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Item 4 (a) of the provisional agenda*

Country programme document

Islamic Republic of Iran

Summary

The country programme document (CPD) for the Islamic Republic of Iran is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$6,150,000 from regular resources, subject to the availability of funds, and \$13,736,000 in other resources, subject to the availability of specific-purpose contributions, for the period March 2023 to December 2027.

* E/ICEF/2023/1.



Programme rationale¹

1. The Islamic Republic of Iran is a middle-income country with an estimated population of 84 million people; approximately one fourth are under the age of 15 years and one fifth are aged 15–29 years. In recent decades, the country has registered considerable achievement in ensuring access to basic social services, moving steadily towards universal coverage. A well-established primary health-care system provides free and comprehensive services with more than 95 per cent coverage. Almost 100 per cent of births are attended by skilled health personnel. The high coverage of health services has translated into solid improvements in child and maternal health outcomes. Between 1990 and 2019, the under-5 mortality rate declined dramatically, from 60 to 14.9 deaths per 1,000 live births. The Islamic Republic of Iran was one of only nine countries globally to achieve the Millennium Development Goal of halving the maternal mortality ratio between 1990 and 2015. Similarly, between 2012 and 2020, the neonatal mortality rate fell from 11.7 to 8.16 deaths per 1,000 live births.

2. Access to basic education is almost universal, with 98.2 and 93.9 per cent of eligible children enrolled in primary and lower secondary education, respectively. More than 80 per cent of eligible children are enrolled in upper secondary school.

3. Despite the solid overall progress in national coverage, some disparities in accessing quality health and nutrition services persist and are reflected in inequalities in child outcomes across the country. These disparities in access have been exacerbated by the coronavirus disease 2019 (COVID-19) pandemic, especially in less advantaged and remote areas. Further development planning and supportive measures are needed to improve access to public health care, nutrition and water, sanitation, and hygiene (WASH) services and knowledge and information on healthy practices. In 2021, the Iranian economy grew by 3.6 per cent. Although the country can count on significant economic and human resources to support the development of sophisticated, resilient and inclusive social services, the adverse impacts of external factors as identified in the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2023–2027, and the COVID-19 pandemic have disrupted its development trajectory. These factors have had significant impacts in terms of economic contraction, overstretched social services and reduced business activity and revenues, resulting in increased unemployment and a decline in disposable incomes. These factors have increased vulnerabilities and reliance on efficient social protection services. Left unaddressed, they may reverse the poverty reduction gains of recent decades and affect the health, nutrition and well-being of children, especially those in less advantaged areas.

4. The range and intensity of extreme natural and weather-related events, coupled with fast-growing urbanization and inadequate disaster preparedness, are increasing the country's vulnerability to natural hazards, with effects on children. According to the Islamic Republic of Iran Meteorological Organization, the average temperature has increased by 2°C since the 1960s, rainfall has decreased by 20 per cent in the past two decades, and the period between October 2020 and June 2021 was the driest in 53 years, with low rainfall contributing to the rapid depletion of water resources. Climate-related events, water scarcity and natural disasters are expected to become more frequent and intense.

5. The Islamic Republic of Iran was one of the countries most affected by the COVID-19 pandemic in the Middle East and North Africa region. According to the World Health Organization, the country recorded approximately 7.5 million cases of COVID-19 and more than 145,000 deaths by 1 November 2022. In addition to its

¹ In alignment with United Nations Sustainable Development Cooperation Framework, 2023–2027.

negative impact on the national economy, particularly employment and household incomes, the pandemic also adversely affected the overall physical and mental health of children and adolescents.

6. As in all countries, the pandemic has disrupted the Iranian educational system. The move to distance learning during the early stages of the pandemic disrupted access to full educational services for many children, especially those in vulnerable situations. Approximately 3.5 million children initially faced some difficulties in accessing educational services owing to limited availability of digital equipment. Nevertheless, the challenges of remote learning were addressed by national initiatives to provide digital devices, access to the Internet, and subsequent successful efforts to reopen schools, allowing the Government to focus on strengthening the education system to help children catch up, reverse the learning losses, and make the national education system more resilient to future shocks.

7. Despite these challenges, the Government, in line with the 2015 Supreme Leader decree on inclusive education, facilitated the enrolment of Afghan and Iraqi children and other undocumented foreign children in primary and secondary schools in 2021. Approximately 700,000 foreign children/students put a substantial burden on the education system of the country.

8. Despite recent measures to support inclusive learning, several factors affect the participation and effective learning of children with disabilities in education. In 2016, there were 30,000 children with disabilities in the country. Further measures need to be undertaken to support the well-being and societal participation of children with disabilities and to improve relevant development and decision-making processes.

9. The country has recently intensified child protection efforts. A key milestone was the approval of the 2020 Law on Protection of Children and Adolescents, which is grounded in the principle of the best interests of the child. The revisions to the 2013 Islamic Penal Code and the 2015 Code of Criminal Procedure introduced considerable improvements regarding the protection of children in judicial proceedings, the mechanisms for coordination among relevant stakeholders in reaching child-friendly legal interpretation and adoption of approaches in line with the best interests of the child in all settings.

10. Lessons learned from the current programme of cooperation derived from programme reviews conducted by UNICEF and national partners which call for increasing flexibility and adaptability of the programme so that it remains fit for purpose when responding to emergencies. The adoption of a multisectoral and evidence-based approach to programming at the national and provincial levels is considered essential to address the specific needs of children affected by emergencies. Supporting technical dialogue, including through exchange of good practices, will continue to maximize results for children.

Programme priorities

11. The UNICEF country programme of cooperation (2023–2027) is aligned with national development plans, needs and priorities, contributes directly to all five outcome areas of the UNSDCF, 2023–2027, and related intermediate outcomes, and is aligned with the UNICEF Strategic Plan, 2022–2025. UNICEF was fully engaged in the consultation process leading to the UNSDCF, including the development of the Common Country Analysis. The country programme was developed in consultation with a range of stakeholders, including other United Nations agencies, and with key government counterparts.

12. The overall vision of the five-year country programme is that all children and adolescents of the Islamic Republic of Iran are more resilient and benefit equitably from an integrated social protection system, which ensures that their needs for health, nutrition, education, well-being, water and sanitation are met, that their families are empowered and that their participation and inclusion are fully realized, including in emergencies, allowing them to reach their full potential.

13. The development pathway is as follows:

(a) If all children and adolescents have access to health, sanitation and nutrition services;

(b) If all children and adolescents empowered through access to education, learning, practical skills, innovative thinking, and protection against risky behaviours;

(c) If all children and adolescents benefit from social protection;

(d) Then the human development process will be sustained, the full potential of all children and adolescents of the Islamic Republic of Iran realized throughout their childhood, and development towards a resilient economy in both development and emergency situations will be enabled.

14. Key assumptions include a conducive and supportive external and internal environment in which the Government remains committed to the best interests of children and external factors will not hamper relevant national efforts; financing for children and adolescents is available; line ministries are keen to pursue cross-sectoral collaboration; and social protection remains a priority.

15. While the UNICEF country programme is based on national priorities and is largely funded by national resources and will be owned and led by the Government, UNICEF is committed to utilize its comparative advantage and mobilize international support for its implementation.

16. The country programme will employ high-level evidence-based advocacy and technical dialogue to strengthen the enabling environment and to help mitigate the adverse impacts of the external factors as identified in the UNSDCF on child development and well-being. It will build on existing budgetary resources, data and coordination for children's programming, modelling, evaluation, and advocacy for scale-up of promising and innovative initiatives, including for and by children, and technology for development. The collaboration between UNICEF and the Government will support system strengthening through technical assistance and capacity-building; the promotion of cross-sectoral approaches to maximize synergy, efficiency and effectiveness in achieving results for children; and the mainstreaming of emergency preparedness and response capacity and disaster risk reduction. Evidence-based decision-making, sharing of domestic and global best practices and an evaluation of the country programme will contribute to sound decision-making and programme efficiency.

17. The country programme builds on achievements, lessons learned and opportunities for addressing bottlenecks hindering the realization of well-being for all children. It has four components: (a) health and nutrition; (a) education, learning and well-being; (c) social protection; and (d) programme effectiveness. The programme focuses on risk prevention and mitigation, and building the resilience of children and their families. This implies the implementation of prevention strategies and strengthening systems that can anticipate and absorb shocks and crises. Building resilience will increase self-reliance among children and their families.

18. The focus of the country programme remains on development activities for the children of the Islamic Republic of Iran, while also responding to acute needs upon

request. To ensure synergy between the development and humanitarian mandates of UNICEF in the Islamic Republic of Iran, humanitarian activities will support host communities.

Health and nutrition

19. The overall aim of this programme component, which contributes to UNSDCF outcome 2 on public health management, outcome 3 on environmental management and outcome 5 on drug control, is to ensure that children, adolescents and expectant mothers have equitable and inclusive access to health, nutrition, sanitation, and safe drinking-water services. It aims to facilitate and strengthen an equity-focused approach to health and nutrition throughout the life cycle. Priorities will include nutrition for pregnant and lactating women, children under 5 years of age and adolescents. This programme component will be conducted in partnership with the World Health Organization, the Joint United Nations Programme on HIV/AIDS, and the United Nations Population Fund.

20. The COVID-19 pandemic affected the uptake and coverage of routine primary health-care services owing to fear of exposure to the virus and reduced access owing to lockdowns. This programme component will support strengthening the health system, including enhanced services in underserved areas, focusing on essential maternal, newborn and child health services, including immunizations, during the critical period of the first 1,000 days and 24–59 months of age of children, as well as the pre-conception, pregnancy and post-partum periods for women. It will support capacity development for key partners delivering services for prevention, treatment, and reduction of harm from substance abuse, HIV/AIDS, mental health, and psychosocial support focused on children living in vulnerable situations.

21. To increase social engagement, this programme component will promote increased demand for health and nutrition services among children and their households, while increasing knowledge of optimal health and nutrition practices. Based on best practices, UNICEF will provide technical assistance for national capacity-building and systems development.

22. In collaboration with partners, UNICEF will help to improve the capacity of key counterparts and strengthen systems to ensure that children have enhanced knowledge of positive WASH practices, benefit from better water community management and have increased access to resilient WASH services during development and emergency situations.

Education, learning and child well-being

23. This programme component contributes to UNSDCF outcome 1 on socioeconomic resilience. It aims to ensure that all children and adolescents, especially those in vulnerable situations, have inclusive access to education, skills development and well-being services. This will facilitate their future participation in the society and the country's economy and increase their resilience. Under the overall coordination and leadership of the Government, the programme component will adopt an equity-focused and life-cycle approach, promote the best interests of children, and equip adolescents with the skills that are necessary to reach their full potential.

24. The programme component will support the Government in its efforts to integrate disaster risk reduction in school curricula, promote child-centred learning approaches and ensure learning continuity in all contexts.

25. The programme component will support the Government in sensitizing children and adolescents on the response to degradation of the environment and preparedness for natural hazards. It will support the Government's activities to promote public-private

partnerships for adolescent development and to identify possibilities for expansion of their proper engagement in relevant public affairs.

26. Through capacity strengthening of the social services workforce, UNICEF will support relevant national partners and institutions in providing accessible, innovative and evidence-based child well-being services adapted to the specific needs of children and adolescents, thereby strengthening their resilience. The country programme will be implemented in close cooperation with other United Nations agencies contributing to UNSDCF outcome 1, particularly the United Nations Educational, Scientific and Cultural Organization.

Social protection

27. This programme component, which contributes to UNSDCF outcomes 1 and 3, will support national efforts towards strengthening the integrated national social protection system and enhance social expenditures to address child poverty. It aims to address issues and bottlenecks and facilitate and strengthen an efficient equity-focused and evidence-based approach towards the realization of children's well-being.

28. Under the overall supervision of the Government, the programme component will build on national efforts to enhance social protection systems to better respond to different shocks, when required, to support children and families. UNICEF will provide technical capacity to strengthen the responsiveness and resilience of national social protection systems, including life-cycle targeting and increasing shock-responsiveness to natural disasters.

29. UNICEF support will aim to enhance national capacities in using experience, evidence and best practices to identify gaps and inform planning and resource allocation for sustainable reduction in child poverty. With the objective of pursuing sustainable development for all through better investment in human capital, the programme component will support the scaling up of targeted and integrated social protection programmes to intensify inclusive social protection outreach for children and less advantaged families, including in urban areas and less developed areas.

30. The programme component will provide technical assistance for enhanced use of available financial resources across social sectors for evidence-based contributions to human capital development, maximizing coverage and impact for all children in the Islamic Republic of Iran. This includes deployment of additional international and domestic financing options for post-pandemic recovery. Under the overall supervision of the Government, UNICEF will continue to provide technical and financial support to generate the required evidence for informed decision-making, learning and enhanced results and accountability. The programme will be implemented in close cooperation with other United Nations agencies contributing to UNSDCF outcome 1, which is co-led by the United Nations Development Programme and UNICEF.

Programme effectiveness

31. The programme effectiveness component supports all other components to ensure that programme design, coordination and management meet quality standards, are efficient and achieve results for children. Public and private sector partnerships will mobilize financial and technical resources, and effective communication will catalyse support for effective programme implementation. UNICEF will operate under the guiding principle of national ownership and leadership, and will help the Government to mitigate challenges, including those related to external factors as identified in the UNSDCF affecting the well-being of children. The Government has the primary responsibility for its country's development and for coordinating, on the basis of

national strategies and policies, all types of external assistance, including that provided by UNICEF, to effectively integrate such assistance into its development trajectory.

Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources</i>	<i>Total</i>
Health and nutrition	999	4 038	5 037
Education, learning and child well-being	2 002	6 200	8 202
Social protection	983	1 509	2 492
Programme effectiveness	2 166	1 989	4 155
Total	6 150	13 736	19 886

Programme and risk management

32. This country programme document (CPD) outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for the alignment between resources allocated and the contribution of UNICEF to programme results. Accountabilities of UNICEF managers at the country, regional and headquarters levels with respect to country programmes are prescribed in the organization's programme and operations policies and procedures.

33. Based on the Common Country Analysis and the priorities of the UNSDCF (2023–2027), and in line with principles of the reform of the United Nations system, the inter-agency synergies and joint accountability in programming and resource mobilization to support achievement of balanced development will be enhanced.

34. Key risks that might affect programme efficiency include the continuation of external factors identified in the UNSDCF, and their impact on children and the availability of resources including financial resources and essential commodities; the increasing trend of severe climate-driven natural hazards in an already disaster-prone country; the COVID-19 pandemic continuing to undermine social sectors; and challenges in operationalizing cross-sectoral coordination.

35. To mitigate these risks, since the country receives limited international assistance, UNICEF will continue to scan opportunities for resource mobilization, present investment cases to interested donors and advocate for the leveraging of domestic resources. Working within the UNSDCF and under the overall leadership of the Government, UNICEF will mobilize global expertise to support national partners to integrate child-friendly approaches, including those related to climate change mitigation, into their national and sectoral plans while supporting resilience-building programmes for children and adolescents, especially those in vulnerable situations.

36. UNICEF will continue to use an evidence- and results-based management approach in supporting and providing technical support to the country. The country programme will be risk-informed, with internal controls and procedures for mitigating risks related to its implementation. The country management team will continue to assess and manage risks identified in the office risk management plan and will conduct

assurance activities under the harmonized approach to cash transfers also adopted by other United Nations agencies.

Monitoring, learning and evaluation

37. UNICEF will monitor and evaluate its own inputs and achievement of outputs, attributable to the contribution of UNICEF using results and indicators aligned with national and regional flagship areas and global frameworks. This will be the primary contribution of UNICEF to the UNSDCF, 2023–2027 outcomes. Indicators will be closely linked to standard UNICEF outcomes and output indicators and will contribute to global reporting in coordination with the Government. Progress towards planned results will be assessed using indicators in the results framework and assessed through mid-year and annual reviews with key stakeholders. In-house capacity and a results-based management culture will continue to be critical to the programmatic approach of UNICEF. These activities are expected to generate additional insights and recommendations that will help to improve efficiency of the United Nations collaboration with the Government of the Islamic Republic of Iran, thus enhancing development.

38. As part of the UNSDCF monitoring group, UNICEF will participate in the broader United Nations monitoring and evaluation of progress as outlined in the UNSDCF, with a particular focus on targets and indicators related to children, adolescents and expectant mothers.

39. The Ministry of Foreign Affairs will represent the Government for the purposes of this country programme. The Steering Committee, co-chaired by the Ministry of Foreign Affairs and UNICEF and comprising relevant implementing partners and agencies, will meet once a year to review and evaluate the progress and implementation of the CPD. By reviewing and evaluating the implementation of the CPD, the National Steering Committee will ensure the continued alignment of the CPD with the country's development priorities. The Committee will assess the assumptions and the risks of the CPD, including financial and programmatic risks for achieving results. It will also address bottlenecks in programme delivery and make decisions on the way forward.

Annex

Results and resources framework

Islamic Republic of Iran – UNICEF country programme of cooperation, March 2023–December 2027

Thematic priorities: Health, nutrition, education, child well-being, water, sanitation and hygiene, and social protection of children
Sustainable Development Goals (UNICEF Reference): 1, 3, 4, 6, 10
<p>United Nations Sustainable Development Cooperation Framework (UNSDCF) outcomes involving UNICEF:</p> <p>Outcome 1: By 2027, people of Iran enjoy shock responsive socio-economic development and sustainable growth integrated into development policies and programmes.</p> <p>Outcome 2: By 2027, people of Iran benefit from enhanced health care and social services and enjoy healthier lifestyles.</p> <p>Outcome 3: By 2027, environmental conservation and integrated natural resource management are enhanced, and the capacity to address climate change challenges is strengthened.</p> <p>Outcome 4: By 2027, the national and local resilience to disaster impacts is enhanced by improving disaster risk reduction, preparedness, response and recovery.</p> <p>Outcome 5: By 2027, more people of Iran are protected from drug use, and the capacity for effective border management and countering illicit trafficking is enhanced.</p>

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
Outcome 2 (Intermediate outcomes 2.1 and 2.2) Outcome 3 (Intermediate outcomes 3.1 and 3.3) Outcome 5 (Intermediate outcome 5.1)	1. Children, adolescents and expectant mothers in vulnerable situation have equitable and inclusive access to and utilize strengthened, more resilient and quality	Percentage of (a) mothers and (b) newborns receiving postnatal care B: To be determined (TBD) T: TBD Percentage of child immunization ^d	Reports from the Ministry of Health and Medical Education (MoHME)	1.1. The health system, primary health care and health-care providers have increased capacity to deliver integrated, quality, equitable early childhood health and developmental services to children in vulnerable situations.	MoHME Ministry of Energy Drug Control Headquarters Ministry of Sports and Youth Ministry of Interior (MoI)	999	4 038	5 037

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
	health, nutrition, and safe drinking-water services.	B: > 85% T: TBD Percentage of infants under 6 months of age who are exclusively breastfed B: TBD T: TBD		(Contributing to UNSDCF intermediate outcomes 2.1 and 2.2) 1.2. The health system has increased capacity to provide essential nutrition services to reduce all forms of malnutrition in children, adolescents, and pregnant and lactating women, with particular focus on the first 1,000 days. (Contributing to UNSDCF intermediate outcomes 2.1 and 2.2)	and affiliated organizations Vice Presidency for Science and Technology			
		Percentage of children under 5 years of age with vitamin A deficiency (in selected provinces) B: TBD T: TBD Percentage of children under 5 years of age who are overweight (in selected provinces) B: TBD T: TBD Percentage of prevention of mother-to-child transmission coverage B: 34.6% T: TBD	Reports from MoHME	1.3. The health system, primary health care and health-care providers have increased capacity to deliver integrated, quality, equitable maternal and neonatal health, including prevention of mother-to-child transmission services, to targeted neonates and expectant mothers. (Contributing to UNSDCF intermediate outcomes 2.1 and 2.2)				
		Percentage of adolescents and young people who	Reports from Drug Control Headquarters	1.4. Health and social services providers have increased capacity to equitably				

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		have substance use disorder B: 2.1% T: TBD		deliver services for prevention, testing, treatment and harm reduction from substance abuse and HIV/AIDS, for children, adolescents and expectant mothers. (Contributing to UNSDCF intermediate outcomes 2.1, 2.2 and 5.1)				
		Percentage of the children that receives essential mental health services through primary health care ^d B: 70% T: TBD	Reports from MoHME	1.5. Health and social service providers have increased capacity to equitably deliver shock-responsive services to support mental health and psychosocial well-being of children, adolescents and expectant mothers. (Contributing to UNSDCF intermediate outcomes 2.1, 2.2 and 5.1)				
		Number of households living in rural and vulnerable situations who have access to and use safe drinking-water through UNICEF support during the programme cycle B: TBD	Reports from MoI and the Ministry of Energy Surveys	1.6. Children, especially those in vulnerable situations, and their households have increased capacity, knowledge and resilience in adopting adequate water, sanitation and hygiene (WASH) practices.				

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		T: TBD		(Contributing to UNSDCF intermediate outcomes 2.1, 2.2, 3.1 and 3.3)				
Outcome 1 (Intermediate outcomes 1.1–1.5)	2. Children and adolescents, especially those in vulnerable situations, have equitable and inclusive access to education, life skills, practical skills development and child well-being services and contribute to the promotion of best interests of children.	<p>Number of children in vulnerable situations, enrolled in the formal education system</p> <p>B: TBD T: TBD</p> <p>Percentage of out of school children and adolescents (7–18 years)^d</p> <p>B: 14.7%, T: TBD</p> <p>Percentage of children and adolescents with disabilities or special needs enrolled in inclusive primary schools</p> <p>B: TBD T: TBD</p>	Reports from Ministry of Education	<p>2.1 Increased capacity of the education system to provide learning opportunities for children and adolescents, especially those in vulnerable situations, such as out-of-school children and children with disabilities, through delivery of education services and solutions.</p> <p>(Contributing to UNSDCF intermediate outcomes 1.2 and 1.4)</p> <p>2.2. The capacity of the education system and learning environment is strengthened to adopt evidence-based and innovative approaches, integrate disaster risk reduction, and ensure continuity of learning in all contexts.</p> <p>(Contributing to UNSDCF intermediate outcomes 1.2 and 1.4)</p> <p>2.3. Adolescents are enabled for transition from learning to earning through skills development</p>	<p>Ministry of Education and its affiliated Special Education Organization</p> <p>MoI and affiliated organizations</p> <p>Ministry of Sport and Youth</p> <p>Vice Presidency for Science and Technology</p> <p>Department of Environment</p> <p>Iranian Red Crescent Society</p> <p>Ministry of Cooperatives, Labour and Social Welfare (MCLSW) and affiliated partners</p> <p>State Welfare Organization</p> <p>MoHME</p> <p>Ministry of Justice</p>	2 002	6 200	8 202
		Percentage of adolescents targeted by UNICEF support who are engaged	Survey, study					

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		in relevant public affairs B: TBD T: TBD		programming utilizing innovative and participatory approaches that translate policies into practice. (Contributing to UNSDCF intermediate outcomes 1.2, 1.4 and 1.5)				
		Percentage of adolescents and young people that are not in employment, education, or training B: TBD T: TBD	Statistical Centre of Iran					
		Percentage of children referred to and benefitted from improved services on prevention, early detection, and response to child maltreatment B: TBD T: TBD	Reports from the MoHME	2.4. Child well-being systems with emergency preparedness and response mandate have increased capacity for provision of inclusive services in emergencies. (Contributing to UNSDCF intermediate outcomes 1.1 and 1.3)				
		Number of institutions that are applying child-friendly procedures B: 3 T: 7	Reports from relevant implementing partners	2.5. Child well-being systems and the social services workforce have increased capacity for prevention and response to child maltreatment and				

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
				<p>delivery of inclusive services.</p> <p><i>(Contributing to UNSDCF intermediate outcomes 1.1 and 1.3)</i></p> <p>2.6. Capacity of relevant national institutions to implement child-friendly procedures for children in proceedings, in line with national norms and regulations, is increased.</p> <p><i>(Contributing to UNSDCF intermediate outcomes 1.1 and 1.3)</i></p>				
<p>Outcome 1 (Intermediate outcomes 1.1–1.5)</p> <p>Outcome 3 (Intermediate outcomes 3.1 and 3.3)</p>	<p>3. Children and adolescents, especially those in vulnerable situations, benefit from inclusive and equitable access to quality and well-financed social protection systems and environment to fulfil their potential.</p>	<p>Extent to which measurement, analysis or technical advice has informed plans and programmes to reduce child poverty</p> <p>B: TBD T: TBD</p>	<p>Review of sectoral reports</p>	<p>3.1. National capacity for routine disaggregated child-sensitive evidence generation and analysis is increased for informed decision-making towards development pathway for children.</p> <p><i>(Contributing to UNSDCF intermediate outcomes 1.1–1.5)</i></p>	<p>MCLSW and affiliated partners</p> <p>State Welfare Organization</p> <p>MoI and affiliated partners</p> <p>Vice Presidency for Science and Technology</p>	983	1 509	2 492
		<p>Percentage of children and adolescents covered by the</p>	<p>Reports from the Statistical Centre of Iran and the MCLSW</p>	<p>3.2. National capacity and advocacy on child-sensitive budgeting is enhanced for better resources</p>				

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		<p>national social protection system</p> <p>B: TBD T: TBD</p> <p>Percentage of national budget allocated to social safety net for children (education, health and social protection)</p> <p>B: TBD T: TBD</p>	<p>Reports from Plan and Budget Organization</p>	<p>allocation and efficient public spending for essential services and social protection for the most vulnerable children and their households.</p> <p><i>(Contributing to UNSDCF intermediate outcomes 1.1–1.5)</i></p> <p>3.3. Resilient, integrated and life cycle-targeted social protection system and services are strengthened to enable delivery of essential services to children and adolescents in vulnerable situations.</p> <p><i>(Contributing to UNSDCF intermediate outcomes 1.1–1.5)</i></p> <p>3.4. Potential of children is promoted through development of enabling environment and adapted plans and business practices.</p> <p><i>(Contributing to UNSDCF intermediate outcomes 1.1–1.5, 3.1 and 3.3)</i></p>				

UNSDCF outcomes	UNICEF outcomes	Key progress indicators ^{a,b} , baselines (B) and targets (T) ^c	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
UNSDCF outcomes 1–5	4. Programme effectiveness	Percentage of key performance indicators meeting scorecard benchmarks B: TBD% (2022) T: 100%	Insight	Support programme delivery, coordination, effectiveness, quality, etc.	Steering Committee co-chaired by the Ministry of Foreign Affairs	2 166	1 989	4 155
Total resources						6 150	13 736	19 886

^a To the extent possible, all indicators will be disaggregated by sex and age.

^b All outcome indicators are directly or indirectly aligned with UNSDCF outcome indicators.

^c Baseline and targets will be determined/updated once recent baseline data are available.

^d UNSDCF indicator.