Highlights

- As of July 2021, Iran has been hit by the fifth COVID-19 wave and the insurgence of the Delta variant of COVID-19, first found in India, in several provinces. The number of cities on ‘red alert’ has increased to 232 and the number of cities on ‘orange alert’ to 117, indicating a rising trend in infections amid continued low adherence to health protocols.

- On 27th July The Iranian Ministry of Health reported that the death toll from COVID-19 in Iran has risen to 89,122 deaths (with 322 new deaths in the last 24 hours) and a total of 3,723,246 confirmed cases (with 31,814 new cases in the last 24 hours).

- The 2021 HAC still has a funding gap of 89 per cent. Without sufficient funding, over 10,000 households will not have access to adequate nutritious foods, over 30,000 children will not receive the psychosocial support they need. 7,230 most vulnerable children will not have access to education, and 500 schools will not be able to ensure safe reopening. Additionally, 42,400 households are in dire need of social protection cash assistance to survive the secondary impacts of the COVID-19 pandemic in the country.

- UNICEF Iran procured 2,258 of the planned 1 million COVID-19 diagnostic test kits, targeting 216,768 people; however further needs are covered by Ministry of Health and Medical Education (MoHME).
UNICEF’s Response and Funding Status

Funding Overview and Partnerships
UNICEF Iran appealed for $14 million to sustain the provision of life-saving services for children and their caregivers affected by COVID-19 in Iran. This year, the Governments of Austria and Italy, the European Commission, Danish NatCom and Global humanitarian thematic funding (GHTF) generously contributed to UNICEF Iran’s humanitarian response. UNICEF expresses its sincere gratitude to all public and private donors for the contributions received.

That said, the 2021 HAC still has a funding gap of 89 per cent. Without sufficient funding, over 10,000 households will not have access to adequate nutritious foods, and over 30,000 children will not receive the psychosocial support they need. Furthermore, 7,230 most vulnerable children will not have access to education. With additional funds, UNICEF would be able to support 500 schools in the most disadvantaged areas to prepare for safe school reopening. Additionally, further funding will enable UNICEF Iran to cover more vulnerable adolescents with the Remote Stepped Psychosocial Care and Support (ReSPCT) programme and enhance their psychosocial wellbeing. Addressing the funding gap will also enable UNICEF to roll out its Cash Plus programme in four provinces, targeting the remaining 42,400 households in need of this assistance.

Situation Overview & Humanitarian Needs
As of July 2021, Iran has been hit by the fifth wave and the insurgence of the Delta variant of COVID-19, first found in India, in several provinces. The number of Iranian cities on ‘red alert’ has increased to 232 and the number of cities on ‘orange alert’ to 117, indicating a rising trend in infections amid continued low adherence to health protocols. The situation in one of the already less advantageous provinces i.e. Sistan and Baluchestan is also deteriorating with the worrying figures of approximately 1,170 positive cases diagnosed per day, implying that the number of infected people has quadrupled in this province.

Following the pandemic, utilization of food and nutrition services has been diminished for thousands of children, women, and families. This has resulted in an immediate negative impact on the quality of diets
and nutrition practices, causing increased malnutrition among the population groups with the highest nutrition needs, including under five children.¹

The COVID-19 pandemic has had an extreme impact on the mental health of children and families by disrupting social connectedness, daily routines, and access to resources. The socio-economic pressure and occurrence of the COVID-19 outbreak have also provided grounds for the development of a wide range of unhealthy coping behavior (such as school dropout, and child labor/marriage) which will have long-term consequences on children’s wellbeing.² In such situations, the importance of community resilience in emergency settings in ensuring the mental health and wellbeing of children and their parents/caregivers and social protection support schemes has become clearer.

Given that schools have been closed since early 2020, distance learning has been provided through the Ministry of Education (MoE) online learning platform called SHAD, national TV, and print materials. According to the MoE, 21 per cent of the student population, or 3.2 million students (out of 14 million), do not have access to the SHAD platform.³ Considering required digital devices and internet access, children with multiple vulnerabilities, such as Children with Disabilities (CWD) from low-income families living in lower income areas, struggle with the most challenging barriers and are more likely to lose access to distance education through online modalities, and become at-risk of school dropout.⁴

**Summary Analysis of Programme Response**

**Health**

The Ministry of Health and Medical Education (MOHME) initially requested the procurement of 1 million COVID-19 diagnostic test kits in late 2020, due to the urgency for procurement of test kits UNICEF Iran has already procured 2,258 packs of test kits and 216,768 people have been reached. Since then, the capacity of MOHME was strengthened and further needs were covered by this Ministry.

The MOHME managed to procure some of the HIV rapid diagnostic kits through other resources and reduced its request from UNICEF to 20,000. UNICEF procured these test kits through GHTF funds. Furthermore, UNICEF continues to support MOHME in providing specific HIV/AIDS prevention, treatment, and care services to adolescents and youth under its differentiated service delivery plan to cover approximately 500 adolescents living with HIV/AIDS and approximately 2,500 adolescent boys and girls affected by HIV/AIDS.

**Nutrition**

In response to the nutritional needs of children under five at risk of vitamin A deficiency, 1,362,000 mega doses of vitamin A supplements were procured and distributed in eight food insecure provinces during May and June 2021. The provided fund have supported UNICEF in reaching the target for its main indicator, vitamin A supplements. However, there is still a funding gap of 97%. Further funding will enable UNICEF Iran to advocate for enhancing the food and nutrition security of the most vulnerable children through the distribution of food vouchers in priority provinces.

**Child Protection**

UNICEF continues to support the Iranian Red Crescent Society (IRCS) both technically and financially in strengthening community resilience in the face of natural and man-made disasters and related social harms. The IRCS, as one of the country’s major actors in emergency preparedness and response, is planning to establish and expand “Red Crescent Houses” in disadvantaged urban and rural areas of all 31 provinces of Iran, with an aim to strengthen community resilience through community engagement and
empowerment. UNICEF will support IRCs in implementing this initiative by providing technical and financial support to conducting a needs assessment, developing an action plan for establishing and operationalizing the “Red Crescent Houses”, developing relevant training packages, building the capacity of IRCs volunteers and selected community members on the developed packages, and making the “Red Crescent Houses” operational. These activities will be implemented over a period of 2 years (2021-2022), with the following timeline:

- 2021: Conducting a needs assessment, developing an action plan, developing training packages, and conducting part of the capacity-building activities.
- 2022: Continuing capacity-building and operationalizing the “Red Crescent Houses”.

In preparation for the need assessment meant to commence in October 2021, the required amount for implementing the first year’s activities had already been funded from other sources. The remaining activities i.e. 2022 activities require approximately $280,000 and are currently unfunded. Therefore, any potential funds received for this purpose will be carried over to 2022.

**Education**

To support safe school operations, and using funds reprogrammed from 2020, UNICEF provided 242 special schools for Children with Disabilities (CWD) with WASH/IPC items including masks, gun thermometers, hand and surface sanitizers, spray pumps and dispensers, to facilitate the access of 7,742 students with special needs across the country to safe learning spaces. UNICEF is also in the process of procuring similar items for 954 regular schools and 2,720 special schools in five less-developed provinces to facilitate safe school reopening and enable the return of 147,638 students and 70,273 students with special school needs. These activities are done as part of other planned programs using other resources available.

The need to support 500 schools to prepare for safe school reopening in the selected most-disadvantaged areas, and planned interventions to support access of 72,320 most vulnerable children in the selected most disadvantaged areas to education under HAC 2021, remains unfunded.

**Social Protection**

As mentioned in the HAC; a recent analysis undertaken by the Ministry of Cooperatives, Labor and Social Welfare and UNICEF suggests that 11.5 million households in less-developed areas and on the margins of major urban centers are under or just above the multidimensional poverty line; and 1 million of these households, including 4 million people, urgently require humanitarian assistance. This population has not benefited from social security during the COVID-19 outbreak. In addition, some 3 million Afghans living in the Islamic Republic of Iran, including refugees and immigrants, have been severely impacted.

The Cash Plus programme (conditioned, with soft conditionality) has been rolled out in the two provinces of Khuzestan and Kermanshah to provide immediate support to more than 7,500 of the lowest three deciles income households with children, including 13,667 children. While the programme provides immediate support to these vulnerable households, it also serves as a tested model for national scale-up and for developing an integrated child-sensitive national social protection system, including identifying the capacity gaps in the system.

At the initial phase, the programme is reaching 4,654 out of school children, 508 with severe malnutrition, and 6,614 children at risk of leaving school due to the socioeconomic impact of COVID-19.

The first draft of the Standard Operation Procedures (SOP) was developed together with the Ministry of Corporate Labor and Social Welfare (MoCLSW) and with the technical support of the International Policy
Centre for Inclusive Growth (IPC-IG), outlining the design and implementation features, operational rules and procedures, tools and instruments for the cash transfer cycle.

The first cash transfer was made to the identified households to register and build their trust to participate in the programme. Furthermore, the non-cash support mechanism was initiated based on the immediate needs identified by an e-committee including provincial authorities, MoE, MCLSW and other actors in the filed based on the field situation analysis and in line with in line with the objective of the program. For example, summer classes started in July to support 5,331 children who are out of school due to academic weakness, at risk of drop-out from school due to economic conditions or falling behind the curriculum due to COVID-19. The summer classes include in-person COVID-19 compliance educational support and targeted make-up exams. Furthermore, approximately 7,000 children will be provided with educational packages, stationaries, and counselling sessions. Additionally, children below the school age will also receive support to improve their nutrition status through this program. However, the funding and the support mechanisms of this part of the program is through MCLSW/SWO ongoing schemes from government in kind resources.

C4D, Community Engagement, AAP
Within the first half of 2021 and concurrent with the fourth and fifth waves of COVID-19, UNICEF Iran supported a Risk Communication and Community Engagement (RCCE) response through continued partnership with the Government of Iran, particularly the MoHME, to ensure the dissemination of safe, timely and tailored information to the community. These materials were shared mainly through UNICEF online platforms, online and offline platforms of 31 medical universities across the country, online and offline training workshops, state TV channels, private sector partners’ online platforms, as well as adolescent wellbeing clubs.

In response to the drop in the rates of routine vaccination of children following the COVID-19 pandemic, UNICEF has been supporting MoHME’s national campaign for the promotion of routine vaccination of children. The campaign included: a) in-person follow-ups with parents by MOH health personnel, b) distribution of information and guidelines for parents and vaccinators on COVID-19 precautions during vaccination as well as guidelines for vaccination centers on precautionary measures in the centers (waiting areas and vaccination rooms), to be placed in all vaccination centers across the country by MOHME; c) production of videos, and d) development of a mobile application.

From the beginning of 2021, aside from the previously broadcasted communication materials that are being continuously shared through different online platforms (500,000 mothers were reached through the information campaign on breastfeeding), nearly 2 million people were reached through three videos on the promotion of routine vaccination aired from UNICEF’s Instagram and MoHME’s available platforms, as well as MoHME’s health and vaccine centres. In addition, 5,000 banners and 84,000 posters were produced and distributed among over 60 cities and 31 provinces, including 63 Medical Sciences Universities and 30,000 affiliated health centres and vaccine centres, to raise awareness among health workers and parents in these provinces which reached further 2 million.

Several brochures and a video are under development for the promotion of healthy eating during COVID-19. The productions will be broadcasted through various platforms of UNICEF and MoHME.

In collaboration with MoHME and national NGOs, UNICEF Iran is supporting the provision of 2,500 educational materials, brochures, booklets, and pamphlets, design, and production of a comprehensive mobile application for education, empowerment and awareness-raising for families with CWD affected by
COVID-19. These activities are ongoing in 56 cities in Iran among identified disadvantaged families, single-headed household families, and Afghan refugee families living with autism.

UNICEF Iran has supported MoHME’s Adolescents Health Department and the Ministry of Education in developing 100 gender and age-sensitive educational communication materials including videos, banners, and posters for the wellbeing of children and adolescents, with themes such as healthy eating, physical activities, controlling chronic diseases, and COVID-19.

Human Interest Stories and External Media
Since the beginning of the COVID-19 pandemic, the UNICEF Iran website and social media channels have been actively engaged in improving the knowledge and information of the general public and media on COVID-19 prevention and response, highlighting the needs of the most vulnerable children. The dedicated COVID-19 webpage on UNICEF Iran website, with over 100 UNICEF COVID-19 informative articles/infographics in Persian, continues to be the highest visited page of the UNICEF Iran website. UNICEF Iran has significantly increased its audience engagement on social media by updating content on Instagram, Twitter, and Facebook, with a newly opened LinkedIn account, as well as posting material on Aparat (Iranian You Tube) and YouTube channels. Followers of UNICEF Iran’s Instagram page reached a record high of 515,000 by end of July 2021, marking the highest number of Instagram followers among all UN agencies in Iran and UNICEF offices in the MENA region. A UNICEF Iran webpage with a Persian article containing key information for parents on COVID-19 recorded the highest public visit ever among all UNICEF websites globally, with over 1.5 million visitors, and placed Iran among the top three countries. The Persian material on COVID-19 was also shared with other UNICEF offices in Afghanistan, Azerbaijan, and Turkey, upon their request, for sharing with Persian audiences. The outreach of UNICEF Iran’s social media accounts is estimated at 20 million individuals per year, with the number expected to further grow as followers increase on different platforms.

Since the beginning of 2021, several WHO and UNICEF articles on a variety of topics were translated for the Iranian public and posted on the UNICEF Iran website and social media, including how to amuse young children during lockdown, tips for families on strengthening mental health during the pandemic, how to protect children from digital media harms, how to get rid of stress for adolescents and youth, pregnancy and COVID, and many more. These articles have been reposted by several national media outlets, further increasing the outreach.

UNICEF Iran developed several human interest stories on its COVID-19 response including on nurses who received UNICEF-procured PPE and vulnerable children receiving UNICEF hygiene items during COVID. The videos on maintaining routine vaccination of children during COVID-19 were posted on digital platforms of ICO and shared with the public.

A number of RCCE videos, out of 100 videos produced by UNICEF, MoHME and MoE on the promotion of wellbeing among children and adolescents, especially during COVID, were posted on the UNICEF Iran website and social media.

Next SitRep: January 2022

Who to contact for further information:

Name: Robin Nandy  
Title: Representative  
Name of Country Office: Iran  
Email: mandy@unicef.org

Name: Gilles Chevalier  
Title: Deputy Representative  
Name of Country Office: Iran  
Email: gchevalier@unicef.org

Name: Mahdis Daniali  
Title: Emergency Focal Point  
Name of Country Office: Iran  
Email: mdaniali@unicef.org
Annex A: Summary of Program Results

<table>
<thead>
<tr>
<th>Sector</th>
<th>Overall Needs</th>
<th>2021 target</th>
<th>Total results</th>
<th>Change since last report</th>
<th>2021 target</th>
<th>Total results</th>
<th>Change since last report</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Health</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children and women accessing primary health care in UNICEF-supported facilities</td>
<td>800,000</td>
<td>80,000</td>
<td>2,258</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of adolescent girls and boys tested for HIV and who received the result of their last test</td>
<td>N/A</td>
<td>600</td>
<td>544</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of pregnant women tested for HIV and AIDS</td>
<td>736,000</td>
<td>100,000</td>
<td>20,000</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Nutrition</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children aged 6 to 59 months receiving vitamin A supplementation every six months</td>
<td>1,000,000</td>
<td>1,000,000</td>
<td>1,362,000</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Child Protection, GBVIE &amp; PESA</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children and caregivers accessing mental health and psychosocial support</td>
<td>3,533,664</td>
<td>2,800,000</td>
<td>0</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of social service workers trained on specific knowledge and skills to deliver essential services during the COVID-19 pandemic with UNICEF support in the reporting year</td>
<td>N/A</td>
<td>1000</td>
<td>0</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of children accessing formal or non-formal education, including early learning</td>
<td>N/A</td>
<td>72,000</td>
<td>0</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of schools implementing safe school protocols (infection prevention and control)</td>
<td></td>
<td>500</td>
<td>0</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Social Protection &amp; Cash Transfers</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td># of households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding</td>
<td>24,000,000</td>
<td>42,000</td>
<td>7,500</td>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

C4D, Community Engagement & AAP
1. UNICEF Iran CO has procured 2,258 packs of test kits and 216,768 people have been reached. Since then, the capacity of MOHME was strengthened and further needs were covered by this Ministry. No further needs to be covered by UNICEF Iran HAC.

2. MOHME reduced its request for HIV rapid diagnostic test kits to 20,000 and UNICEF procured them through GHTF funds. No further needs to be covered by UNICEF HAC.

3. Actual unit costs appeared to be lower that expected due to the USD to IRR exchange fluctuations.

4. With the generous support of Austria and internal resources mobilized (1.4 million USD) rollout of this program could only start in two provinces covering 7,500 households. More households would be covered upon receiving further funding.
### Annex B: Funding Status

<table>
<thead>
<tr>
<th>Sector</th>
<th>Requirements</th>
<th>Funds available</th>
<th>Funding gap</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Humanitarian resources received in 2021</td>
<td>Other resources used in 2021</td>
</tr>
<tr>
<td>Health</td>
<td>1,618,200¹</td>
<td>201,400</td>
<td>36,895</td>
</tr>
<tr>
<td>Nutrition</td>
<td>1,566,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Child Protection</td>
<td>498,800</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Education</td>
<td>1,508,000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Social Protection &amp; Cash Transfers</td>
<td>8,853,120</td>
<td>1,206,127</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>14,044,120</strong></td>
<td><strong>1,407,527</strong></td>
<td><strong>36,895</strong></td>
</tr>
</tbody>
</table>

1. An activity was fully achieved and was removed from the Health section of the Iran HAC 2021. Additionally, MoHME became self sufficient in providing COVID-19 test kits and reduced the number of required HIV diagnostic test kits. Therefore, the required fund for this sector is reduced to US$527,800.

2. According to the abovementioned point, funding gap is reduced to 20%.
Endnotes

1. WHO COVID-19 update based on secondary data and reports from MoHME, 2021
7. Confirmation email from Division of communication HQ (DoC)
8. Visible data of followers from UNICEF and UN agencies Instagram accounts, also confirmed by MENARO communication advisor