THE UN IN IRAN: KEY DEVELOPMENT ACHIEVEMENTS AND RESULTS 2012-2013

Summary Report
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The UN in Iran

FAO: Food and Agricultural Organization
IOM: International Organization of Migration
UNAIDS: The Joint United Nations Programme on HIV/AIDS
UNAMA: United Nations Assistance Mission for Afghanistan
UNAMI: United Nations Assistance Mission for Iraq
UNDP: United Nations Development Programme
UNDSS: United Nations Department for Safety and Security
UNESCO: United Nations Educational, Scientific and Cultural Organization
UNFPA: United Nations Population Fund
UN-HABITAT: The United Nations Human Settlements Programme
UNHCR: United Nations High Commissioner for Refugees
UNIC: United Nations Information Centre
UNICEF: United Nations Children’s Fund
UNIDO: United Nations Industrial Development Organisation
UNOCHA: United Nations Office for the Coordination of Humanitarian Affairs
UNODC: United Nations Office on Drugs and Crime
WFP: World Food Programme
WHO: World Health Organization
A Message from the UN Resident Coordinator

On behalf of the United Nations Family in the Islamic Republic of Iran, I am proud to present you with a Summary Report of the work done under the United Nations Development Assistance Framework (UNDAF) for the Islamic Republic of Iran during 2012-2013. The UNDAF is an overall guiding document for the UN’s work in Iran, which was discussed and agreed with the Government in 2011. It covers the period 2012-2016, and addresses five priority areas – poverty reduction, health, environmentally sustainable development, natural disaster management, and drug reduction and control.

The UNDAF provides strategic vision for our work and is based on principles, which include national ownership of the process and culturally-sensitive approaches. The UNDAF is the result of a close consultative process between the Government of Iran and the United Nations Country Team, and is closely aligned with Iran’s 5th Five-Year National Development Plan (2011-2015), and the Millennium Development Goals (MDGs). Its purpose is to maximize coordination between the UN agencies – and between the UN and Government. It seeks to minimize overlaps and duplication, and ensure efficiency and transparency.

While the UNDAF’s timeframe is five years, this report provides an overview of the first two of those years. In this way, it gives us a sense of how far we have come, and what remains to be done.

I would like to thank all those partners from Government, the NGO community, civil society and colleagues in the United Nations who are working closely with us – both as operational counterparts and as providers of essential funding. It is my sincere hope that this report contributes to strengthening these partnerships by demonstrating our commitment to achieving tangible results while being held accountable for the resources entrusted to us.

Gary Lewis
Resident Coordinator
Background

This report provides an overview of the development achievements, undertaken by the UN in Iran between 2012-2013. These achievements are defined either as results at an output level (e.g., the number of national and sub-national capacities strengthened), or as results at an outcome level (e.g., changes in institutional policy and practice). The achievements number 945 in total.

Overall, the largest number of UN achievements can be counted in the area of health (424), followed – in order of rank – by poverty reduction (342), environmentally sustainable development (100), drug reduction and control (78) and natural disaster management (11). (See Figure 1.)

**Figure 1: UN Achievements per Priority Area**

![Pie chart showing UN achievements per priority area: Health (424), Poverty Reduction (342), Environmentally Sustainable Development (100), Drug Reduction and Control (78), Natural Disaster Management (11).]

The UNDAF budget requirement for 2012-2016 was estimated at around US$ 160 million. A significant amount of that budget still has to be raised. But, of the amount already raised, during the period 2012-2013, some US$ 44 million – or approximately 30% of the original budget – has been spent.

The largest share of the available budget has been spent on health (approximately 61%). This is followed, in order of budget expenditures, by environmentally sustainable development (18%),...
drug reduction and control (12%), poverty reduction (9%), and natural disaster management (0.1%) (See Figure 2.)

**Figure 2: Financial Contribution per Priority Area**

In terms of the types of technical support being provided, UN support is mainly channeled towards capacity development, knowledge production and service delivery. Overall, these three categories of support account for more than 86% of the achievement contained in this report.

The UN in Iran works on both development and humanitarian activities. However, it should be noted that only development activities (covered under the five priority areas) are contained in the UNDAF. Nevertheless, humanitarian activities remain a key component of the UN's work and are reported on elsewhere.

In terms of agency achievements, the highest number of reported achievements is attributable to UNDP, followed by UNFPA. WHO and UNICEF have (in descending order) the next highest number of reported achievements. While the nature of each reported result can differ significantly in scope and scale, the tabulation does give a broad sense of where the UN agency efforts have been most concentrated during 2012-2013.
The UN in Iran 2012-2013: A Few Highlights

- The **Carbon Sequestration** project approach and model which counters desertification through sustainable development, has been replicated from one province to over 15 provinces in Iran. The “village development groups” system it introduced already extends to 2,500 persons directly.

- In a country where most of the land is arid or semi-arid, the UN has supported the establishment of watershed/sub watershed-level resource management and development committees.

- The UN has assisted the Statistical Centre of Iran to conduct a baseline survey to identify the awareness and knowledge level on Evidence-Based Programming concepts among managers in government organizations.

- The UN has ensured that 78% of targeted “malaria at-risk” populations have been reached through the process of spraying houses with indoor residual spraying (IRS) by the end of 2013.

- The UN has conducted a study in Tehran, Gorgan, Isfahan, Mashhad, Shiraz, and Kermanshah among 420 injecting drug users to determine the status of infectious diseases.

- The UN organized a joint earthquake simulation exercise for the National Disaster Management Organization and its sectorial working groups in Kerman and Tehran.

- To counter Iran’s CFC emissions, the UN supported the Halon Management Programme, including procurement of equipment for Iran’s Halon Bank and development of a recovery and recycling system.

- In a country which is undergoing a nutrition transition which correlates to its increasing level of development, the UN evaluated national programmes on non-communicable disease prevention and control, including the national diabetes prevention and control programme.

- To support Iran’s public health efforts, the UN procured and donated polio vaccines for one million children in 2013, through the national routine immunization programme.

- Focusing on Qeshm Island, the UN supported handicraft production as a means of preserving traditional culture and providing family incomes, particularly among poor women.

- In a country where HIV remains a major public health concern, the UN supported the completion of an HIV Treatment Evaluation study, the findings of which have been channeled into the revision of the national guidelines.
Key Achievements

(Clockwise from top left) Youth empowerment through the *Show Your Selfie* campaign; Bam Citadel World Heritage site; HIV negative child of HIV positive parents at a Tehran Positive Club; helping to restore Lake Uromiyleh; vulnerable children receiving education in a child rights NGO south of Tehran; and supporting efforts to combat narcotics trafficking.)
POVERTY REDUCTION

Iran’s Human Development Index (HDI) value for the year 2013 was 0.749, placing Iran 75th out of 187 countries in terms of its human development. Iran has witnessed a decline in extreme income poverty, with only 1.39% of the population living on less than two US dollars per day in 2008 compared with 4.84% in 2000. However, when the level of inequality in Iran is factored in, the country’s ranking in terms of human development falls.

Under the poverty reduction priority area, the UN system has paid particular attention to strengthening national and sub-national development planning capacities to promote inclusive economic growth, as well as to support Iran’s Economic Reform Plan process, provide technical and vocational education, and improve the availability and use of data.

The UN has worked towards two main outcomes under the poverty reduction priority area:

- To promote inclusive economic growth, sustainable human development, social and economic welfare, and prevent poverty.
- To ensure that poor people have improved enhanced access to education, health and social protection programmes.
Poverty Reduction: Key Achievements

Under the poverty priority area, UN expenditure was **$5,474,281**, with **6 agencies** making a total of **342 contributions**.

**UNDP** and **UNFPA** jointly supported the Statistical Centre of Iran’s (SCI) Statistical Research and Training Centre to develop two analytical reports on the linkage between economic factors and demographic trends.

**UNFPA** provided technical and financial support to the SCI to conduct the 2011 census. UNFPA also enhanced the SCI’s capacity to collect, analyze, disseminate and utilize disaggregated population data for decision-making, policy formulation, programming and monitoring of national achievements such as MDG indicators and the Programme of Action of the International Conference on Population and Development (ICPD).

**UNICEF** successfully advocated for and promoted the mapping of child-sensitive social protection programmes in Iran and is now supporting a research group of the University of Social Welfare and Rehabilitation to undertake further work in this area.

**UNFPA** assisted the SCI to conduct a baseline survey to identify the awareness and knowledge level on Evidence-Based Programming (EBP) concepts among managers in different government organizations. In addition, support was provided for SCI to develop a roadmap for EBP capacity development, and support was provided for over 30 training workshops through which more than 400 government staff were trained on EBP management.

**UNDP** replicated the Carbon Sequestration project approach and model from one province to over 15 provinces in Iran. The “village development groups” – a concept developed under the project – now covers 2,500 persons directly.

**UNICEF** enhanced the technical knowledge of 38 officers of the Ministry of Cooperation, Labour, and Social Welfare on monitoring and analysis of child deprivation and disparities.

**UNFPA** supported a number of demographic and health surveys on emerging population issues such as ageing, youth, urbanization and migration conducted by SCI and the University of Tehran. These knowledge products will be used to help shape policy and decision-making by relevant stakeholders.
UNDP contributed to building capacity among farmers, non-government organizations and government partners in 5 provinces through the Global Environment Facility’s Small Grants Programme. UNDP supported climate-resilient participatory and evolutionary crop breeding to improve food security. This was done in the context of adaptation to anticipate the impact of climate change.

FAO and UNDP supported initiatives to promote the sustainable use of water and energy resources for agricultural production and livelihoods, rehabilitating degraded landscapes, and improving pelagic fishing systems and pesticide stock management. Over 1,000 people have been trained on Integrated Pest Management (IPM) methods and approaches to support reduced consumption of agro-chemicals.

UNESCO supported and promoted capacity-building initiatives that improved the quality of, and access to, education services.

UNICEF successfully advocated for the establishment of a Quality Education Committee (QEC) in the Ministry of Education (MOE) to improve specific standards in the national system of education.

UNESCO continued to support handicraft production as a means to preserve traditional culture and provide family incomes, particularly for low-income families. In 2012, 147 Iranian handicraft products received the UNESCO Award of Excellence in Handicrafts.

UNICEF supported three training events on juvenile justice standards. Approximately 130 judges, prosecutors, lawyers and social workers from Ilam, Lorestan, Khorasan Razavi, Mazandaran, Golestan and North Khorasan provinces participated in these trainings. As a follow up to the UN Study on Violence against Children, two workshops were also held in the Tehran Juvenile Correction and Rehabilitation Centre for 50 caregivers and social workers.

UNFPA supported the National Organization for Registration to conduct a comprehensive evaluation of registration systems (birth, death, and internal migration), to identify under-registration gaps in the national system.

UNDP initiated a Green Banking project to support the development of national credit allocation standards that are more oriented towards sustainable development and “green growth”. In 2013, awareness and enabling conditions were established for banking staff on the concepts, methods and indicators of ‘inclusive growth’ and results-based management.
Spotlight: Enhancing Social Protection Mechanisms to Reduce Child Poverty

UNICEF has advocated for and promoted a mapping of Child Sensitive Social Protection programs in Iran and supported the research group of the University of Social Welfare and Rehabilitation to undertake the study. The study was conducted within the framework of the United Nations’ development cooperation with the Islamic Republic of Iran for the period of 2012-2016 and in line with the country’s Fifth Development Plan’s goals and the Millennium Development Goals.

The study was carried out as suggested by the Iranian Ministry of Cooperatives, Labor and Social Welfare in joint cooperation with UNICEF. It seeks to provide a general perspective of the child-sensitive social protection programs and the activities of the governmental and non-governmental organizations in Iran as the basis for further coordination among the relevant bodies inside the country.

The conceptual framework of the study is based on UNICEF’s proposal for programmes on child-sensitive social protection at four levels of protective (providing social assistance), preventive (insurance and social security), promotional (human capital and economic opportunities) and transformative (comprehensive social justice without discrimination). The major dimensions of child poverty in the study relate to education, health, nutrition, clean water, sewage, housing, information and income/consumption.

The results of the study will inform future planning and related activities of government and non-government organizations in the area of social protection.
HEALTH

Iran is facing a number of major public health problems, which are directly endangering the health and survival of Iranian citizens and children. Some of these are related to the impact of sanctions. As the UN Secretary-General has noted, sanctions imposed on trade and banking – in particular – are depriving Iran from the timely importation of life-saving pharmaceuticals and vaccines.

In 2013, episodes of polio vaccine stock-out were reported which could potentially lead to the re-emergence of poliomyelitis, as it remains endemic in the countries on Iran’s borders. Iran is also going through an epidemiological transition with potential impacts on children and adolescents’ health, growth and development. HIV, malaria and tuberculosis also require continued attention.

As the country develops, the impact of non-communicable diseases (NCDs) – such as heart disease and strokes, diabetes, cancer and chronic lung disease – is also making an impact. The Government has specifically sought the UN’s support to the worrying trend of NCDs.

The UN has been very active in the area of health, with agencies focusing on a wide range of health-related issues, such as the social determinants of health and surveillance, prevention and monitoring of both non-communicable and communicable diseases, including HIV/AIDS, and the development of a more comprehensive approach to the health implications of disaster risk reduction.

The UN has worked towards four main outcomes under the health priority area:

- Strengthen national capacities for the health system to further apply Social Determinants of Health and evidence-based approaches toward reducing disparities in the health status of the population.
- Improve national capacities in providing holistic, integrated and quality primary health care services in urban areas, especially for most-at-risk populations, based on family practice.
- Strengthen capacities of the health system and other relevant institutions for promotion and implementation of policies and programmes to reduce non-communicable and communicable diseases.
- Strengthen national capacities to respond in a holistic manner to the health needs of populations affected by disasters and injuries.
Health: Key Achievements

Under the Health priority area, UN expenditure was $27,882,584, with 5 agencies making a total of 424 contributions.

**WHO**, in coordination with health network counterparts from the University of Medical Sciences, supported the training of 181 health staff in the use of 42 routine indicators, all part of the health equity monitoring system (HEMS).

**UNICEF** procured and donated polio vaccines for one million children in 2013. These were administered through the national routine immunization programme.

**UNFPA** supported the National Institute of Health Research in conducting the Demographic and Health Survey (DHS). DHS results were printed and a workshop was conducted for Ministry of Health and Medical Education managers from different departments and universities on utilization of DHS results.

**WHO** supported a technical review on provider payment mechanisms for Family Medicine in Iran.

**UNFPA** supported 50 midwives from medical universities representing almost all Iranian provinces, to be trained in a 208-hour management course held in Tehran, to provide professional development to midwives in Iran.

**UNFPA** and the Ministry of Health and Medical Education (MOHME) produced a comprehensive report on maternal deaths during 2005-2012, which included analysis and classification of maternal deaths and recommendations for further programming at MOHME.

**UNICEF**, in collaboration with the Ministry of Health and Medical Education’s Nutrition Department, developed a model for managing child malnutrition in Hormuzgan province. A fully equipped Stabilization Center for management of malnutrition was also established at Hormuzgan Paediatrics Hospital.

**UNFPA** supported the review and dissemination of service packages and training material for pre-marriage counselling services, including on Reproductive Health (RH), to improve the quality of RH services available to the public.

**WHO** supported the development of a National Oral Health Surveillance System.
**UNDP**, with support from the Global Fund and in collaboration with the Ministry of Health and Medical Education, supported malaria control and treatment initiatives. This included the monitoring of malaria surveillance reports, and training for 1,522 health providers in administering the Rapid Diagnostic Test for malaria.

**UNDP**, with support from the Global Fund, ensured that 78% of the target population “at-risk” for malaria, was reached through the process of spraying houses with indoor residual spraying by 2013. Over 800 sprayer pumps were purchased and distributed throughout malaria-prone areas in 2012.

**UNICEF** supported the finalization of the Adolescent Friendly Services (AFS) pilot project evaluation, which provided valuable knowledge for advocacy and negotiation on the future of AFS services within the Iranian Health system.

**UNAIDS** supported the completion of a study on HIV Treatment Evaluation, and findings were channeled into the revision of the national guidelines.

**WHO** provided support for the review of a national surveillance system for HIV/AIDS and the development of a system for disaggregated data analysis.

**WHO** and **UNFPA** supported surveys on STIs among vulnerable women and another on the HIV status among pregnant women.

**UNDP**, with support from the Global Fund, supported almost 300,000 high-school students to attend learning events based on “Prevention of HIV/AIDS” – in 9 different provinces.

**WHO** evaluated 3 national programmes on non-communicable disease prevention and control, including the national diabetes prevention and control programme, the hypertension prevention and control programme, and the population-based cancer registry.

**UNAIDS** continued supporting 14 HIV Positive clubs. **UNDP** supported 18 HIV counselling hotlines, which are operational in 10 provinces.

**UNDP** funded the training of prisoners and their family members through the Peer Education Programme (PEP) on HIV/AIDS,
UNAIDS provided support for the production of a roadmap for integration of HIV and reproductive health services, and of HIV/TB co-management protocols.

WHO supported a review of the national malaria programme and the development of an operational plan for the malaria elimination programme strategy.

UNFPA developed materials on Reproductive Health (RH) in emergency situations. More than 24 selected volunteers from different provinces were trained to provide training for peers.

UNICEF developed a public health guidance reference tool for the promotion of physical activity to be used by the health system.

SPOTLIGHT: Empowering Midwives in Iran through Management Training

As one of the few countries to have attained MDG 5a (“reduce maternal mortality by three-quarters”), Iran has made extraordinary progress in improving safe motherhood in recent decades. However, the scope of work of midwives has gradually declined as specialists have taken over an increasing number of traditional midwifery tasks. At the same time, the rate of Caesarian sections is on the rise, making up an average of 45% of all births, and as many as three-quarters of all births in some provinces.

In October 2013, 50 senior midwives from across Iran graduated from a comprehensive academic management training programme supported by UNFPA. Held at the request of the Ministry of Health, the training targeted senior-level midwives at each of Iran’s 50 medical and Medical Education, the training was designed by the School of Health Management and Information Sciences at Iran University of Medical Sciences.

By providing managerial training, UNFPA’s goal is to empower midwives, encourage natural births, and ultimately, improve the health of mothers in Iran. Universities who are in charge of midwifery activities within their province. The feedback from participants to this innovative approach to empowering midwives was overwhelmingly positive.

Farahnas Hormozi manages 100 midwives in Zahedan (Sistan-Baluchistan). Despite her considerable supervisory responsibility, she had never received managerial training before. “Midwives are highly capable of providing a wide range of services, but these skills are not always utilized. Before the training, I was managing based on intuition. Now, I’m able to apply management concepts to the way I supervise my staff, and I feel more self-confident.”
SPOTLIGHT: Helping to Stop the Spread of Tuberculosis in Iranian Prisons

In partnership with the Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM), UNDP is contributing to Iran’s efforts to address tuberculosis (TB), HIV/AIDS and malaria. The partnership involves national institutions, academia and the World Health Organization (WHO). Activities include helping Iran curb TB in seven provinces, which bear 50 per cent of the national TB burden, as well as in 60 large prisons across the country. Crowded environments – such as prison settings – usually constitute hotspots for the spread of TB.

The Iranian Prisons Organization and UNDP annually hold a set of capacity-strengthening workshops for health workers and managers of Iran’s prisons, with the main objective to eliminate the spread of TB.

Globally, thousands of lives are lost to TB each year, mostly among the poor and marginalised. With the rise of new medications and technologies, progress towards global targets for reductions in TB has been impressive. According to WHO, TB mortality has fallen over 40 per cent worldwide since 1990, and the rate is declining.

Risk mitigation measures include early notification and appropriate treatment – to achieve high treatment success rates – and avoiding drug resistance among patients.

Directly Observed Treatment Short Courses (DOTS)
Visitng family members and close contacts with TB cases

The partnership provides for raising awareness among the general public and the target groups, strengthened TB identification infrastructure, better case finding and more effective treatment measures. In prisons, it has contributed to establishing quarantine wards, regular inmate screenings, patient isolation and directly observed treatment.
Dangers and threats, arising from a drier, warmer Iran – and the need to both mitigate and adapt to this future reality – remain one of Iran’s major human security challenges of the future. Iran, like many countries rich in natural resources, has used a development approach, which has overburdened the use of its non-renewable resources and under-invested in its renewable ones.

In this context, there is a pressing need for an improved – and more sustainable – management of Iran’s natural resources.

Much of Iran’s future success will depend on how it plans and manages its natural resources, with a need for focusing more on planning and inter-sector programmes and coordination. The priority issues requiring attention are water security, land degradation (including both desertification and deforestation), the need to shift to renewable energy sources, air and water pollution (including the problem of dust and sand storms) and the dramatic loss of biodiversity.

At the request of the Government, the UN has engaged in sustained work on the issues of environmental integrated management, conservation and the sustainable use of natural resources.

Another central tenet of the UN’s work has been the mainstreaming of environmental economics into national planning and promoting the effective prevention of and response to environmental pollution.

Climate change mitigation and adaptation have also been key work areas.

The UN has worked towards one key outcome under the environmentally sustainable development priority area:

- Enhancement of national capacities at national, sub-national and local levels.
Environmentally Sustainable Development: Key Achievements

Under the Environmentally Sustainable Development priority area, UN expenditure was $8,188,247, with five agencies making a total of 100 contributions.

**UNDP** supported the piloting of a management system in three Wetlands Protected Areas (WPAs) and further implemented this in two replication sites. At least 1,000 local community members participated in the process of management planning as well as implementation of priority action plans, with the model now being increased in four new wetlands protected areas.

**UNESCO** supported the development of nine reports on the status of each of the 10 Biosphere Reserve sites of Iran. These reports provide detailed information on the zoning of the site, its management procedures, and community participation.

**UNDP** has continued to provide support for Phase II of the Asiatic cheetah conservation project (CACP). The CACP aims to remove a number of barriers currently hampering sustainable Protected Area (PA) management, such as financial sustainability and addressing PA financing gaps.

**UNIDO** made progress in Hydro-chloro-fluoro-carbon (HCFC) phase-out activities in the manufacturing sector including through the development of standards for foam manufacturing.

**UNDP** provided support for the identification of new potential Asiatic cheetah habitats, and areas that need protection, through development of a databank and modelling to determine optimal cheetah habitats outside of the current protected areas. This included monitoring cheetah populations (and their prey as a proxy indicator) for the success of cheetah survival.

A qanat – an underground tunnel for water supply

**UNESCO** worked at different levels of policy making related to water resource management, with special emphasis placed on applying indigenous knowledge (including through systems like the ancient qanat) in meeting the challenges of modern times, cooperation on trans-boundary water resources for regional
stability and prosperity, and integrated water resource management at the basin level.

**UNDP** and the Global Environmental Facility’s Small Grants Programme initiated the Art and Conservation initiative, linking handicraft production with environmental conservation work.

**UNESCO** supported over 200 decision makers and experts from Iran and abroad to exchange their experience and knowledge on the importance of documentation of traditional water management technologies, their preservation and a study on how indigenous knowledge can be applied in modern societies.

**UNDP** supported the preparation of the National Wetlands Conservation Strategy and Management Plan bill, which was submitted to cabinet and is under final review for adoption.

**UNDP** published and disseminated awareness raising materials in the Zagros and Wetlands projects pilot areas as well as at the national level. Over 100 rural schools participated in training and learning events on biodiversity in the villages around Lake Parishan and Lake Uromiyeh pilot areas.

**UNIDO** supported the Halon Management Programme, including procurement of equipment for the country’s Halon Bank and development of a recovery and recycling system to process the country’s stockpile of Halon 1211, 1301 and 220.

**UNDP** supported the development of institutional capacities for sound chemicals management under the Montreal Protocol and Stockholm Convention.

**WHO** supported the disposal of obsolete pesticides, and developed a community based approach model for solid waste management through implementation of the *Healthy City Programme*.

**FAO** supported the establishment of 3 watershed/sub-watershed-level resource management and development committees and 5 village resource management and development committees. It has also supported the development of 14 village level plans, establishment of a monitoring and evaluation system, and training for provincial staff and community members.

**FAO** and **WHO**, in collaboration with the Department of Environment, identified inventory preparations and parking pesticides residuals such as the pesticide DDT.

**UNESCO** supported the 2012 and 2013 Sheikh Bahai Technopreneurship Festivals in Isfahan. Over 40 experts from different science parks in Iran participated in a range of training workshops organised as part of both events.
SPOTLIGHT: Helping to Save the Asiatic Cheetah

Though they once roamed much of the Middle East and Asia, there are now only approximately 50 Asiatic cheetahs left, all confined to the northeast regions of Iran. To reverse this decline, UNDP has been working with Iran’s Department of Environment to raise awareness of the cheetah’s plight and encourage citizens to do their part in protecting the endangered species.

To take on the task of protecting the cheetah, Iran and UNDP created the project “Conservation of Asiatic Cheetah” over a decade ago.

As the cheetahs occasionally come into contact with Iran’s farmers, who graze their sheep on habitat shared with this endangered animal, the project is working to ensure that both grazing and environmental protection laws are properly enforced.

In addition, efforts are being made to train local villages on how to tackle encroachment by cheetahs. Farmers who lose livestock will now be compensated. UNDP has paid to outfit Iranian park rangers with night vision goggles to help track the cheetah population, and many of the cheetahs have been tagged with GPS collars. UNDP has also generated public service announcements to increase public support.
NATURAL DISASTER MANAGEMENT

Iran is home to 34 of the world’s 43 known natural disasters.

In 2013, more than 200 earthquakes with a magnitude above four on the Richter scale shook Iran. In the same year, four major earthquakes in Southern Iran claimed the lives of 76 people and left another 997 with injuries. In all cases, the humanitarian impact was minimal due to low population density of the affected areas. However, higher-scale emergency situations will arise if major cities are heavily affected by large-scale earthquakes.

The UNDAF builds on existing strengths in Iran to support integration of disaster risk reduction into national development policies and programmes. It seeks to enhance national and local capacities to ensure systematic monitoring and multi-hazard early warning and supports improved contingency planning, especially in most-at-risk communities.

The UN has worked towards three outcomes under the disaster risk reduction pillar of UNDAF:

- Disaster risk reduction and management standards.
- Monitoring and hazard warning.
- Challenges, lessons learned and funding gaps.
Natural Disaster Management: Key Achievements

Under the Disaster Risk Management priority area, UN expenditure was $155,039, with four agencies making a total of 11 contributions.

**UNOCHA** sponsored a seminar on Integrated Urban Risk Reduction in 2012.

**UNDP** developed a framework for Disaster Risk Reduction / Management in collaboration with key national stakeholders such as the National Disaster Management Organization of Iran, the Vice-presidency for Strategic Planning and Control, the Building and Housing Research Centre, the Tehran Disaster Mitigation and Management Organization, and the Iranian Red Crescent Society to strengthen the integration of relevant disaster issues into development planning.

**UNOCHA** provided training to the National Disaster Management Organization, the Tehran Disaster Mitigation and Management Organization, and NGOs on Multi-Cluster Initial Rapid Assessment and on earthquake simulations as a preparedness activity.

**UNDP** supported the Building and Housing Research Centre to conduct a comprehensive study to develop a national model for urban disaster risk assessment.

**UNOCHA** organized a joint earthquake simulation for the National Disaster Management Organization and its sectorial working groups in Kerman and Tehran.

**UNOCHA** trained the members of neighbourhood municipalities and local government staff and managers on Community-Based Disaster Risk Management in Kerman and Hamadan.

**UNDP** supported the National Disaster Management Organization in the development of a “National Disaster Risk Reduction / Management Strategy and Action Plan.”

*UN Humanitarian Chief Valerie Amos speaks at a press conference in Tehran during a visit to Iran in September 2013.*

**UNOCHA** supported a representative from the Iranian Department of Environment to the Joint OCHA-UNEP meeting held in 2013.
DRUG REDUCTION AND CONTROL

The impact of drug production, trafficking and abuse in Iran is considerable. Of primary concern are opiates – including opium and heroin – and methamphetamines, particularly ‘crystal meth.’

Drugs cause adverse effects on public health, including drug-related morbidity and mortality, and the associated risk of drug dependency and HIV infection. Another cost is the burden on the economy and society caused by lost productivity and the depletion of youth potential.

Under the UNDAF, the UN has supported the development and implementation of effective, coordinated drug prevention programmes, with a focus on families, communities, educational centres and the workplace, prioritizing the most-at-risk population.

Focus has also included enhancing national capacities for effective treatment and rehabilitation programmes for people affected by drugs and promoting evidence-based HIV prevention, treatment, care and control programmes among drug users.

In addition, the UN’s work has strengthened national capacities to combat drug trafficking.

The UN has worked towards four main outcomes under the drug control and prevention priority area:

- To design and implement evidence and community based drug prevention programmes.
- To develop and implement drug awareness campaigns, including in universities and schools.
- Support community-based capacity building (training and support systems development).
- Support the needs of most at-risk populations.
Drug Reduction and Control: Key Achievements

Under the Drug Control and Prevention priority area, UN expenditure was $3,608,182, with seven agencies making a total of 78 contributions.

**UNICEF** supported awareness-raising for Ministry of Health and Medical Education experts on best global practices on Amphetamine-Type Stimulants (ATS) prevention.

**UNODC** provided professional development training for 34 university counsellors and heads of counselling centres (19 men and 15 women) from 12 provinces through a training of trainers workshop on "Drug use prevention for university students/parents."

**UNODC Executive Director, Yury Fedotov inspecting narcotics and ammunition seized by Anti Narcotic Police**

**UNODC** ran a community-based drug use prevention campaign for university students through several activities including peer group trainings, awareness-raising via text-messages, a students’ festival, movie sessions, theatre performances, establishing weblogs, a text-messaging competition, an essay writing competition, and a mobile photography competition.

**UNODC** and the Iranian Drug Control Headquarters conducted a training workshop on “Principles of Awareness-Raising” for 27 NGO participants aimed at training the NGOs on the best methods of communication with mass media and their respective target groups.

**UNODC** reviewed and revised various training and information packages, in order to improve their utility and effectiveness. Participatory review meeting were held with key stakeholders in schools and universities to undertake this work.

**UNODC** provided professional development training for 27 drug therapists, counsellors and psychologists from 15 provinces (including Lorestan, Mazandaran, Kermanshah, Isfahan, Fars, and Hormuzgan) through a four-day training of trainers workshop on amphetamine and other stimulants use treatment.

**UNODC** conducted a study among 420 injecting drug users in Tehran, Gorgan, Isfahan, Mashhad, Shiraz, and Kermanshah to determine the status of infectious diseases within this group.

**UNODC**, in cooperation with the Iran Cultural Heritage, Handicrafts and Tourism Organization and **UNESCO**, supported a workshop on the Registration and Recovery of
Cultural Property, with participation of experts from Iran, Italy and Turkey and 70 national authorities.

UNODC held a seminar for more than 80 students of the Iranian Police Academy on the importance of tackling transnational organized crime (TOC) in the area of cultural property.

**SPOTLIGHT: Working with Iranian Universities to Strengthen "Drug and HIV/AIDS Prevention"

Emad, the father of Maziar, noticed odd behavioural changes in his son as he began his studies at university. Maziar’s behavior, his father thought, was no doubt attributable to the new pressures and strains of university life. When Maziar’s behavior did not change, Emad decided to speak to his son, who confessed that he had begun using illicit drugs. “University was very demanding,” said Maziar. “My friends suggested I should try drugs to help me cope with the pressure. That’s how I started using drugs.”

Going to college or university can be a very exciting period, with many students experiencing a wide range of new experiences, pressures and choices. The risk of experimenting with drugs is attractive to many students. Unfortunately, many young people are unaware of the negative consequences of experimenting with illegal drugs including dependency and associated health risks such as HIV infection.

UNODC, in cooperation with the Counseling Center of Tehran University and the Iranian Health of Thought Institute has developed a training package on drugs and HIV/AIDS prevention for students in their first year at university, aimed at increasing drug prevention capacities in universities across the country.

The main target groups of this training package are new students, their parents and counselors working with them. The package focuses on several themes and concepts in the field of drug use and HIV/AIDS prevention such as life skills training, family skills for parents, living in stressful situations, family approaches to solving problems, risk and protective factors, drug abuse and drug dependency and the role of parents in prevention of drug use.
Lessons Learned and Next Steps

Since the UNDAF was signed in 2011, the United Nations and the government of the Islamic Republic of Iran have collaborated on its implementation. Together, we have cooperated to ensure the UNDAF’s success in its five priority areas namely: poverty reduction, health, environmentally sustainable development, natural disaster management, and drug reduction and control.

This report reflects the diversity and extent of the UNDAF programme and our achievements so far will guide us towards the completion of the current framework.

In looking to achieve better results in the future, the United Nations has examined the lessons we have learned so far in Iran. Each agency will build on its experience capital to improve its outputs and continue to help the host country.

**Monitoring and evaluation** is fundamental to the way the UN does business. There is a need to better clarify certain UNDAF outcome and output statements, including how evidence of the UN’s contributions are being effectively monitored, evaluated and reported on.

There is always scope for the UN system to become better integrated and coordinated without making fundamental institutional changes in internal and cross-agency decision making, procedural and accountability systems.

One challenge faced by all UN agencies is that of funding constraints and resource mobilization. Iran is not a priority country for donors, due to its status as an upper middle-income country and the added complexity of international sanctions. However, in order to accomplish the work which is being requested of them by Government, many UN agencies will be required to raise funds in-country. As such, in the coming years, the UN will have to rely increasingly on support from both traditional and non-traditional donors, as well as the private sector to continue its important work.

For the remainder of the UNDAF cycle, the UN in Iran will be working hard to achieve set targets and build on lessons learned.

As demonstrated in this report, the UN can add value.

**It can make a difference where it matters most** – in improving the lives of people in Iran.