## What we do

## » Maternal health

The main causes of maternal mortality are haemorrhage and pre-eclampsia, which are preventable conditions. The caesarean section rate, currently at 50.4%, is a major concern in Islamic Republic of Iran. The main reason for caesarean sections is repeated operation and About 50% of operations are conducted in public hospitals.

A maternal morbidity surveillance system was launched in early 2017 and about 37 000 cases were registered in the system in 2017, of which about 5600 were cases of morbidity and about 400 were cases of maternal deaths.

## What we have achieved

- National guidelines for the management of pre-eclampsia and eclampsia developed.
- National maternal mortality/morbidity surveillance system (syndromic approach and alert system) upgraded.
  - Virtual consultation for patients in need of intensive care provided.
  - Robson classification of caesarean section integrated in maternal health.

## What is next

- Developing a national comprehensive programme package on infertility in line with WHO reproductive and maternal health updated guidelines.
  - Piloting implementation of national eclampsia and pre-eclampsia guidelines.
- Progressing towards universal health coverage and access to equitable and quality intensive care for pregnant women hospitalized in underprivileged provinces/districts through telemedicine initiatives (collaborative work with technical support from the Robert Koch Institute of Germany).
- Operationalizing an upgraded and integrated maternal mortality/morbidity surveillance system, initially through pilot implementation.

## What we do

# » Child and Neonatal Health

Islamic Republic of Iran has made great progress in reducing newborn and child mortality over the past few decades. The country has already reached the SDG targets for neonatal and under-5 mortality. There are well established birth registry and mortality surveillance systems for neonates and children aged 1–59 months, and the hospitalization profile for neonates is fully functional countrywide. The main concern is discrimination between morbidity and mortality rates in different provinces. The national child health programme needs additional support to

scale up child development and care.

Activities with the collaboration of national counterparts are being conducted.

- Neonatal mortality surveillance, birth registry and hospitalization surveillance has been reviewed and upgraded.
- The mortality surveillance system for infants and children (1–59 months) has been reviewed and upgraded.
- Virtual training in the neonatal health programme during the COVID-19 pandemic has been documented.

## What we have achieved

- Improved capacities and systems to detect public health concerns for child and neonatal health by reviewing and updating the Surveillance system of neonatal mortality, birth registry and hospitalization in 2019.
- Review and upgrade of the national under-5 (1–59 months) mortality surveillance system in 2021.

## What is next

- Development of self-care package to improve awareness to respond to COVID-19 for children, adolescents and school self-care (and media content).

## What we do

» Health of older people

According to national statistics the number of older persons is growing faster in Islamic Republic of Iran than the number of people in all younger age groups, and faster than the global average. According to Help Age International, the percentage of the older population in 2030 and 2050 is expected to reach 14.8% and 29.4%, respectively. The national strategic plan for elderly health was developed and endorsed by the Supreme Council for Health Food Security in 2020.

Ongoing activities include:

- development of a "Family caregiver's manual: community-based care, practical guide for older adults (2020–2021)";
  - development of a comprehensive framework for elderly health management (2021);

- development of a comprehensive framework for the management of the health of the elderly (2021);
- development of the guide "Improving access to inclusive health care in nursing homes and enhancing the quality of life and dignity of most vulnerable population in Iran throughout the COVID-19 pandemic", a co-funded project by the European Civil Protection and Humanitarian Operations
- development of a family manual for informal caregivers of the elderly (such as family members).

## What we have achieved

- Review of health system building blocks of the elderly completed in 2019.
- Development of a model for establishing Universities of the Third Age (U3A) to address the social determinants of health and quality of life among older persons.
- Development of a model for establishing universities of the third age (U3A) in Islamic Republic of Iran to promote quality of life among older persons.
- Development of a family caregiver's manual: a community- based care practical guide for older adults.
- Development of an evidence-based management framework and protocol for elderly health in Islamic Republic of Iran. The first phase was conducted in 2021 and the project will be end by mid-2023.

## What is next

- Evidence-based management framework and protocol for elderly health in Islamic Republic of Iran will be complete.
  - Strengthening Well-being programmes for older people strengthened.
- Development of digital health technologies for older people to reduce preventable deaths and address health and development needs.
- An adapted executive model and implementation of the "Universities of the Third Age" to develop communities that foster the abilities of older people and maintain environments that are age friendly will be developed.

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