Islamic Republic of Iran

HIGHLIGHTS

- The Islamic Republic of Iran is the country in the Middle East that has been most affected by coronavirus disease 2019 (COVID-19). The pandemic has had a dramatic impact on the national economy, which was already strained by the reinforcement of sanctions in 2018. This situation has diminished national capacities to respond to increasing humanitarian needs and the vulnerabilities of affected populations.

- UNICEF’s humanitarian strategy in the Islamic Republic of Iran is to support national efforts to manage the COVID-19 crisis and mitigate and address the secondary impacts of the crisis on the most vulnerable populations.

- UNICEF is requesting US$14 million to meet the critical needs of the most vulnerable families and children affected by the COVID-19 crisis, in the context of the lingering effects of previous emergencies and deteriorating economic conditions.

KEY PLANNED TARGETS

- **2.8 million**
  - children/caregivers accessing mental health and psychosocial support

- **72,000**
  - children accessing educational services

- **42,000**
  - households reached with cash transfers where UNICEF provided technical assistance

- **4.1 million**
  - people reached through messaging on access to services

IN NEED

11.4 million people

5.5 million children

TO BE REACHED

4.1 million people

1.5 million children

FUNDING REQUIREMENTS

US$ 14 million
HUMANITARIAN SITUATION AND NEEDS

The Islamic Republic of Iran is ranked among the 10 most disaster-prone countries in the world. Its geography, coupled with infrastructural fragility, growing urbanization and challenging socio-economic conditions, make it particularly vulnerable to natural disasters. Extreme climate conditions are exposing the country to several slow- and rapid-onset emergencies and exacerbating existing vulnerabilities.

The Islamic Republic of Iran is the country in the Middle East that has been most severely affected by COVID-19. The pandemic has dramatically impacted the national economy, which was already strained by the economic sanctions reinforced in 2018. This has adversely affected the Government's capacity to maintain public services, particularly social services, and provide timely emergency preparedness and response. As the adaptive capacities and resilience of local communities decline, vulnerability to emergencies – and related humanitarian needs – are on the rise.

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 centres 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 national social protection system is neither shock-responsive nor agile, and is unable to effectively target and support specific vulnerable populations. Prior to the COVID-19 crisis, 40 per cent of the national budget was allocated to social protection schemes, including the universal basic income. However this scheme and supplementary measures do not currently follow the principles of inclusiveness, adequacy of coverage and comprehensiveness. The latter is compounded by rapid currency devaluation and inflation.

Projections indicate that the current situation could reverse national achievements towards the Sustainable Development Goals. According to the Ministry of Education, more than 20 per cent of school-aged children, including 500,000 refugees and 170,000 children with disabilities, lack access to online learning opportunities. This has made it difficult for students to build skills and has exposed adolescents to various social harms. The number of out-of-school children could dramatically increase in low-income households, especially in less-developed provinces and on the margins of major urban centres. The Government also increasingly needs international support to provide vital health, nutrition and psychosocial support services to the most vulnerable communities.

STORY FROM THE FIELD

Children in Rado village in the province of Sistan and Baluchestan study in an open area after floods ruined their UNICEF-supported school.
HUMANITARIAN STRATEGY

UNICEF’s emergency response strategy in the Islamic Republic of Iran is informed by national humanitarian priorities, the Country Programme 2017–2022 and the Sustainable Development Goals. UNICEF is working with the Government, national humanitarian and development actors, sister United Nations agencies and partners to address the needs of affected girls, boys and families and build national capacities to ensure quality child-sensitive emergency preparedness and response.

Within the existing coordination system and in the absence of clusters, UNICEF leads the education, water, sanitation and hygiene (WASH) and nutrition sectors and the child protection sub-sector. UNICEF has played an active role in the United Nations COVID-19 Preparedness and Response Plan by leading the risk communication and community engagement pillar; co-leading, with the World Health Organization (WHO), the provision of supplies to support the health sector response to COVID-19; actively engaging in the United Nations health procurement group; co-leading with sister United Nations agencies a multi-sector response to COVID-19, particularly in relation to the urgent needs of vulnerable children; and steering the development of a national shock-responsive social protection approach targeting the most vulnerable populations.

Considering the multiplicity of risks and the complexity of this situation, UNICEF humanitarian and development interventions – which were developed in collaboration with national partners and United Nations agencies – were designed to enhance the efficiency of the Government and its interventions, both at the national and provincial levels, and strengthen the resilience of vulnerable communities.

UNICEF is using a multi-sectoral approach to address the complex situation of overlapping socio-economic, health, education, protection and natural hazard-related emergencies. In line with the Core Commitments of Children in Humanitarian Action, this includes interventions focused on social protection, health, nutrition, education, child protection, adolescent development and participation and communication for development. Protective measures will provide a more robust safety net for population groups and address multiple deprivations. All interventions will be designed to address the immediate needs of target communities, build community resilience, and ensure the efficacy and efficiency of national programmes, including by supporting national efforts to build a shock-responsive protection system.

2021 PROGRAMME TARGETS

Nutrition
- 1,000,000 children aged 6 to 59 months receiving vitamin A supplementation every six months

Health and HIV and AIDS
- 80,000 children and women accessing primary health care in UNICEF-supported facilities
- 600 adolescent girls and boys tested for HIV and who received the result of their last test
- 100,000 pregnant women tested for HIV and AIDS

Child Protection, GBViE and PSEA
- 2,800,000 children and caregivers accessing mental health and psychosocial support

Education
- 72,000 children accessing formal or non-formal education, including early learning
- 500 schools implementing safe school protocols (infection prevention and control)

Social protection and cash transfers
- 42,000 households reached with cash transfers through an existing government system where UNICEF provided technical assistance and funding

C4D, community engagement and AAP
- 4,120,000 people reached with messages on access to services

Programme targets are provisional and subject to change upon finalization of the inter-agency planning documents.
UNICEF is requesting US$14 million to reach 4.1 million people – including 1.5 million children – in the Islamic Republic of Iran in 2021. The negative impacts of the COVID-19 crisis have exacerbated the effects of lingering disparities and deteriorating economic conditions on the most vulnerable children in the country. There is a significant need for increased funding to support the provision of basic health, nutrition, education and protection services to the most vulnerable children in disadvantaged communities. This funding will allow UNICEF to respond to the immediate needs of affected populations; adopt a comprehensive social protection approach to address the needs of affected children; and develop a resilient national shock-responsive scheme that supports affected people sustainably.

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<thead>
<tr>
<th>Sector</th>
<th>2021 requirements (US$)</th>
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<tbody>
<tr>
<td>Nutrition</td>
<td>1,566,000</td>
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<tr>
<td>Health and HIV and AIDS</td>
<td>1,618,200</td>
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<tr>
<td>Child protection, GBVIE and PSEA</td>
<td>498,800</td>
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<tr>
<td>Education</td>
<td>1,508,000</td>
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<tr>
<td>Social protection and cash transfers</td>
<td>8,853,120</td>
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<td><strong>Total</strong></td>
<td><strong>14,044,120</strong></td>
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ENDNOTES

1. UNICEF estimate based on data and information extracted from official and public sources.
2. Ibid.
3. This was calculated using the highest coverage programme targets for nutrition interventions (1 million malnourished children under 5 years, 49 per cent girls); child protection/mental health and psychosocial support (2.82 million adults, 49 per cent female); health interventions (100,000 people, 60 per cent female); and social protection interventions (200,000 people, 49 per cent female). UNICEF is committed to needs-based targeting, which means covering the unmet needs of children; and will serve as the provider of last resort where it has cluster coordination responsibilities.
4. This was calculated based on the total number of children to be reached by at least one of the planned interventions, excluding communication for development activities. This figure includes 1 million malnourished children under 5 years (49 per cent girls); 450,000 children (49 per cent girls) to be reached with mental health and psychosocial support interventions; and 80,000 children (49 per cent girls), including 5,000 children living with disabilities, to be reached with social protection interventions including cash transfers and education.
12. Due to space constraints, the following acronyms appear in the appeal: GBViE (gender-based violence in emergencies); PSEA (prevention of sexual exploitation and abuse); C4D (communication for development); and AAP (accountability to affected populations).
13. Information provided to UNICEF by the Iran Red Crescent Society in 2020 (not publicly available).
16. This intervention includes building the screening and counselling capacities of selected health centres in less-developed areas.
17. In addition to the provision of HIV and AIDS tests, this intervention includes the provision of counseling services to 600 hard-to-reach high-risk adolescents in six provinces.
18. This will include building national capacities, developing a mental health and psychosocial support training package and training 1,000 trainers to support the Iranian Red Crescent Society to offer this service in 31 provinces.
19. UNICEF supports the Ministry of Education to build national capacities for equitable inclusive distance learning opportunities and safe school operations. The target of this specific intervention is to ensure the access of 72,000 extremely vulnerable school-aged children to learning opportunities, under a comprehensive social protection intervention, in collaboration with the Ministry of Cooperatives, Labor and Social Welfare.
20. The target population includes girls and boys equally. It includes about 5,000 children with disabilities. About 1,500 children with disabilities have already been identified for specific interventions. UNICEF's focus is to address the immediate needs of extremely vulnerable populations and develop and promote a shock-responsive comprehensive social protection scheme in the country. UNICEF and partners are unable to broaden the scope of this intervention at this stage.
21. The target population will be reached with communication for development messages.
22. The US$7,632,000 cash transfer component includes six monthly transfers of US$30 to 42,400 vulnerable households.