

Statement of I.R. Iran on  
“Well-being and health promotion”

We thank the Secretariat to provide this opportunity for member states to reflect their perspectives on EB154/23 as well as A77/4, about innovations and challenges in relation to resolution WHA75.19 (2022).

I.R. Iran have followed people-centered health programs since three decades ago. In the Covid-19 pandemic, the country experienced valuable measures of public participation e.g. the role of health volunteers in ensuring the health and resilience of the society. Through popularizing health governance, Ministry of Health have actively been strengthening health promotion programs, and by taking a variety of measures such as:

- Establishment of health-supporting environments
- Forming organizational and neighborhood health promotion councils by using the capacity of city and rural councils

In line with third paragraph of the document, Iran has trained millions of volunteers and health ambassadors throughout the country for different population groups, especially in those areas that host migrant and refugees. The aim is to identify the health needs of communities, and to provide training programs in order to improve services delivered by health and care workforce in the areas of screening, diagnosis, treatment, and health promotion interventions considering the extracted needs, culture and the context of various regions.

Regarding the fifth paragraph of the document about challenges, since 3 years ago, we have been holding and expanding risk communication and community engagement programs to amplify the participation of public representatives and health volunteers in the decision-making and implementation process of health programs as an effort for community empowerment.

Another action to build organizational and public trust in health programs has been developing the national program for increasing health literacy. The objective is engaging communities and creation of organizations promoting health as well as cultural and social centers advocating health at the neighborhood level.

## Moving to "Well-being and health promotion"

The country has invested in implementing family health program and a PHC-oriented referral system, which both are other driving factors for improving health literacy and empowering families in addition to aforementioned measures. We have started an initiative with the aid of artificial intelligence, to develop various interactive training packages for health volunteers and health workers. We need international support in this area, especially from WHO and would like to express our interest in exchanging experiences with other countries in this regard.

**Mr. Chairman:** Considering the outstanding impacts of the community health promotion and people's health literacy on sustainable development, WHO member states need stronger and more targeted political supports, including the mobilization of internal and external resources with a multi-sectoral and people-centered approach for health promotion. We call on WHO to continue facilitating the exchange of experiences, strengthening regional and global cooperation in these areas to build resilient societies.

Mental and Social Health Centers (Seraj) search for the social and psychological factors affecting the health of the neighborhood and target individual-oriented and community-oriented interventions aimed at those problems. Meetings are held with presence of the trusted retirees in order to find social and psychological issues of the neighborhood to listen to the presence of the people of the neighborhood and to extract problems. The entire neighborhood population is the target group.

Ministry of Health and the Ministry of Interior have jointly established these centers with engagement of all relevant departments under these two ministries. The governor and the director of district health center hold joint meetings in these centers to find out social harms. Psychiatrists, psychologists and social workers are present in those centers (Seraj), one day in the governorate and the other day in health center, while psychologists provide the package of mental health, social and addiction services. Those psychologists prevent the spread and chronicity of mental diseases in patients with basic interventions.

Over the past year, in one of these centers in a district of Kerman province, the number of mental patients needing hospitalization has reduced to almost zero and the number of divorces has decreased. We invite WHO to visit those centers. The Siraj project started 8 years ago in some pilot provinces such as Kerman and East Azerbaijan. Since last year, the initiative has rolled out nationally and now 72 centers are functional in the country. A unit is in those centers under the name of people's

participation, which listens to people's problems. Siraj centers were launched with the support of the Minister of Health and were presented to the Minister of Interior and the President. They also supported this program.

**Thank you**

**Office of Public Education and Health Promotion**  
**Undersecretary for Public Health**  
**Ministry of Health & Medical Education**