levels in the small, secured compartments in the transport buses, which continued to hold four persons in 1.2 m² even during long journeys of several hours or more.

In the course of the 2025 visit, many complaints were again received from both male and female prisoners that, during their transfers, they were placed in very cramped caged compartments, in dark conditions and with a lack of fresh air, and that at times they had to use a plastic bottle to urinate as stops were infrequent. Some also stated that the situation was made worse by the fact that some of the prisoners smoked in the vehicle.

The delegation looked at several transport vehicles. The standard transport bus of the Hellenic Police that the delegation inspected at Malandrino Prison, which was used for transporting prisoners for long distances between different establishments and courts around the country, retained all the deficiencies previously identified by the CPT. The transfer vehicle was dark, filthy and austere. The four caged cubicles each measured approximately 1 m² and had a metal bench.

264. The CPT considers that transfers of prisoners should always be carried out in a humane, secure and safe manner. When vehicles are equipped with secure compartments, individual cubicles measuring less than 0.6 m² should not be used for transporting a person, no matter how short the duration. Compartments or cubicles intended to transport more than one person should offer at least 0.6 m² of personal space. Further, all transport vehicles should be clean, sufficiently lit and ventilated, and heated or air-conditioned appropriately.¹⁴⁷

Prisoners should be transported in vehicles suitably designed and fit for that purpose, taking due account of all relevant safety requirements in order to protect them. In particular, all vehicles which are used for the transfer of prisoners should be regularly maintained and outdated vehicles should be replaced. New transport vehicles should be equipped with appropriate safety devices that meet basic road safety standards, such as safety belts and padded seats, which allow prisoners to be seated in the direction of travel. They should also be fitted with means to enable prisoners to communicate with escort staff.

In addition, necessary arrangements should be made to provide prisoners with drinking water as required and with food at appropriate intervals. Arrangements should be made to allow prisoners to have access to sanitary facilities or to satisfy the needs of nature in conditions offering sufficient privacy, hygiene and dignity. When travelling by road, this implies the organisation of regular stops.

The Greek authorities should also take steps to prevent intimidation and verbal abuse being perpetrated by prisoners against their fellow passengers. In particular, women should not be placed together with men in the same transfer vehicles.

146. See CPT/Inf (2020) 15, paragraphs 124 to 130, and CPT/Inf (2022) 16, paragraphs 84 to 86.

147. See also the CPT factsheet on transport of detainees of June 2018: [CPT/Inf \(2018\) 24](#).

265. The CPT reiterates its recommendation that the Greek authorities urgently review the current arrangements by which the Hellenic Police transfer prisoners in Greece. In particular, they should ensure that:

- **the capacity of the secure coaches is reduced, as no more than two persons should be held in the 1.2 m² compartments and no more than one person in the 0.6 m² cubicles. All vehicles which are used for the transfer of prisoners should be regularly maintained and outdated transport vehicles should be replaced, taking into consideration the above-mentioned standards of personal space;**
- **all transport vehicles are equipped with appropriate safety devices that meet basic road safety standards, such as safety belts and padded seats, which allow prisoners to be seated in the direction of travel. They should also be fitted with means to enable prisoners to communicate with escort staff;**
- **all secure transport vehicles are clean, sufficiently lit and ventilated, and heated or air-conditioned appropriately;**
- **prisoners are provided with drinking water as required and with food at appropriate intervals;**
- **prisoners are offered access to sanitary facilities at regular intervals, in conditions offering sufficient privacy, hygiene and dignity;**
- **appropriate measures are taken to prevent prisoners being subjected to intimidation and verbal abuse by fellow prisoners. In particular, female prisoners should not be transferred together with male prisoners in the same secure vehicle.**

APPENDIX I – Establishments visited

The delegation visited the following places of detention:

Prison establishments

- Alikarnassos Prison (Heraklion)
- Chalkida Prison
- Chania Prison
- Korydallos I Prison Complex (targeted visits to the Men's Prison, the Prison Health Centre and the Prison Psychiatric Hospital) (Athens)
- Korydallos II Women's Prison (Athens)
- Malandrino Prison
- Nafplio Prison
- Patras Prison
- Eleonas Women's Prison (Thiva)

Police establishments

- Acharnon Police Station (Athens)
- Aghios Panteleimonas Police Station (Athens)
- Alexandras Street Police Headquarters (Athens)
- Chalkida Police Station
- Chania Police Headquarters
- Exarcheia Police Station (Athens)
- Heraklion Police Headquarters
- Omonia Police Station (Athens)
- 1st Patras Police Station
- 2nd Patras Police Station

APPENDIX II – List of authorities and organisations met by the delegation

A. National authorities

Ministry of Citizen Protection

Michalis Chrysochoidis	Minister of Citizen Protection
Andreas Nikolakopoulos	Deputy Minister of Citizen Protection
Triantafyllos Karatrados	Advisor to the Minister of Citizen Protection
Kyriakoula Dikaiakou	Legal Advisor to the Minister of Citizen Protection
Aristos Perris	Secretary General for Anti-Crime Policy
	Deputy Head of the General Directorate of Prison and Crisis Management
Eleni Chalkia	Head of Department of Prison Management and Transfer Issues
Ioannis Lambrakis	Deputy Head to the Director General for Anti-Crime and Penitentiary Policy
Theodora Paloumpi	Deputy Head of the Detention Facility Operations Department

Ministry of Health

Professor Georgios Alevizopoulos	Head of the Forensic Psychiatry Department at “Agioli Anargyroi” Hospital
Maria Dimopoulou	Social and child psychiatric nurse

B. Other bodies

Office of the Greek Ombudsman

Andreas Pottakis	Greek Ombudsman, Head of the National Mechanism for the Investigation of Arbitrary Incidents
Yannis Moschos	Deputy Ombudsman for Human Rights, Head of the National Preventive Mechanism (NPM)

Various (senior) investigators from the Office of the Greek Ombudsman and the NPM team

Greek National Commission for Human Rights (GNCHR)

Yannis Ioannidis First Vice-President of the GNCHR

Elli Varchalama Second Vice-President of the GNCHR

Various (deputy) chairs of the different Committees, (alternate) members and scientific staff of the GNCHR

C. Non-governmental organisations and other individuals

Nikolaos Koulouris Associate Professor, Department of Social Policy, Democritus University of Thrace, former PC-CP member in respect of Greece, former President of the Scientific Prison Council

Greek Helsinki Monitor

Lawyers involved in litigation before the European Court of Human Rights on conditions of det

“NO ONE SHALL BE SUBJECTED TO TORTURE OR TO INHUMAN OR DEGRADING TREATMENT OR PUNISHMENT”

Article 3 of the European Convention on Human Rights

Established in 1989 by the Council of Europe Convention for the Prevention of Torture and Inhuman or Degrading Treatment or Punishment, the CPT's aim is to strengthen the protection of persons deprived of their liberty through the organisation of regular visits to places of detention.

The Committee is an independent, non-judicial preventive mechanism, complementing the work of the European Court of Human Rights. It monitors the treatment of persons deprived of their liberty by visiting places such as prisons, juvenile detention centres, police stations, immigration detention facilities, psychiatric hospitals and social care homes. CPT delegations have unrestricted access to places of detention, and the right to interview, in private, persons deprived of their liberty. They may access all the information necessary to carry out their work, including any administrative and medical documents.

The CPT plays an essential role in promoting decency in detention, through the development of minimum standards and good practice for states parties, as well as through coordination with other international bodies. The implementation of its recommendations has a significant impact on the development of human rights in Council of Europe member states and influences the policies, legislation and practices of national authorities regarding detention.



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The Council of Europe is the continent's leading human rights organisation. It comprises 46 member states, including all members of the European Union. All Council of Europe member states have signed up to the European Convention on Human Rights, a treaty designed to protect human rights, democracy and the rule of law. The European Court of Human Rights oversees the implementation of the Convention in the member states.