Previous and Future Position of Iran's Health

between the World's Countries

Health and Fertility Rights Network
Report of Health and Fertility Rights Network

To Human Rights Council of UN

September-2009, Global Cyclic Study of Iran-2010

Code of Health and Fertility Rights Net

1- General assembly, at least 18 specialized democratic organizations

2- Strategic Council, including 5-7 democratic organizations
   - The UN Population Program, 1 person
   - Ministry of Health, Treatment and medical Education, 1 person

3- Specialized subcommittees:
   - Investigation and evaluation
   - Communications
   - Attraction of resources
   - Projects and Plans

Investigation and study center of women, Pars No-avaran Institution, Creating healthy behaviors and conflicting with behavioral damages Association, Family Regulation Association, Conflicting with Victims of Violence Association, Supporting of children- job, and street, healthy family and so

Marks and names of associations, centers and institutions that are memberships of Strategic network
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Executive Summary and Key Words:

1- The present report is respectfully prepared by Communication Unit of Iran's Health and Fertility Rights Network in health section, and after verification of Strategic Council, it will discuss about previous and future position of Iran's health between the world's countries.

2- In the Third Millennium, health is defined farther up four dimensions and propounded with wider dimensions (16-18) as multilateral health, and together with multilateral security (14 dimensions), multilateral development, multilateral satisfaction in industrial advanced countries and introduced by behavioral and vital indexes.

According to Iran’s Constitutional Law and 20 years’ documents and forth monotheism and Islamic ultra systemic thoughts and rights of Islamic nation (28th Principles), some parts of these dimensions were accepted, and some should be studied and evaluated.

3- In the report, responsibilities of health section, promotions of it and comparison of Iran’s position and Islamic and region’s participation were evaluated. And challenges and opportunities will be cleared.

4- And in addition to description of health condition and its promotion, fertility health and related rights are provided as the first part of multilateral health, and suggests planning and evaluating other dimensions of health and its rights.

Multilateral health: It is different dimensions of health, which is stated in conclusion.

Multilateral security: Including security of housing, food, clothing, education, health, doing works in leisure time, and occupational, environmental, legal, juridical, social, cultural, economical securities and so.

Multilateral and stable development will be in all dimensions of development and stability.
Multilateral satisfaction towards satisfaction of God, individuals and society is from increasing of skills and promotion of health and optimization of life quality in all of its orders.

Introduction of Organization:

5- This network consists of 18 national and local non-governmental organizations in the field of health and fertility rights in Iran, which is acting by its governmental personnel of health section and UN Population Fund in Iran.

6- Common project of Health and Fertility Rights is a four-year program between 2005-2009, which is propounded as first step in description of a dimension from among various dimensions of multilateral health by democratic organizations and UN Population Fund, resident of Iran.

7- The network actives according to the objectives and planned activities in the framework of four main parts of fertility health, puberty health, sexual and gender rights, and by persuasion and creation of culture, promotes training, making powerful, creation of capabilities and making vernacular.

8- The network, with the aim of promotion of multilateral health, study health condition in Iran, and in comparison with other Moslem and region’s countries obtains a positive evaluation; and assesses that cyclic study is necessary in addition to report of promotion of health situation in Iran and hope to more growths and sublimities.

Organizations that are members of the network are included in Appendix.

Methodology:

9- Health and Fertility Rights Network involved in Iran and the world’s health issues by observational method in the fields of processing and resultant and evaluate promotions and
obstacles; and compare related indexes and measurements inside of the country, between provinces, and outside of the country, between the world’s countries, and study the indexes. This study is not only in the field of health fertility, but also is considered as the first step in other objectives of practical development.

10- When there was a need to new indexation in statistics and promotion of each dimensions of health, and/or changing of indexes from covering to vital or behavioural was necessary, network will practice in these fields and prepare bases for future studies in the framework of each dimensions of multilateral health.

**Analysis of Health Condition in Iran:**

11- Health system’s functions were appropriate in several cases; for example, in examination of indexes related to objectives of millennium development, we could observe appropriate growth in most of developmental objectives.

12- Health-treatment systems improve availability to health-treatment services and establish the country in a good position in the region.

13- In the field of economical health, in spite of mean gross national product (g.n.p) shares in the country, for peoples under poverty line in frontier villages is about 1 dollar, %2.5, and for burden economical social groups and unemployed and damaged ones like hard addicted ones in streets. This population with less than two dollars income in 2004 was about %13, and now it is %11.5.

It is hoped that organizing problems of unemployment and treatment of hard addicted ones in the streets in sheltered and quitting addiction centres, employment and entrepreneur
centres for freed, were solved and burden population of the country reaches to its minimum degree.

14- In the field of social health:

Improvement of mothers’ death in the country and changing of thirty seven thousand percent rate to thirty four thousand percent; it was as a cause of trained obstetricians’ participation and specialized gynaecologists in villages and cities and optimization of other indexes of fertility health and regeneration and culture making in the society, which provides hopeful answers.

15- Decrease of new diseases process (by programs of decreasing damages and stopping focused epidemic related to it) and decrease of recur diseases by implementing preventing programs from increasing process of drug resistance and increase of cases X.D.R and M.D.R and control of risky venereal diseases by increasing of knowledge and learning secure sexual relationships will prevent from intensive epidemics towards generalized epidemics.

16- Decrease of children’s death under 5 and 1, by implementing wide vaccination programs together with study of their growth, nourishment from mothers’ breasts and conflicting with diarrhoea and acute pulmonary diseases, and also applying other controlling instruments will cause decrease of rate of the children’s death, under one year old, from 30 in every one thousand alive birth in 2004 to %27 alive birth in 2008, and the country reaches to a high position in the world’s ranking.

17- Continuous optimization of life’s expectation after birth, following of optimization of decrease of children under one year old death, and increase of life’s expectation from 71.1 years in 2005 to 72 years in 2006 and 73 years in 2008, demonstrate appropriate activities.
In the region, life’s expectation in Kuwait is 78 years, in the first place, and Iran is in fifth place; and in Asia Japan with 82 years is first and Iran is in the ninth place.

In the region, Iran has better conditions in comparison with Afghanistan, Iraq, Yamane, Pakistan, Tajikistan, Turkmenistan, Kazakhstan, Uzbekistan, Kyrgyzstan, Egypt and Turkey in 2005. And in 2006, in addition to the aforesaid ones, the country obtains better situations than Armenia.

But, average lifetime and life’s expectation in elders, because of more social damages around the country and high level of road accidents and urban traffic, vascular (heart and brain), cancers, addiction and mental and social diseases, and internal disputes and imposed wars, is not as successful as life expectation after birth.

18- About control of population and family regulation: Several years after Islamic Revolution and acceptance of births control policy, the country’s population reaches to better situations as a result of growth, structure and changing of population.

In ratio of the world’s average growth, about %2.3, %1.5 increase of population in Iran is an appropriate consequence. Vital and behaviour indexes of the growth are comparable as two indexes of the rate of net regeneration, which is 1.5, and has a little distance with ideal 1.

Fortunately, there are 1.8 regeneration average in 12 provinces of the country, which is considerable; and in the region, according to the current circumstances of population growth and rate of gross regeneration, the country is first. And also family regulation about % 74 in 2005 and % 75 in 2007, keeps this position for the country in the region.

According to universal categorization, it has 28th rank by regeneration rate of %1.5, complete fertility of %2.7, and general fertility of 78.
Movement of population from villages towards cities, and from towns to large cities has partial controlled growth.

Thus, growth of logistics of the territories is heterogeneous with immigrations.

The country’s population structure changed in the base of pyramid from juvenile population to youths. This change results in partial unemployment because entrepreneur is not still responsive to structural growth.

Educational level changed from secondary school to diploma and is increasing; peoples with higher education, with more 3 million collegians annually, will improve level of education. Moreover, technical and Vocational high schools with 2 million growths assist in decreasing of unemployment, in addition to optimization of level of education. But it has not facilities of higher educations.

Family regulation and quality and quantity improvements of pregnancy preventive methods result in reaching to the first position in the region with %74 in 2005 and it was repeated in 2006 with %78 overlay.

19- In treatment indexes:

Selection of epidemiologic treatments in tuberculosis, malaria and recur diseases, eradication of poliomyelitis and increase of number of doctors, reaching 1.3 doctors for everyone, obtained fifteenth position in the region in 2005 and 2006. This process is increasing rapidly and Iran will obtain ninth position in 2010.

By new approvals of the government, number of hospital beds will reach to an adequate amount in 2010 and fifth position in the region.
20- Study of Laws:

A- I.R. of Iran’s Constitutional Law:

- Peoples’ Rights: including 23 principles, from principle 19 to 24 of Constitutional Law
- Paragraphs 3, 29, 43 and so of Constitutional Law about Human Basic Needs, Human Security Co-efficient, Human Development Index, Human and Responsibilities Right, Human Responsibilities
  Principle 44: Submission of non-strategic economical principles to peoples

B- 20 years perspective principle (2005-2020)

About document of notified paragraph 19 to the government about multilateral health and more than 8 dimensions

C- Fourth and Fifth and so Development Programs, Budget Act

D- Law of establishment of Ministry of Health, Treatment and Medical Education

E- Law of establishment of Ministry of Social Security and Welfare

F- Iranian Legal and Civil Laws

G- Iranian Drug and Nutrition Laws

H- Iranian Medical Association, Drug System, Nursing System, Obstetrics System

- Challenges, disadvantages and threats:
- Advantages and hopes:

A- Challenges:

21- If health was calculated as its older and available definitions in three or four dimensions, improvement and promotion in booming would not achieved.
22- If health budgets and charges were only in services, we would not have adequate growth. Today, developed countries count health and education in investment section (social investment) and value of investment is more than production and services in these countries.

23- Foreign boycott pressures in vital innovations are very serious (threats).

24- In-observance of articles of Constitutional Law in various dimensions of health and its rights

25- Average application of human sections in two Constitutional Laws.

26- Advantages and hopes:

- Existence of Laws

- Believes in (religious) democratic between first rate authorities of the regime

- Applying of multilateral health in perspective documents and applicable order of it to governmental system

- Growth of some of country’s health indexes during medium-term activity periods

Recommendations and Approaches:

27- Selection of special reporter in the field of health and fertility rights because of importance of health annually special edition

28- Providing suggestions to Human Rights Council and universal cyclic revisional mechanism for removal and/or revision of drug, food and drugs’ raw materials boycotts, and health preventive affairs, which is substitution of philanthropism and policies.

29- Effort in social investment of health affairs inside and outside of the country
30- Development of health and its dimensions in local, provincial, urban, rural, town, national and international-regional levels and one financial year of the indexes in national and local levels

31- Change of overlay indexes to vital and behavioural indexes

32- Assist in 18 dimension study of health in the countries, which considered these dimensions and have better and more scientific statistical information.

Conclusion:

33- Multilateral health, multilateral security, multilateral development, multilateral satisfaction, multilateral rights and responsibilities will be meaningful with each other.

34- Multilateral health dimensions are as follows:

1- Fertility health 2- Biologic health 3- Biochemical health 4- Epidemiologic health 5- Psychological health 6- Ecological health 7- Social health 8- Cultural health 9- Economical health 10- Spiritual health 11- Ideological health 12- Legal health 13- Legal and juridical health 14- Developmental health 15- Security health 16- Satisfaction health 17- Health of work places, life and entertainment centres 18- Professional health

And in application of most of health forms, conflicting and controlling of damages and its related disorders, it is necessary.

35- Multilateral security dimensions are as follows:

Housing security, clothing security, food security, health and insurance security, training security, security of centres of doing works in leisure times, occupational security, legal
security, legal and juridical security, environmental security, developmental security, private
security (house) and so; according to these securities together with other key and necessary
factors, it seems that democratic organizations want to fill all of gaps in the dimensions with
developmental dimension and multilateral satisfaction.
Resources:

1- In the field of information and statistics:

Iran’s Statistics centre, Ministry of Health, Treatment and Medical Education’s Statistical Unit, Network’s Statistical Unit

2- In the field of Laws:

Constitutional Law, Other Published Laws, presented by bookstores to the interested ones

3- In the field of definitions and new issues of health, security, rights

- Universal valid sites of campuses
- UN information unit
- New books and articles in book fairs and libraries

4- Data usually were used after application of at least seven principles from No-Hill’s twelfth principles.

5- Epidemiologic studies of health and disease and application of at least three determinations and three variables from among seven key determinations and twelve key variables in the network will be very applicable.