

# ANNUAL REPORT 2014

DELIVERING RESULTS

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# Message from the Representative



Jose Ferraris, UNFPA Representative in Indonesia.

Two words define our work in Indonesia in 2014—delivering results. As we approach the end of our Eighth Country Programme (2011-2015), the foundational activities conducted in the early years of our programme translated to concrete action in 2014. In close collaboration with our government partners, real progress was made to improve the lives of the Indonesian people, particularly women and young people.

This report showcases our results in enhancing policy dialogue, advocacy, knowledge creation and building capacity. We worked to deliver more equitable development outcomes by empowering young people, promoting gender equality and improving access to sexual and reproductive health and reproductive rights.

Supporting the Government of Indonesia to address population dynamics and optimize the demographic dividend, and to improve the use of population data continued to be a strong theme for UNFPA in 2014. Working through an upstream approach, UNFPA provided technical and strategic support to the Government of Indonesia to affect real change. Supporting the Government's priorities through the development of Indonesia's next medium-term development plan (RPJMN 2015-2019) was a priority area for UNFPA in 2014. This is vital to ensure that a rights-based approach to population and development is integrated at the highest level.

UNFPA's work in empowering young people was cause for celebration in 2014. Investment in youth was the theme of UNFPA's World Population Day, bringing global attention to the urgent need to secure the rights and enhance the opportunities of the largest ever generation of young people. The key to this is giving young people the power to make decisions regarding their sexual and reproductive health. Assisting young people reach their full potential by supporting their education, health, employment and well-being will enable Indonesia to reap the benefits of the demographic dividend and a more prosperous future.

In 2014, UNFPA made great gains in advancing the unfinished agenda of the 1994 International Conference of Population and Development (ICPD), globally and in Indonesia. The ICPD principles of gender equality and universal access to reproductive health and reproductive rights are reflected in the Millennium Development Goals (MDGs) and remain relevant today.

As we look toward the target date for the MDGs in 2015, the next phase of sustainable development is at the forefront of the global development agenda. The MDGs have seen impressive advancement in some areas of development, and disappointments in others. Development has been uneven and challenges with maternal mortality, HIV, access to adolescent sexual and reproductive health and family planning remain,

especially for the poor. UNFPA is committed to ensure that the unfinished ICPD and MDG challenges are firmly at the centre of the Post-2015 Development Agenda. This is essential to attain a sustainable development for all.

Forming new partnerships and solidifying existing ones featured strongly for UNFPA in 2014. Our goals are achieved through diverse affiliations with government partners, NGOs, civil society, the private sector, faith-based organizations, the academic community and other members of our United Nations family. We are grateful to all of our partners, in particular our implementing partners. Without them, UNFPA's work and this report would not be possible.

I close by sharing my enthusiasm about the opportunities that our Ninth Country Programme will bring. In close collaboration with our partners, we will work together towards inclusive and sustainable development outcomes for Indonesia, where women and young people are not left behind, but are empowered to propel the nation forward.

Jose Ferraris,  
UNFPA Representative in Indonesia

more than  
**17,000**  
islands

**252**  
million  
population



## A snapshot of Indonesia

Indonesia is an archipelago of more than 17,000 islands that supports a rich tapestry of cultures and religious beliefs. With the current population estimated at 252 million, it is the fourth most populous country in the world and has the world's largest Muslim population. Since the political turmoil of the late 1990's, Indonesia has flourished to become a vibrant democracy.

Like many countries in the region, Indonesia is experiencing changes in the size and characteristics of its population. Its population is growing, ageing, migrating and becoming more urbanized. A demographic transition is occurring, where a

greater proportion of the population is of working age. With strong investment to improve human capital, this will result in an economic boost through a demographic dividend.

Impressive gains have been made in many areas of Indonesia's development. Life expectancy has increased, and poverty is gradually declining. The Government's substantial investment in the 2010 Population Census indicates its commitment to collect and use population data to make the most of demographic opportunities. Contraceptive use has increased and the number of children per family has decreased from around 5.6 in the late 1960s to around 2.6 in 2007. Remarkable

economic progress has seen Indonesia become the region's biggest economy and a member of the G20 group of the richest nations.

Yet, critical gaps and vulnerabilities remain. Progress has been uneven and the benefits of development have not always flowed equitably to the poor, rural communities, women and young people. Particular challenges persist in the areas of maternal mortality, the prevention of HIV/AIDS, and adolescent sexual and reproductive health (ASRH). Gains in family planning have stagnated in recent years and gender-based violence remains a pervasive problem. Adding to the effect of social, political and

economic factors, Indonesia is prone to natural disasters and is highly vulnerable to the impact of climate change.

There is a lot of unfinished business, but with strong Government and community commitment, Indonesia can overcome these challenges to ensure a future where no one is left behind.



# UNFPA: about us

Delivering a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.



UNFPA, the United Nations Population Fund, works to deliver **a world where every pregnancy is wanted, every childbirth is safe and every young person's potential is fulfilled.**

The empowerment of women and young people is at the heart of UNFPA's work. Women and girls are able to contribute more to their communities when they can live free from discrimination and violence and are given the power to plan their families. Young people who have a healthy transition to adulthood, who are given opportunities to fulfill their aspirations and to participate in the decisions that affect them, will make stronger citizens and future leaders. Individuals must be enabled to fully attain their rights, including their rights to sexual and reproductive health (regardless of their age), both in stable times and during a disaster.

Ensuring sustainable development is even more challenging in the face of existing and emerging concerns about population growth, changing age structures, rapid urbanization and migration. UNFPA supports governments with strategic and technical assistance to collect and use demographic data. The fund assists countries in harnessing their evolving demographics as an opportunity, rather than a burden.

The vision of a world that is free from poverty and inequity, where the reproductive rights of women and young people are secure, was outlined at the International Conference of Population and Development (ICPD) in Cairo in 1994. These principles were re-affirmed through the Millennium Development Goals (MDGs) and remain relevant today. UNFPA strives to ensure that governments address the unfinished ICPD agenda, ensuring the rights of the world's most vulnerable and marginalized people.





# An overview of UNFPA in 2014: delivering results

UNFPA has worked to bolster sustainable development in Indonesia since 1972, supporting the Government of Indonesia to ensure that population concerns are addressed through rights-based policies that enhance each individual’s choices and opportunities.

Policy dialogue, high-level advocacy, building capacity and strengthening partnerships featured strongly in UNFPA’s efforts during 2014. Recent collaboration with government partners continues to build on foundations that were laid during the early years of the Eighth Country Programme 2011-2015. In 2014, outcomes were attained that solidified UNFPA’s role as a leader on population and development. Several substantive research publications were released and UNFPA continued to ensure that research was used for the development of evidence-based policies that will lead to real action.

Working closely with the Government of Indonesia, UNFPA continued to strive to reduce inequity and secure the rights of the most marginalized people in society, in particular women and children.



Under the framework of the Eighth Country Programme 2011-2015, UNFPA delivered results in 2014 in each of the following areas:

1. **Linking population dynamics, policymaking and development plans;**
2. **Advocating for International Conference of Population and Development (ICPD) principles and South-South Cooperation;**
3. **Widening universal access to reproductive health;**
4. **Enhancing reproductive health during a disaster;**
5. **Increasing access to voluntary family planning;**
6. **Combatting the sexual transmission of HIV;**
7. **Advocating for gender equality;**
8. **Empowering young people;**
9. **Harnessing the power of data.**

Enhancing the integral links between these areas enables coherence in delivery of the Eighth Country Programme. This report showcases UNFPA’s ability to deliver in the above output areas.

As Indonesia has emerged as a middle-income country, the nature of UNFPA’s work has shifted. In accordance with the Government’s changing needs, UNFPA has sharpened its focus towards providing cutting-edge technical and strategic support. UNFPA is aligned with national priorities that are enshrined in the National Medium-Term Development Plan (RPJMN 2010-2014). The principles of aid effectiveness and national ownership, as described in the Paris Declaration on Aid Effectiveness, are central to UNFPA’s engagement in Indonesia.

Delivering through diverse partnerships has continued to be a central approach

for UNFPA during 2014. As well as close collaborations with government partners, UNFPA has forged partnerships with academic institutions, NGOs and civil society. Working under the United Nations Partnership for Development Framework (UNPDF) 2011-2015 ensures that UNFPA operates in synergy with other UN agencies, improving the impact of the UN in Indonesia.

Globally, the launch of the *Beyond 2014* report was a milestone in UNFPA’s efforts to advocate ICPD principles. The report sets out overwhelming evidence on the importance of ICPD in sustainable development. Accordingly, the new UNFPA Strategic Plan 2014-2017 is focused on addressing the unfinished agenda of Cairo. The Plan provides a global framework for UNFPA’s work, enhancing UNFPA’s impact on the lives of women, adolescents and youth around the world.

With the target date for the MDGs fast approaching in 2015, UNFPA works to ensure that ICPD principles supporting sexual and reproductive health and reproductive rights, gender equality, adolescents and youth needs and rights, and non-discrimination are strongly featured in the new development framework, which will be known as the “Sustainable Development Goals”. UNFPA advocates for empowering people to ensure the future we want, for all.

## Looking toward our Ninth Country Programme

During 2014, there has been substantial work to develop the Ninth Country Programme (CP9). CP9 will define a dynamic framework for UNFPA’s partnership with the Government of Indonesia from 2016 until 2020. A comprehensive evaluation of the Eighth Country Programme and a Population Situation Analysis has laid the groundwork for the next phase of UNFPA’s work in Indonesia. The CP9 will define a dynamic framework for UNFPA’s partnership with the Government of Indonesia from 2016 until 2020, placing emphasis on policy, advocacy, and knowledge management. UNFPA’s engagement will be focused in four thematic areas of integrated sexual and reproductive health (including maternal health, HIV and family planning), youth and adolescents, gender equality and population dynamics. Supporting the Government to capitalize on the demographic dividend is vital for Indonesia’s sustainable development and will continue to be a core component of UNFPA’s work during the next country programme.

UNFPA has worked closely with the Government of Indonesia and other stakeholders to ensure the CP9 aligns with Indonesia’s shifting needs while progressing rights-based policies on population and development. Through the programme development process, UNFPA has also worked to increase capacity for policy work within the Country Office through intensive training. Building on the groundwork of over 40 years of work in Indonesia, CP9 will continue to support sustainable development for Indonesia, where the future is one of equity between men and women, young and old.

# Responding to population dynamics: shaping Indonesia's future



Supporting population and development is a core aim for UNFPA given that Indonesia's population is projected to reach 305 million by 2035. Most of this growth will take place in urban areas, and the population is also becoming older and more mobile than ever before. These emerging trends have important implications for Indonesia's economic and social development, and environmental sustainability.

If the right policies are in place, population dynamics and trends can provide opportunities for economic growth and social development through a demographic dividend. On the other hand, these factors can also lead to the unsustainable

consumption of resources, greater vulnerability to climate change and other challenges that may impede efforts to provide essential health services and alleviate poverty.

Taking advantage of those opportunities and managing the challenges will require progressive policies that enhance human capital and people's welfare, promote sustainable cities, support Indonesia's ageing population and address Indonesia's vulnerability to climate change. The key to this is ensuring that vulnerable people in society, particularly women and young people, are not excluded from the benefits of development, but instead are empowered to be drivers of prosperity.

## *Harnessing the demographic dividend*

The demographic dividend occurs when there is an increased proportion of the population of working age. This demographic transition can give rise to an economic boost—a “demographic dividend”—if there is sufficient investment to improve and diversify human capital through policies that support quality health, education and employment. Assisting the Government of Indonesia to optimize the demographic dividend is a key priority for UNFPA in Indonesia. With the right policies, taking advantage of the demographic dividend will result in a stronger economy and improvements in welfare and quality of life for the people of Indonesia.

### **RPJMN 2015-2019: contributing to national development planning**

The draft of Indonesia's next National Medium-Term Development Plan, the RPJMN 2015-2019, was submitted to the President in 2014. As the RPJMN functions as an umbrella for other national plans, ensuring the strong integration of population dynamics is essential to advance policy development in this area. UNFPA provided technical assistance to Bappenas to develop the population and development chapter of the RPJMN 2015-2019 in 2014. In addition, UNFPA also supported the development of a youth paper for the RPJMN.

The inclusion of the demographic dividend and projection trends in the draft RPJMN represents an accomplishment for UNFPA and is crucial to Indonesia's sustainable development and the wellbeing of its people.

### **Policy Dialogue Round Table (PDRT) on population and development**

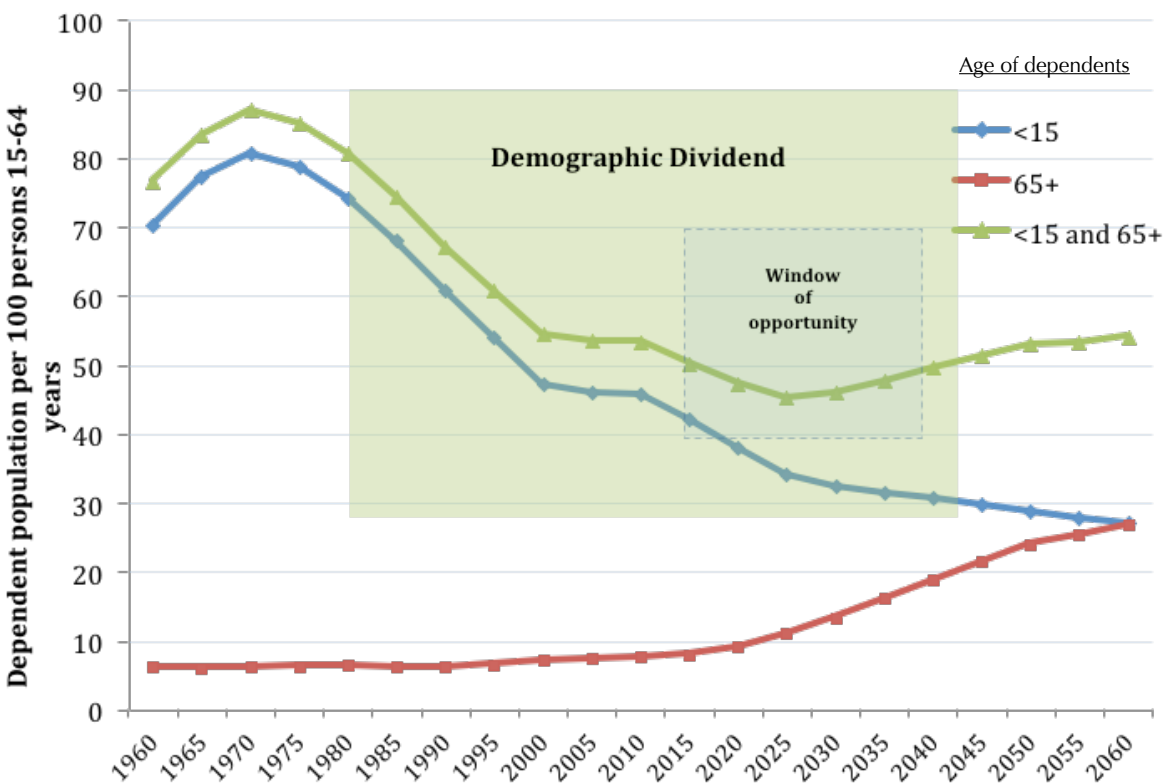
Established by Bappenas with UNFPA support, the PDRT on population and development provides an innovative platform to increase understanding on emerging population issues across government, enabling coordinated policy responses. In 2014, UNFPA commissioned a policy brief on strengthening family planning institutions that will be disseminated through the PDRT.



“If the demographic dividend can not be managed properly, Indonesia may be trapped as a lower-middle income country. Therefore it is vital that we define policies to increase the intellectual capital and foster entrepreneurship among Indonesia's youth.”

Dr. Bambang Permedi Soemantri Brodjonegoro,  
Minister of Finance.





The declining dependency ratio provides a demographic bonus and a window of opportunity, Indonesia 1960-2060.  
Source: UN, Department of Economic and Social Affairs, Pop. Div. (2013). World Population Prospects: The 2012 Revision, DVD Edition.

Improving evidence-based policy development

Effective population and development policy depends on policy makers having access to reliable information on a country's population. To this end, UNFPA has supported an impressive legacy of cutting-edge analysis on the implications of population dynamics in Indonesia.

In 2014, UNFPA delivered several policy-focused publications, including:

- (i) the finalization of monographs on population, *Indonesia on the Threshold of Population Ageing*, and *Youth in Indonesia*;

- (ii) a policy brief on *The New Indonesian Population Projection: Understanding the Causes, Consequences and Policy Options for Population and Development*; and
- (iii) background studies on population and development issues to support the drafting of the National Medium-Term Development Plan (RPJMN 2015-2019).

Striving to ensure that research translates into evidence-based policies continues to be a priority for UNFPA.

UNFPA is working with the academic community to enable Indonesia to become self-sufficient in producing

evidence-based analysis on population dynamics. In 2014, UNFPA continued work to establish Universitas Gajah Mada (UGM) Population Study Center (PSC) as a reference institution for population dynamics-related research. UNFPA is also collaborating with BKKBN and partners to improve the standardization of training in population demographics. The development of guidelines to be used by the academic communities in Indonesia will ensure the quality of demographic material.

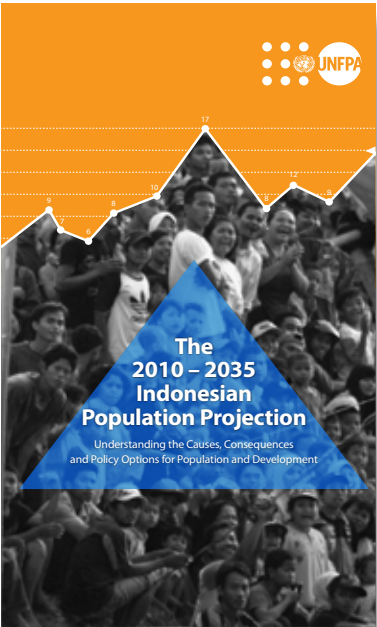
UNFPA is also working to strengthen the capacity of BKKBN to produce population data analysis for advocacy and policy development. Through



Indonesia on the Threshold of Population Ageing is the first monograph in a series designed to increase awareness of emerging population issues.



A monograph on Youth in Indonesia provides insightful information to support youth development policies in Indonesia.



UNFPA published a policy brief on The New Indonesian Population Projection: Understanding the Causes, Consequences and Policy Options for Population and Development.

collaboration with Futures Institute, UNFPA is supporting the use of a demographic package to raise policymakers' awareness of the importance of fertility and population growth as factors in social and economic development.

Linking population dynamics and climate change

Climate change has been recognized as one of the greatest challenges to humanity today. With extensive experience in population development, UNFPA brings a unique expertise to the climate change arena by highlighting links between climate change and demography. This is highly relevant to

Indonesia, which is prone to frequent natural disasters and extremely vulnerable to climate change.

Building on previous research, UNFPA worked to further increase understanding about population dynamics and climate change in the Semarang area in 2014. This research will enhance climate change adaption, as well as disaster risk reduction strategies to reduce the impact of climate change in Indonesia. In 2014, UNFPA also brokered an innovative partnership between the National Council on Climate Change (DNPI) and BKKBN that will strengthen the capacity of BKKBN to address climate change and population dynamics.



# Advocacy to Advance ICPD Principles and South-South Cooperation



“As one of the pioneering countries in the ICPD programme, Indonesia has implemented the ICPD PoA for 20 years and is strongly committed in making real contributions to the progress of various areas of population and development.”

— Dr. Fasli Jalal,  
Chairperson of National Population and  
Family Planning Board (2013-2014).

Twenty years ago, leaders from 179 countries met in Cairo to redefine development thinking. At the 1994 International Conference of Population and Development (ICPD), a new vision for sustainable development was established, with human rights at its core.

The Programme of Action (PoA) agreed at the conference articulated sexual and reproductive health, including family planning, as a fundamental human right, and affirmed that empowering women and girls is essential to reduce poverty and secure well-being for all. These principles were reinforced through the Millennium Development Goals, which provided time-bound targets for countries to alleviate poverty. Supporting countries to embrace these principles is a core mandate for UNFPA.

2014 was a big year for UNFPA in promoting unfinished ICPD issues, globally and in Indonesia. The delivery of the groundbreaking report *ICPD Beyond 2014: Framework of Actions for the follow-up to the Programme of Action of the International Conference on Population and Development (ICPD)*, was a milestone in UNFPA's efforts to advocate for the ICPD principles and ensure their inclusion in the Post-2015 Development Agenda. The report culminated from a review of ICPD implementation in 176 countries and provides compelling evidence on the continued need to secure individuals' rights and overcome inequity.

The *Beyond 2014* report cements the relevance of the ICPD agenda for global development. On 22 September 2014, the United Nation's General Assembly Special Session (UNGASS) on the follow-up to the ICPD PoA beyond 2014 provided an official channel to strengthen the integration of the ICPD principles in the Post-2015 Development Agenda at the highest political level.



## ICPD advocacy in Indonesia

The two decades since the ICPD has seen remarkable progress for Indonesia in some areas, and unfinished business in others. Providing evidence for the 'ICPD Beyond 2014' global campaign, UNFPA supported a comprehensive review of ICPD implementation in Indonesia in 2013.

The review highlighted the need for Indonesia to improve its record on maternal deaths, accelerate progress on the use and quality of family planning services, increase access to information and services on adolescent sexual and reproductive health, reduce gender-based violence, and curb a rapidly spreading HIV/AIDS epidemic. Additionally, further pertinent emerging issues include



Twenty participants from eight countries in the global south participated in an international training course, hosted by the National Population and Family Planning Board (BKKBN) and UNFPA, on Developing Strategic Partnerships with Muslim Leaders and Faith-Based Organizations in Family Planning in Yogyakarta from 9-14 June 2014.

population ageing, optimizing the demographic dividend, urbanization, international migration and climate change. Addressing unfinished ICPD issues is key to enhancing rights-based and inclusive development for Indonesia.

Building on this substantial research, in 2014 UNFPA published *Indonesia: The ICPD+20 and the Unfinished Agenda*, which consolidated salient points of the ICPD review in Indonesia. The report will inform national policy dialogue on how to advance the unfinished ICPD agenda. It also supports Indonesia's role in global advocacy on ICPD, including at UNGASS.

Through collaboration with religious organizations Muhammadiyah and Nahdatul Ulama, UNFPA also supported

advocacy for male participation in addressing unfinished ICPD issues. The publication, *Male Involvement in Reproductive Health, Family Planning, and Prevention of Gender-Based Violence: Islamic Perspectives*, capitalizes on the strong influence of Muslim leaders in advancing social change.

UNFPA also worked to enhance the youth perspective on ICPD in 2014, and to advance ICPD advocacy with the media. The Indonesian presidential election was held in 2014 and UNFPA began the process of advocacy for the new parliament and administration, highlighting the need to address the unfinished ICPD issues as critical to Indonesia's sustainable development and future prosperity.



“Under Maqasid al-Syari'ah, family protection is the most important thing. Family planning is part of an integrated effort for family protection. It is the task of religious leaders to ensure that people have a prosperous life. Therefore, the integrated multi-dimensional approaches of religious leaders, which includes economic, health, social and cultural aspects, are needed.”

— Dr. M. Amin Abdullah,  
Muslim Religious Leader.

## South-South Cooperation to advance development

For over 30 years, Indonesia has been playing a key role in South-South Cooperation (SSC) as a platform to share insights and best practices on development challenges. SSC programmes align with Indonesia's aspirations to be a regional leader and a progressive force in the global development arena. By showcasing its development successes, Indonesia can provide valuable lessons for other developing countries, particularly those with social and cultural similarities. Indonesia can also learn from the experiences of other countries in overcoming development challenges as partners sharing insights for mutual gain.





“Religious leaders play a key role in changing public opinion and influencing public services, including health services, at a grass-roots level. South-South Cooperation has facilitated programs where religious leaders across countries can share insights and work together on sexual and reproductive health issues, and to bring the work of these influential leaders into the global arena.”

— Alisa Wahid,  
Vice Head of Family Welfare Agency,  
Nahdatul Ulama of Yogyakarta.

### The strategic partnership with Muslim religious leaders in family planning

Drawing on successful engagement with Muslim religious leaders to forward family planning initiatives, the National Population and Family Planning Board (BKKBN) and UNFPA jointly designed a weeklong training course for leaders from other countries entitled *Developing Strategic Partnership with Muslim Religious Leaders in Family Planning*. The training provided participants with skills to develop strategic partnerships with Muslim religious leaders, tapping into their powerful influence on the acceptance and adoption of family planning policies by the community.

### Center of Excellence for Comprehensive Family Planning Training

In 2014, UNFPA supported BKKBN to establish an innovative collaboration with the *Fakultas Kedokteran* (Faculty of Medicine) at Gadjah Mada University (FK UGM) to establish the *Center of Excellence for Comprehensive, Rights-Based Family Planning Training*. The Center will become a reference institution for clinical training centers in Indonesia and will enable Indonesia to share best practices in rights-based family planning with health providers from other developing countries.

Dr. Teguh Aryandono, Dean of the Faculty of Medicine, University of Gadjah Mada, Mr. Jose Ferraris, UNFPA Indonesia Representative, and Ms. Ambar Rahayu, Principal Secretary of BKKBN, during the signing of a Letter of Understanding (LoU) for a Center of Excellence for Comprehensive Family Planning Training in Yogyakarta.



### Bilateral SSC between Indonesia and the Philippines

Since 2012, UNFPA has supported bilateral SSC between Indonesia and the Philippines. The Autonomous Region in Muslim Mindanao (ARMM) has been a focus area for the Cooperation as it has cultural and religious similarities to Indonesia. Several successful exchanges took place during 2014 that concentrated on the engagement of religious leaders in family planning, the successful decentralization of family planning and reproductive health, and youth engagement in disaster and crisis response. By increasing the transfer of knowledge between the two countries, the SSC initiative aims to generate low-cost and effective practices to address development challenges.



A delegation from the Philippines met with secondary-school students during the Decentralization and Family Planning Seminar and Field Visit to the Belitung Timur District on 24 October 2014.

## Investing in Youth: Transforming the Future

A record 1.8 billion young people aged 10-24 years make up a quarter of the world's population – the largest-ever generation of youth. In 2014, UNFPA presented a month of youth-focused festivities in Indonesia to promote World Population Day and International Youth Day. This celebration of youth recognized that they are the shapers and leaders of our global future. The State of the World Population (SWOP) report for 2014, *The Power of 1.8 Billion Adolescents, Youth and the Transformation of the Future*, highlighted the potential of young people to be drivers of prosperity, provided that countries promote young people's education and health and protect their rights. World Population Day and SWOP are annual events to focus global attention on critical ICPD issues.



# Universal access to reproductive health

Access to appropriate reproductive and maternal health care can mean the difference between life and death for a woman. And yet, too many women in developing countries cannot exercise their right to access essential sexual and reproductive health care.

Indonesia looks unlikely to meet its MDG 5 target of a 75% reduction in maternal mortality by September 2015. The Government of Indonesia is committed to ending preventable maternal deaths, but faster progress is urgently needed. By promoting universal access to reproductive health, UNFPA is working to ensure that women have access to vital reproductive health services during all phases of their lives.

## Developing a reproductive health monitoring system

A comprehensive reproductive health monitoring system will provide timely information that is critical for reproductive health programming and is one of Indonesia's commitments to achieve MDG 5. Building on previous work, guidelines for monitoring access to reproductive health were tested with UNFPA support in 2014. Once the guidelines have been finalized, it is anticipated that they will become the basis of a national reproductive health monitoring system.

## Enhancing evidence-based policy formation

To strengthen capacity for national policy development, UNFPA is supporting the development of the Action Plan 2013-2015 for Accelerated Reduction of Maternal and Neonatal Mortality. The Action Plan outlines strategies to strengthen maternal health services, enhance the skills of midwives and improve emergency obstetric care (EmOC).

In addition, UNFPA supported the development and dissemination of a Family Planning Services Action Plan 2014-2015 to improve and coordinate family planning services provided by the Ministry of Health (MOH). Widening access to family planning will improve maternal health - maternal deaths could be cut by a quarter simply by addressing unmet needs for modern family planning.

In 2014, the Government of Indonesia introduced a Universal Health Coverage (UHC) scheme as an important step to reducing health inequity. A review of *Jampersal* (the previous

maternal health insurance scheme) was conducted by UNFPA in 2013. Recommendations from the review were disseminated in 2014 and will serve to improve the implementation of maternal health elements of the UHC scheme.

As part of UNFPA's dedication to support policy development, these activities will enhance universal access to reproductive health and accelerate achievement of MDG 5.



## Desty's story

Desty Ariyani is a young midwife working in Bengkulu, South Sumatra. Every day, Desty faces challenges that get in the way of delivering services to her community. Some days she must travel on muddy roads, and on occasion she has even faced floodwaters on her way to reach her clients. She also faces cultural and social barriers in her work. There is a lack of general knowledge about maternal and child health within her community and being a recent midwifery graduate, she experiences distrust by some families. As early marriage is not uncommon in her area, many of her clients are pregnant adolescent girls, who have a greater risk of birth complications.

Addressing the challenges in the delivery of midwifery services in Indonesia is a core part of UNFPA's work. The vast majority of lives lost due to complications of pregnancy can be prevented with proper antenatal care and the presence of a skilled midwife during delivery. However, improving the skills of midwives cannot be targeted alone. A multi-faceted approach including educating communities, as well as improving infrastructure in remote areas is vital to promoting safe motherhood.



Midwives from 33 provinces across Indonesia gathered in Jakarta for UNFPA Indonesia's National Workshop on the State of the World's Midwifery (SoWMy) report which was released in collaboration with the International Confederation of Midwives (ICM) and the World Health Organization (WHO), on 8 September 2014.

## Strengthening the midwifery workforce

Skilled attendance at all births is considered to be the single most critical intervention for ensuring safe delivery for both mother and baby. Strengthening the skills of midwives is necessary to improve reproductive health and family planning services and is a central component of UNFPA's work.

Globally, UNFPA collaborates with the International Confederation of Midwives (ICM), the World Health Organization (WHO) and several other partners to improve the evidence supporting more effective midwifery care. The State of the World's Midwifery (SoWMy) 2014 report presented findings on midwifery from 73 low- and middle-income countries, including Indonesia, and highlighted the urgent need to improve the availability, accessibility, acceptability and quality of midwifery services.

On 8 September 2014 the *State of the World's Midwifery* (SoWMy) report was released in Indonesia at a seminar hosted by UNFPA, the Indonesian Midwives Association (IBI) and the World Health Organization (WHO). Attended by midwives from 33 provinces, the seminar provided a platform to explore the challenges and opportunities in improving midwifery services in Indonesia. In 2014, UNFPA collaborated with MOH and IBI to conduct a situational analysis on the midwifery workforce regulation.



“With Indonesia's shift to decentralization, local government should be encouraged to take responsibility for allocating resources to maternal health programmes and to endorse local regulations to support maternal health.”

– Dr. Anung Sugihantono,  
Director General of Nutrition and Maternal  
& Child Health, Ministry of Health.

## H4+

The H4+ is a partnership between UNICEF, UNAIDS, UNFPA, the World Bank and WHO established to address the slow and uneven rate of progress towards MDG 4 and MDG 5 on reducing child mortality and improving maternal health.

In Indonesia, the H4+ collaborated with the Ministry of Health in 2014 to formulate the National Action Plan on Maternal Health 2016-2030. The plan will provide a framework to coordinate and improve reproductive and maternal health plans, policies and programmes. UNFPA supported the H4+ to develop a position paper for maternal mortality and morbidity reduction. The position paper outlines bottlenecks impeding progress to reduce maternal deaths in Indonesia and highlights key strategies to overcome them.

## Emergency obstetric care

Improving emergency obstetric care (EmOC) is integral to reducing maternal deaths. With UNFPA support, a manual for improving EmOC referral was developed in 2014 that was based on an EmOC assessment in the Jayapura district, Papua Province. This will contribute to national planning and policy making to improve EmOC referral, particularly in difficult geographical areas.



“IBI, the Indonesian Midwives Association, is strengthening the competencies of its members to meet the national and global standards and supporting the Government's programme to achieve the MDG health goals.”

– Emi Nurjasmii,  
President of the Indonesian Midwives  
Association (IBI).



# Minimum Initial Service Package (MISP):

## reducing the impact of humanitarian emergencies

In times of humanitarian emergencies, the vulnerability of women and girls is often increased. They may be at greater risk of gender-based violence, unwanted pregnancy and transmission of sexually transmitted infections (STIs) and HIV. They may be forced to give birth in unsafe environments with little assistance, which places them at a heightened risk of death and disability. The rights of women and girls are often compromised and gender inequities are exacerbated during a crisis.

More than just supplies, MISP is an internationally standardized set of priority activities to be implemented from the onset of a disaster to ensure access to reproductive health services, preventing illness and saving lives.

By promoting MISP, UNFPA enables women and girls to access basic reproductive health (RH) services during a crisis. This is essential to protect their health, maintain their dignity and uphold their fundamental human rights. It is especially important in Indonesia, which is highly prone to natural disasters.

The integration of MISP into the national emergency preparedness and response system has been an impressive achievement for UNFPA and the Government of Indonesia. During 2014, UNFPA continued to support the comprehensive implementation of MISP.

### Midwives: cornerstone to MISP implementation

As midwives are at the frontline of providing reproductive health services in Indonesia, their active participation in implementing MISP during a humanitarian emergency is essential. Building on extensive work to train midwives in MISP implementation, UNFPA continued close collaboration with the Ministry of Health (MOH) and the Indonesian Midwives Association (IBI) to deliver an MISP module for inclusion in the curriculum of midwifery schools in 2014. This will ensure the sustainability of MISP training. The module was trialed in several midwifery schools and an evaluation of the trial will inform the national implementation of the module.

### Increasing collaboration in humanitarian response

Using a multi-sectoral approach will ensure that all actors involved in the humanitarian response will support MISP implementation. In 2014, an analysis of all of the actors involved in the humanitarian response highlighted future avenues for collaboration on MISP implementation within other sectors. UNFPA also supported evidence-based advocacy on MISP principles within the National Disaster Management Agency (BNPB), the army, and the Indonesian National Nurses Association (PPNI) during 2014, to increase the awareness of these key players on the importance of MISP in emergency situations.

MOH continued national training programmes with UNFPA assistance in 2014, supporting a wide range of participants from government, NGOs and other relevant organisations to become proficient in training MISP principles.

Participants from Padang, Yogyakarta and Surabaya trial the Training Module on MISP (Minimum Initial Service Package) on Reproductive Health in a humanitarian setting on 9 August 2014.



UNFPA also conducted a joint assessment in 2014 to obtain information on reproductive health services, gender-based violence risks, and data gaps in internally displaced persons (IDPs) camps.

### Involving youth in MISP implementation as beneficiaries and partners

During 2014, UNFPA began foundational research to identify how to better involve young people in MISP implementation. Currently, there is no formal mechanism for young people to access essential RH services during humanitarian situations in Indonesia that is tailored to their needs. In addition, young people remain an untapped resource that could be mobilized to enhance MISP implementation during the disaster response.

As a first step to address this challenging situation, in 2014 UNFPA adapted international guidelines on ASRH in humanitarian settings to the Indonesian context. An assessment was then conducted to identify any existing disaster programmes that engage young people, potential partners and barriers that would need to be overcome to involve young people in a humanitarian response situation.

### Ready to respond in a disaster

During 2014, UNFPA continued efforts to ensure that UNFPA can provide timely and quality responses to major disasters. To improve sustainability of supplies, UNFPA provided technical assistance to the Ministry of Health to support the local procurement of RH supplies in emergency situations.

A delegation of 20 youth leaders and humanitarian programmers from Indonesia attended a training workshop on “Adolescent Sexual and Reproductive Health (ASRH) and Youth Engagement in Humanitarian Settings” in Tagaytay in the Philippines from 8-11 December 2014. The workshop was organized between UNFPA Indonesia and UNFPA Philippines.



A total of 1559 disaster events were recorded in Indonesia in 2014, resulting in 490 deaths and affecting the lives of 2 million people. Thousands of people were displaced, and many lost loved ones, their homes and their possessions. To prevent women from losing their dignity as well, UNFPA collaborated with the Ministry of Health to distribute 1600 hygiene kits and more than 100 maternal, post-delivery and baby kits during 2014.

Mount Sinabung first began erupting in September 2013 and continued to erupt in 2014. A large eruption in February killed 15 people and displaced 30,000 others. By December 2014, 795 families were still displaced at seven IDP sites. To support women when they are most vulnerable, UNFPA established two women-friendly spaces in cooperation with the Ministry of Social Affairs (MOSA) and the National Disaster Management Agency (BNPB).



# Family planning: choices not chances

The positive benefits of access to family planning are undeniable. Giving girls and women the power to choose the number and timing of their children improves the survival of women and their children. It also enables them to raise healthier, more educated and more prosperous families. Ensuring access to family planning is one of the best ways to empower women and promote stronger communities.

Investing in family planning is also a smart decision from an economic perspective: every dollar spent on family planning will save \$1.47 on maternal health costs.

Indonesia is renowned for its progressive family planning (FP) programme. However, the large gains in family planning have largely stalled and Indonesia looks unlikely to meet its MDG targets in this area. The Government of Indonesia has stepped up efforts to revitalize the national family planning programme, recognizing that investing in family planning is one of the best investments a country can make in its future.

## Rights-based National Family Planning Strategy

UNFPA works to enable the Population and Family Planning Board (BKKBN) to develop and deliver a strong family planning programme that meets human rights standards including freedom from discrimination, coercion and violence.

In 2014, UNFPA supported the development of a comprehensive, rights-based national family planning strategy. This will bolster BKKBN's efforts to strengthen and coordinate the national family planning programme. A comprehensive strategy will provide a framework for accelerating access to rights-based family planning services to achieve MDG goals and global commitments.

## Universal Health Coverage (UHC)

Providing universal access to healthcare needs is essential to reduce health inequities and alleviate poverty. 2014 marked the first year for the introduction of the Universal Health Coverage (UHC) scheme. BKKBN is responsible for providing family planning supplies for all beneficiaries of the scheme. In 2014, UNFPA supported a study assessing the proposed mechanism to include family planning under the UHC scheme, especially for the poor. UNFPA's 'willingness to pay' study in 2014 will also provide an evidence-based foundation to support BKKBN in delivering family planning under the UHC scheme.

## Supply chain management

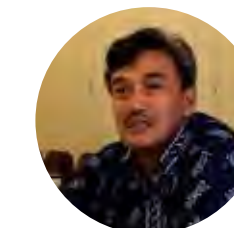
The success of family planning programmes is dependent on a strong and consistent supply of quality contraceptives. In Indonesia, decentralization poses obstacles to effective supply-chain management. To overcome these challenges, UNFPA is supporting a pilot programme to enhance the supply of quality contraceptives. Due to be implemented in 2015, the results of the pilot programme will feed into the National Comprehensive Family Planning Strategy.



## Engaging men and boys in sexual and reproductive health

During 2014, UNFPA supported the development of advocacy materials for *Male Involvement in Reproductive Health, Family Planning, and Prevention of Gender-Based Violence: Islamic Perspectives*, to harness the potent influence that religious leaders have on community attitudes and behaviors.

*Male Knowledge and Attitudes Towards SRH and Gender Practices* is a publication produced by BKKBN with technical assistance from UNFPA in 2014. Utilizing data from the 2012 IDHS, the compendium explores the behaviors of men and women in relation to sexual and reproductive health and gender relations in Indonesia.



“My relationship with my wife became more harmonious after I had a vasectomy. According to my wife, this procedure has allowed me to take over the responsibility of family planning from her.”

— Mr. Winardi of Bantul,  
a family planning beneficiary  
from Yogyakarta.

In 2014, UNFPA supported an assessment on the quality of condom production. This will boost policy development to enable Indonesia to produce its own quality contraceptives that meet international standards. UNFPA is also working in conjunction with the Concept Foundation to enhance policies that will improve the procurement of better quality contraceptives. UNFPA is also supporting collaboration between BKKBN and the National AIDS Commission, which will also work to enhance the supply of condoms.

## KB Kencana

To revitalize the family planning programme, BKKBN with UNFPA assistance has developed and implemented a pilot family planning programme called *KB Kencana*. The pilot programme was trialed in four provinces during 2013. An assessment of the first year of implementation of *KB Kencana*, including the application of updated minimum standards, will feed into national policy dialogue on family planning.

## Technical Support Unit

The establishment of a Technical Support Unit (TSU) at BKKBN is expected to strongly enhance its capacity for family planning programming. The foundations for the TSU were laid in 2014 and it will be launched in early 2015. In partnership with the International Council on Management of Population Programmes (ICOMP), the unit will provide high quality technical and strategic support to advance access to family planning in Indonesia. Producing analytical papers, strategies and plans to inform FP policy development will be another core responsibility of the unit, as well as FP2020 coordination.

## FP 2020

The FP 2020 initiative is a global movement to enable an additional 120 million women and girls in the world's poorest countries to access voluntary family planning by 2020. Indonesia has made FP2020 commitments to improve and expand the national family planning programme by reducing disparities and increasing funding. UNFPA and USAID co-chair the FP2020 Country Committee in Indonesia, which streamlines the efforts of all partners involved in family planning. The committee performed a landscape mapping exercise to identify family planning partners and established two working groups – the FP Strategy Working Group and the Rights and Empowerment Working Group – to provide evidence-based strategic advice on family planning.



# HIV/AIDS:

## preventing sexual transmission



“Through partnership with the government, private sectors, and community, National Aids Commission (NAC) initiates the integration of positive masculinity approach to promote men's engagement in the Prevention of HIV through Sexual Transmission in Indonesia.”

— M. Yusuf,  
Programme Officer on Prevention of HIV  
through Sexual Transmission, National  
AIDS Commission.

### Enhancing national policy development to combat HIV

During 2014, UNFPA played an active role in building capacity within the National AIDS Commission (NAC) to improve HIV prevention policies. UNFPA assisted the NAC in developing the National Strategy and Action Plan (NASAP) 2015-2019 and revising the HIV Prevention Through Sexual Transmission (PMTS) guidelines. In particular, UNFPA ensured the integration of SRH-HIV linkages and CCP in these national policy frameworks and advocated a strong focus on women and youth in affected populations.

Unlike many countries in the region, the rate of new HIV infections in Indonesia is continuing to grow. UNFPA is supporting the Government of Indonesia to reduce the sexual transmission of HIV through rights-based programmes that target geographical areas of highest burden and key populations at risk. This supports Indonesia's effort to reach Millennium Development Goals and other development targets.

Decisive action is required to turn the tide of the HIV epidemic in Indonesia. Because the majority of HIV infections are sexually transmitted in Indonesia, reducing this mode of transmission is cornerstone to an effective HIV response.

Condoms are universally recognized as one of the most effective means to reduce HIV transmission, while providing dual protection against unwanted pregnancies. UNFPA promotes Comprehensive Condom Programming (CCP), supporting the Government of Indonesia to ensure that every person at risk of HIV/STIs has access to quality condoms and has the knowledge and motivation to use them correctly.

UNFPA also strengthens synergies between sexual and reproductive health programming and the HIV response. As co-sponsors of UNAIDS, UNFPA works closely with the UN family to unite efforts and maximize the impact of the UN's response to AIDS in Indonesia.

UNFPA has facilitated an innovative partnership between NAC and BKKBN to improve the quality of condoms available in Indonesia. The framework for this innovative collaboration is outlined in the refined PMTS Paripurna guidelines.

The PMTS Paripurna guidelines will strengthen the policy framework and bolster the HIV response in Indonesia.



### Targeting key affected populations (KAPs)

In most provinces in Indonesia, the HIV epidemic is concentrated among key populations, including sex workers and their clients, people who use drugs, men who have sex with men, and transgender people. These people are often marginalized from society, and from the services they need to protect themselves from HIV. The elimination of stigma and discrimination against people affected by HIV remains one of the most challenging and critical elements to eliminating AIDS and addressing the HIV epidemic.

Empowering at-risk populations and ensuring their meaningful participation in HIV programming improves the effectiveness of the HIV response. In 2014, UNFPA and NAC continued collaboration with KAP groups to gain their input on HIV programming, in particular in improving SRH-HIV linkages. Improving KAP engagement in policy development at the national level will mean their input can be incorporated in the revised PMTS guidelines. UNFPA also supports the implementation of HIV prevention programmes within KAP groups, working to increase knowledge of HIV among those most at risk.



“During the training on high-risk behaviours, we had a heart-to-heart discussion about male involvement, and that was enough to make individuals want to access the Voluntary Counselling and Testing services.”

— Wahyu Indriawan,  
Sokoguru Foundation, Semarang.

### Policy development in Papua

The picture of the HIV epidemic is very different in Papua and West Papua Provinces, where the HIV/AIDS level is nearly 6 times higher than the national average – 2.3% of the population is living with HIV.

In 2014, UNFPA continued to support efforts to improve HIV policy development and implementation in two districts in Tanah Papua: Jayapura and Meruke. UNFPA works closely with the District AIDS Commissions to improve the supply of condoms and to enhance HIV-SRH linkages by enhancing district AIDS regulations and action plans. Coordinating with diverse stakeholders, including government institutions, health workers, networks of key affected populations, religious leaders and young people ensures the inclusive development of policies, and enhances HIV programme implementation. Lessons learned through these activities will feed into national policy dialogue to improve the national HIV-prevention tactics.

### Engaging men in gender equality and HIV/AIDS prevention

In 2014, UNFPA continued its support of the National AIDS Commission to strengthen its HIV/AIDS PMTS programme with a strategy to engage men. Guidelines were developed to address the underlying drivers of men with high risk behavior: men in occupational groups that are more likely to be frequent clients of female sex workers (known as High Risk Masculinities), and men who have sex with men. These were incorporated into the revised PMTS Paripurna guidelines as well as a pilot programme in 12 districts. The 'positive masculinities' concept was integrated into Indonesia's 2015-2019 HIV and AIDS National Strategy and Action Plan, and its accompanying guidelines.





# Empowering women: supporting a brighter future

Empowering women and girls is one of the most effective ways of accelerating a country's development. To do so, women and girls must be given access to healthcare and opportunities for education and employment. They must be protected from violence, discrimination and coercion. Empowered women support healthier, more prosperous families and stronger communities. Securing women's rights is key to the alleviation of poverty and a brighter future for all.

## Combating gender-based violence

Gender-based violence (GBV) is a serious concern from both a public health and human rights perspective. It takes a devastating toll on the women who experience it, the children who witness it, and society as a whole.

While the Government of Indonesia condemns GBV, it remains a problem that is not widely understood, in part because it mainly occurs behind closed doors. It is seldom spoken about and in many cases is still accepted as normal. The engagement of men and boys to restore equity in the relationships between women and men is vital to addressing GBV.

## Health sector response to GBV

Reliable baseline data is crucial to improve the health sector response to GBV. There is currently no mechanism for recording data on survivors of

GBV who seek medical assistance in Indonesia. To overcome this, UNFPA partnered with the Ministry of Health (MOH) and the Ministry of Women's Empowerment and Child Protection (MOWECP) to perform an assessment of the current health sector response to GBV, including data and reporting mechanisms. The assessment will enhance the evidence supporting rights-based policies that improve the health sector response to GBV, including the MOH Strategic Plan for 2015-2019. This is a first step towards delivering a better quality of services to survivors of GBV.



*"The support of UNFPA has strengthened MOWECP in delivering their main responsibilities as the coordinator of GBV prevention and responses to develop and formulate key policy and regulation on GBV."*

Rohika Kurniadi Sari, Deputy Assistant on Violence against Women, MOWE CP.



## Combating GBV during a disaster

In 2014, UNFPA worked with MOWECP to prevent and manage GBV during a humanitarian emergency. Under the leadership of MOWECP, a GBV sub-cluster has been activated to strengthen the coordination of GBV prevention and response. An assessment of key stakeholders involved in tackling GBV during a crisis will inspire future programmes to improve a multi-sectoral response to GBV. As part of this, options were investigated to create Women Friendly Spaces (WFS) to protect women and children during displacement in emergencies.

## Evidence-based advocacy and policy development

UNFPA works to improve the evidence-base available to support policy development and advocacy efforts to address gender-based violence. UNFPA is working with the National Commission on Violence Against Women (NCVAW) to address sexual violence in national planning, including in the RPJMN 2015-2019. UNFPA provided technical support to develop a draft strategy on the impact of sexual violence on sexual and reproductive health. This will be used to advocate for stronger legislation against sexual violence. UNFPA is also supporting efforts to address sexual violence among marginalized women groups, including those in detention. UNFPA collaborates with MOWECP to improve men's and boys' engagement in combatting GBV. Ensuring the prominence of principles of male involvement in national plans and policies, including the RPJMN 2015-2019, will support the mainstreaming of this approach in gender and development work. Guidelines were developed on male involvement in GBV programming. The establishment of a National

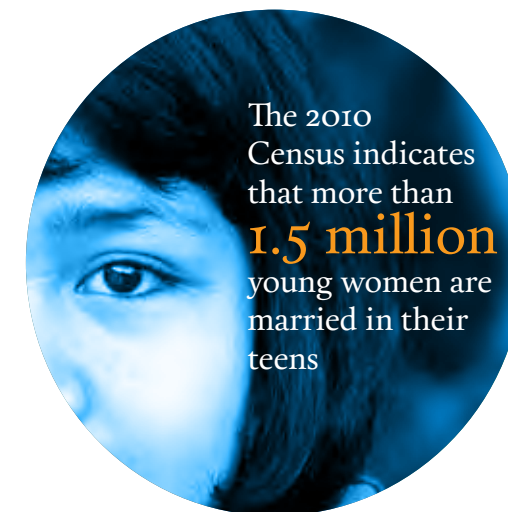
Reference Group on Men's and Boys' Engagement will provide an enabling environment and facilitate partnerships in this area.

Translating research into policy development, the recommendations from the two joint UN Trust Fund programmes on violence against women (UNTFVAW) and human trafficking (UNTFHS) will support national policies on community engagement to prevent GBV. Lessons learned from advocacy work in Timor Tengah Selatan will also inform a comprehensive response to GBV.

UNFPA is working with MOWECP to implement minimum service standards (MSS) for survivors of GBV. Overcoming barriers to multi-sectoral coordination has been challenging. Lessons learned will support future efforts to increase support for survivors of this devastating violence by using a multi-sectoral approach.

## Child marriage and female genital mutilation (FGM)

Combating child marriage and FGM is at the heart of UNFPA's fight to support women's rights and address gender inequality. Early marriage is all too common in Indonesia, and predisposes girls to bear children at a young age, posing health risks to both mother and baby. Childbearing in the teenage years also reduces girls' opportunities to education and employment. Female genital mutilation has no known health benefits, and can cause physical and mental trauma, severe pain and long-term complications. Recently launched research on harmful practices in Indonesia provided the foundation for evidence-based advocacy in 2014, raising awareness on the adverse impacts that these harmful practices can have on the health and wellbeing of women and girls.



The 2010 Census indicates that more than **1.5 million** young women are married in their teens

## Engaging men and boys as partners of change

Engaging men and boys is vital if gender equality is to be achieved and reproductive health programmes are to succeed. Transforming harmful gender norms is necessary to address the root cause of GBV. It will also reduce barriers to family planning, maternal health, adolescent sexual and reproductive health (ASRH), and HIV prevention and treatment. For this reason, UNFPA strengthens the engagement of men and boys in programmes supporting gender equality, sexual and reproductive health and reproductive rights.

Throughout the Eighth Country Programme, UNFPA has supported activities to promote men's engagement. UNFPA works with the Ministry of Women's Empowerment and Child Protection (MOWECP), the National Population and Family Planning Board (BKKBN) and the National AIDS Commission to strengthen understanding and promote evidence-based policy development to address inequitable and unhealthy attitudes and social expectations about gender. A national guideline to outline men's engagement in GBV will provide new opportunities to advance policy and develop innovative programmes to support men's engagement.



# Youth empowerment: unleashing the potential of 65 million young people

The 65 million young people of Indonesia today hold the power to transform the country. Opening opportunities for young people will enable them to fulfill their potential, shape their communities and propel the nation forward.

It is the right of every young person to have a safe passage to adulthood. Yet for too many Indonesians, the path to becoming an adult is fraught with challenges. They experience levels of poverty and inequality that impede their access to education, employment and health care, including sexual and reproductive health. Enabling young people to overcome these challenges will improve their lives as well as accelerate Indonesia's development towards positive social change and economic prosperity.

## Accelerating youth development

Prioritizing young people and enhancing their contribution to a sustainable future is a core mandate for UNFPA, both globally and in Indonesia. In 2014, UNFPA provided technical assistance to Bappenas to develop a background paper on youth as a foundation for the youth section of Indonesia's next Medium-Term Development Plan, the RPJMN 2015-2019. The express inclusion of youth development in the draft RPJMN demonstrates Indonesia's commitment and strategic direction towards promoting youth participation and leadership in development.

Working through the Inter-Agency Network on Youth development (IANYD), UNFPA provided technical assistance to Bappenas to develop the National Youth Strategy 2015-2019. The youth strategy will provide a basis for youth advocacy and improve the policy environment on youth related issues, informing the development of the RPJMN. Currently chaired by UNFPA, the IANYD was established in 2013 to streamline and strengthen the UN's response to youth development in Indonesia.

Around 150 young people gathered together for UNFPA Indonesia's "Youth Blast" event in Jakarta on 28 November 2014 to hear stories of high-achieving young leaders making a difference in the country.

## Youth and the demographic dividend

Young people are pivotal to harnessing the demographic dividend in Indonesia. Capitalizing on the demographic dividend is a national priority in Indonesia's Medium-Term Development Plan (RPJMN). UNFPA will continue to support the Government to achieve this aim by advancing youth development. This will require progressive policies to expand education, improve the health of young people and empower them to become drivers of prosperity.



“UNFPA Indonesia has raised awareness of the importance of youth's voice in shaping the post-2015 development agenda and put on a youth lense to address the multiple challenges young people are facing on UNFPA Programmes.”

— Mr. Faqih Aulia Akbar Rasyid,  
member of UNFPA Indonesia Youth  
Advisory Panel.

In 2014, UNFPA delivered several substantial research projects to enhance the evidence base that underpins national planning and advocacy on youth development. A youth mapping report, *Indonesian Youth in the 21st Century*, and a youth monograph, *UNFPA Indonesia Monograph Series: no 2: Youth in Indonesia*, provide insightful information and policy directions on how to support youth development in Indonesia. These publications highlight the benefits that strong investment in young people can bring to Indonesia.

*Investing in young people in Indonesia* is a booklet showcasing the contributions that inspiring young people are making towards a sustainable future. The booklet was launched on 28 November 2014 at “Youth Blast”, a youth-friendly event that featured the stories of inspiring young people who are making a difference in Indonesia.

On August 9 2014, “Youthnesian” was a spectacular event to amplify youth

voices, highlighting the need for young people to have a meaningful role in shaping the Post-2015 Development agenda. Co-hosted by UNFPA and the Ford Foundation, the event provided space for dialogue between young people and policymakers in a fun and youthful environment and was attended by more than 1,000 young people. This was part of a month of festivities for World Population Day, which focused attention on youth empowerment in Indonesia.

More than 1,500 stakeholders in youth issues from across Indonesia gathered together for the Youthnesian 2014 event, co-hosted by UNFPA and the Ford Foundation, on 9 August, to share their ideas and discuss the challenges and opportunities to invest in Indonesia's youth.



## Icha's story

At the age of 25, Yurdhina Meilissa, better known to her friends as Icha, quit her job as a clinical doctor in Jakarta and took off to a remote district in Central Sulawesi to serve in a community health care center for a year. The experience there changed her life. In the village of Ogotua in North Dampal district, Icha saw firsthand the disparity between health facilities in the capital and those in the further reaches of the archipelago. She saw the lack of knowledge about personal hygiene and sanitation, and limitations in access to services due to poor infrastructure and understaffing, and realized the need for improving basic health information and services. On returning to Jakarta, Icha had to explain to her mother her decision to leave a comfortable career in clinical practice, which she had trained so long for, to dedicate her life to public health. “Privileged young people must become a bridge for the rest,” she said of her decision. Icha's story was just one of the inspiring messages presented at “Youth Blast: Young Leaders Driving Social Change”, an event hosted by UNFPA Indonesia on 28 November 2014.



### Adolescent sexual and reproductive health (ASRH)

Supporting the Government of Indonesia to uphold the rights of young people is a core aim for UNFPA, especially by ensuring that young people have access to ASRH information and services. This enables them to make smart decisions about their sexual and reproductive health, reducing their risk of unwanted pregnancy, transmission of HIV and other STIs, and unsafe pregnancy.

In 2014, UNFPA provided technical assistance to the Ministry of Health (MOH) to include sexual and reproductive health in the National Action Plan on School Aged Child and Adolescent Health. UNFPA also supported the MOH to develop National Reference Material for teachers to deliver ASRH education that aligns with international standards. Increased

access to ASRH information and services will positively impact on the health of Indonesia's young people. It will also accelerate Indonesia's achievement of the MDGs by reducing maternal deaths that are associated with young people having unsafe abortions.

#### UNALA

UNALA was launched by HRH GKR Pembayun, Princess of the Sultanate of Yogyakarta on 15 July 2015. UNALA is an innovative scheme to engage private practitioners in the delivery of youth-friendly services that was developed by UNFPA and the Angsamerah foundation.

UNALA, meaning '*your ability to make decisions*', aims to empower young people to take control of their physical and mental health, including their sexual and reproductive health. It enables young people to access health information

and services, including ASRH, in a safe environment that is free from discrimination and judgment. Engaging young people in the delivery of the scheme, youth networks in Yogyakarta will take the lead in generating demand for services and gaining community support for the programme.

UNALA is being piloted in Yogyakarta with strong local support. If successful, it will be replicated in other provinces across Indonesia. Knowledge gained through the implementation of UNALA will lay the foundations of future efforts by the Government of Indonesia to improve ASRH programming.



“Young people need to be actively engaged in an innovative way to ensure the fulfillment of youth-friendly health services and information. Every Indonesian has the right to receive quality health care.”

— Dr. Nafsiah Mboi,  
Minister of Health (2012-2014).

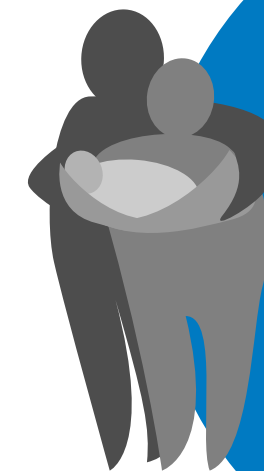


UNFPA, the Angsamerah Foundation and HRH GKR Pembayun at the launch of UNALA, a new initiative that uses a social franchising approach to provide youth-friendly ASRH services to young people in Bantul and Yogyakarta.

### Promoting youth participation

Empowering youth goes beyond making policies to overcome youth issues. It is about allowing young people to be part of the decision making process, enabling them to become strong citizens and future leaders. Through the Youth Advisory Panel (YAP), UNFPA in Indonesia supports youth engagement in UNFPA programming. The YAP is comprised of 12-15 outstanding young Indonesians, ensuring youth-friendly approaches and promoting youth leadership on population issues.

On a global scale, UNFPA supports youth participation in the decisions that affect them. UNFPA works to amplify youth voices in defining the Post-2015 Development Agenda, ensuring that young people have a say in the development framework that will define their futures.



There are  
**48**  
births per every 1000 girls aged  
between 15 and 19 each year

Every year, nearly  
**half a  
million**  
teenagers give birth in  
Indonesia



UNFPA Indonesia's Youth Advisory Panel (YAP) team members are active youth advocates making positive contributions to their communities.



# Population data: because everyone counts

Information about a country's population underpins the development of smart policies and plans to shape its future. Knowledge of where people live, what services they need and how those needs may change is fundamental to effective development planning. Understanding a country's major demographic trends – such as population growth, ageing, urbanization and migration – is vital for sustainable development. It enables governments to take into account to needs of those alive today as well as future generations.

In 2014, UNFPA continued its strong strategic partnership with the Government of Indonesia to enhance the supply and use of quality population data, including during an emergency. This will support progressive policies to alleviate poverty, reduce inequity, increase resilience to disasters and improve the lives of Indonesia's people.

## Indonesia Population Projection 2010-2035

29 January 2014 marked the launch of the *Indonesia Population projection 2010-2035*, hosted by former President Susilo Bambang Yudhoyono. Based on data from the 2010 Population Census, the projection gives a picture of the size and composition of Indonesia's future population at national and provincial levels. Produced through collaboration between UNFPA, BPS-Statistics Indonesia and the National Planning and Development Agency (Bappenas), the population projection is essential to effective development planning in Indonesia and provides a powerful adjunct to national medium- and long-term development plans.

In his remarks at the launch of the Population Projection, former President Yudhoyono emphasized the need to improve the lives of each individual to enhance the Indonesian population as a whole. Increasing standards of living through education and health outcomes can attain this, but the development plan to do so must be based on relevant data.

Providing public access to the population projection data in a user-friendly format enhances its availability to a wide range of users. Following on from the release of the projection data, UNFPA has instigated efforts to improve the timely release of future population projections and other statistical activities.

## 2015 Inter-censal Population Survey (SUPAS): supporting new data

As well as improving the use of existing data, UNFPA supports the collection of new data that is relevant to policy development. In 2014, UNFPA provided technical assistance to BPS to develop the 2015 Inter-censal Population Survey (SUPAS). The SUPAS will fill the gap in population information between the 2010 and 2020 censuses to enable monitoring of demographic trends and key social indicators, such as maternal mortality ratio.



“The availability of population data is a prerequisite of quality development planning. The population data can be used for planning of development in various fields, such as education, health, family planning, labor, provision of food, shelter, and others.”

— Dr. Armida Salsiah Alisjahbana,  
Minister of Bappenas (2009-2014).



UNFPA together with BPS Statistics Indonesia completed a disability data collection module in 2014. The UN Partnership to Promote the Rights of Persons with Disabilities (UNPRPD) provided funding support.

## Disability data

UNFPA collaborated with BPS to complete a new module for disability data collection in 2014, with funding support through the UN Partnership to Promote the Rights of Persons with Disabilities (UNPRPD). Having accurate data is a first step to raise awareness, promote disability rights and take meaningful action to improve the lives of disabled persons in Indonesia.

## Violence against women survey

Having accurate data on GBV provides a foundation for ending this harmful practice. In 2014, UNFPA in collaboration with MOWCP and BPS, continued work to finalize the development of a violence against women (VAW) survey in Indonesia. UNFPA supported preliminary testing of the survey in one province and continued advocacy for resource mobilization.

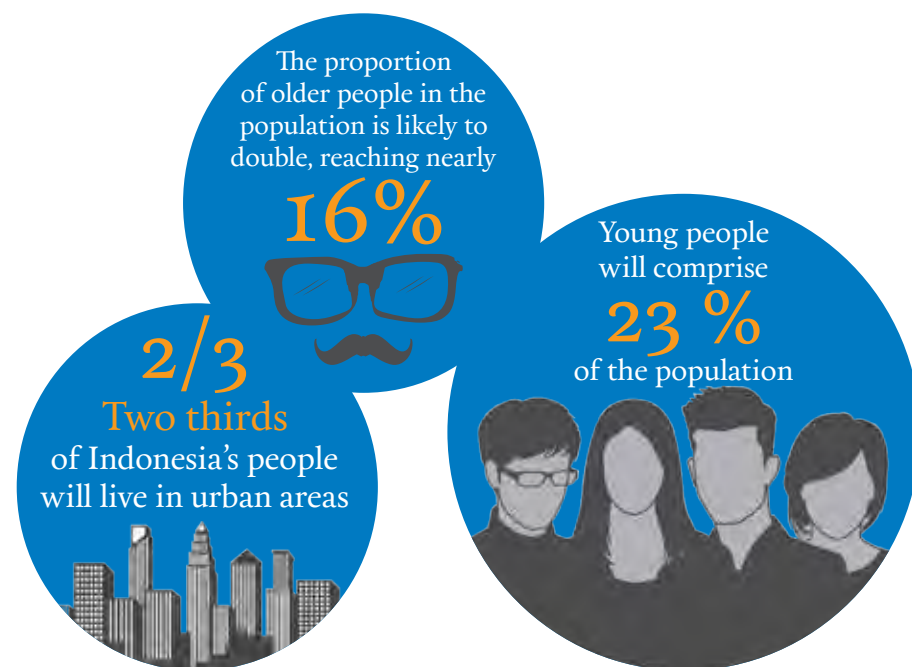




### Extending the use of existing population data

Realizing the importance of population data for development planning, the Government of Indonesia has made considerable investments to perform population census and other major surveys. The 2010 Population Census provides unrivaled information on Indonesia's population and extending the use of census and other survey data is a priority for UNFPA. In 2014, UNFPA supported BPS to develop a contemporary set of National Life Tables for Indonesia based on the 2010 Population Census.

In 2014, UNFPA continued efforts to develop and implement Census-Based District Information Systems (CBDIS). This activity aims to build the capacity of district authorities to access and utilize available data, enabling them to identify and address issues of concern for their governments.



### Population data in a disaster

Indonesia is highly prone to natural disasters. In 2014 alone, two million people in Indonesia were affected by 1,559 disaster events. It is a high priority for the Government of Indonesia to reduce the impact of disasters on its people. To do so requires comprehensive disaster risk reduction strategies to improve disaster preparedness and response. Ensuring that solid population data underpins disaster management efforts will improve their effectiveness and save lives.

In partnership with National Disaster Management Agency (BNPB) and BPS, UNFPA enhances the integration of population data within the Indonesian Disaster Information and Data (DIBI) system that supports humanitarian

efforts. This provides BNPB and other users with vital information to identify total and vulnerable populations in disaster-prone areas. The data system can be accessed at <http://dibi.bnpb.go.id/data-kependudukan>

In 2014, the DIBI baseline data system was further enhanced using data from the 2010-2035 Population Projection. The DIBI system was equipped with provincial infographics that provide a rapid and precise overview of the population characteristics at province level to assist policy makers in the disaster risk reduction planning process. UNFPA also supported the development of modules for population data mapping. Through collaboration between BNPB, the Ministry of Home Affairs and the

Ministry of Health, UNFPA is exploring future options for the integration of data from the Civil Registration and Vital Statistics and the health sector to further improve the DIBI system.

Another collaboration between BNPB and BPS that was supported by UNFPA in 2014 was the development and use of data collection via mobile applications, also known as Computer Assisted Personal Interviewing (CAPI). CAPI was developed through an open-source Android-based programme, called 'Kobo Collect', enabling easy access to collect data during an emergency. Data can be collected on survivors, damage and urgent needs during a disaster, providing vital information to support disaster relief operations.

### Publications

During 2014, a *Provincial Infographic* was developed through intensive multi-stakeholder cooperation between BNPB, BPS, UNFPA, UNOCHA, WFP and UNDP.

The publication contains maps and graphics for each of Indonesia's provinces, providing fast and reliable information on population, food security, livelihoods, education, health, water and sanitation, and disaster management. This will support disaster risk reduction strategies and enhance Indonesia's disaster response.

*National Guidelines on the Use of Population Data in Disaster Management* is an up-to-date handbook produced by UNFPA, BNPB and BPS in 2014, providing

technical guidance on the use of population data in all phases of disaster management. The guidelines will support BNPB and other humanitarian actors to better acquire, process and utilize population data in disaster management.

“  
The DIBI system is able to integrate disaster data and population data, and is used to support decision-making for disaster management.  
”

Sutopo Purwo Nugroho, Head of Data, Information and Public Relations at BNPB.

*Indonesia: Province Infographic* provides vital demographic data from 33 provinces to support disaster management and risk reduction.



UNFPA Indonesia together with the National Disaster Management Agency (BNPB), BPS Statistics Indonesia and UN-OCHA, hosted a launch for two new publications developed in collaboration with the Government of Indonesia - “Provincial Infographics” and the “National Guidelines on the Use of Population Data in Disaster Management” on 27 November 2014.

Financial Information

Budget in 2014	Core funds	Other funds	Total
Programme Cooperation and Assistance	157,502	-	157,502
Population dynamics	952,770	-	952,770
Advocating ICPD and SSC	659,692	-	659,692
Reproductive Health	441,885	-	441,885
RH in emergency settings	356,499	-	356,499
Family planning	485,414	-	485,414
HIV	300,203	60,074 <sup>1</sup>	360,277
Gender equality	493,797	47,723 <sup>2</sup>	541,520
Youth	511,233	-	511,233
Population data	397,351	-	397,351
Total	4,756,346	107,797	4,864,143

<sup>1</sup> Unified Budget, Results and Accountability Framework (UBRAF) <sup>2</sup> UNPRPD

Important statistics for Indonesia

Monitoring ICPD goals: selected indicators <sup>3</sup>		
Maternal and Newborn Health	2007	2012
Maternal mortality ratio (MMR) (deaths per 100,000 live births)	228	359
Births attended by skilled health personal	73%	73%
birth rate (per 1,000 women age 15-19)	51	48
Under age five mortality rate (per 1,000 live births)	44	40
Sexual and Reproductive Health	2007	2012
Contraceptive prevalence rate (CPR), any method (women aged 15-49)	61.4%	61.9%
Contraceptive prevalence rate, modern method (women aged 15-49)	57.4%	57.9%
Unmet need for family planning	13.1%	11.4%

		2000		2010									
Education (net school enrolment) <sup>4</sup>		male	female	male	female								
Primary school		92.13%	92.45%	94.82%	94.69%								
Junior high school		59.06%	61.56%	67.08%	68.43%								
Senior high school		59.06%	40.07%	46.48%	44.65%								
Tertiary school		8.38%	7.53%	10.89%	11.12%								
Gender equality statistics (MDG targets)		1990		2013		2014							
Share of women in wage employment in the nonagricultural sector		29.24% <sup>5</sup>		35.1% <sup>6</sup>		-							
Proportion of seats held by women in national parliament <sup>7</sup>		12.50%		-		17.3 %							
HIV statistics		2007		2012									
Prevalence of HIV <sup>8</sup>		0.2%		0.4%									
Knowledge of HIV <sup>9</sup>	Women aged 15-49 years	61%		77%									
	Married men aged 15-54 years	71%		82%									
Indonesia's Demographic Indicators <sup>10</sup>		2000		2010		2035 <sup>11</sup>							
Total population (in millions)		201.24		237.6		305.65							
Per cent population adolescents (10-19 years)		20.7%		18%		15.5%							
Per cent population young people (10-24 years)		30%		27.1%		22.8%							
Per cent population working age (15-64 years)		65%		66.5%		67.9%							
Per cent population aged 60+ years		7.2%		7.6%		15.8%							
Per cent urban population		42.4%		49.4%		66.6%							
		2000		2007		2010		2012		1990-2000		2000-2010	
Population growth <sup>12</sup>		-		-		-		-		1.49 %		1.49%	
Life expectancy at birth <sup>13</sup> (years)		male 63.4	female 65.5	-		male 67.9	female 71.8	-		-		-	
Total fertility rate		2.3 <sup>14</sup>		2.6 <sup>15</sup>		2.4 <sup>16</sup>		2.6 <sup>17</sup>		-		-	

<sup>3</sup> 2007/2012 Indonesian Demographic Health Survey (IDHS)

<sup>4</sup> 2000/2010 Population Census

<sup>5</sup> The National Socioeconomic Survey (SUSENAS)

<sup>6</sup> The National Labour Force Survey (SAKERNAS) BPS

<sup>7</sup> Komisi Pemilihan Umum (KPU)

<sup>8</sup> UNAIDS report 2013

<sup>9</sup> 2007/2012 IDHS

<sup>10</sup> 2000/2010 SUSENAS (unless otherwise indicated)

<sup>11</sup> 2010-2035 Indonesian Population Projection

<sup>12</sup> 2000/2010 Population Census

<sup>13</sup> 2000/2010 Population Census

<sup>14</sup> 2000 Population Census

<sup>15</sup> 2007 IDHS

<sup>16</sup> 2010 Population Census

<sup>17</sup> 2012 IDHS



# Acronyms

ASRH	Adolescent Sexual and Reproductive Health
Bappenas	Badan Perencanaan dan Pembangunan Nasional – National Planning and Development Agency
BKKBN	Badan Koordinasi Keluarga Berencana Nasional – National Family Planning Coordination Board
BNPB	Badan Nasional Penanggulangan Bencana – National Disaster Management Agency
BPS	Badan Pusat Statistik – Statistics Indonesia
CP8	Eighth Country Programme
DIBI	Indonesian Disaster Information and Data
DNPI	National Council on Climate Change
EmOC	Emergency Obstetric Care
FP	Family Planning
GBV	Gender-based Violence
IANYD	Inter-Agency Network on Youth Development
IBI	Indonesian Midwives Association
ICPD	International Conference of Population and Development
IDPs	Internally Displaced Persons
KAP	Key Affected Population
MMR	Maternal Mortality Ratio
MDGs	Millennium Development Goals
MISP	Minimum Initial Service Package
MOH	Ministry of Health
MOSA	Ministry of Social Affairs
MOWECP	Ministry of Women’s Empowerment and Child Protection
MOYS	Ministry of Youth and Sports
NAC	National AIDS Commission
NCVAW	National Commission on Violence Against Women

NGOs	Non-Government Organizations
OCHA	Office for the Coordination of Humanitarian Affairs
PDRT	Policy Dialogue Round Table
PMTS	Prevention Through Sexual Transmission
RH	Reproductive Health
RPJMN	Rancan Pembangunan Jangka Mememgah Nasional – National Medium-Term Development Plan
SRH	Sexual and Reproductive Health
SSC	South-South Cooperation
STI	Sexually Transmitted Infection
SWOP	State of the World Population
UN	United Nations
UNAIDS	Joint United Nations Programme on HIV/AIDS
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
UNPDF	United Nations Partnership for Development Framework
UNPRPD	United Nations Partnership to Promote the Rights of Persons with Disabilities
UNTFHS	United Nations Trust Fund for Human Security
UNTFVAW	United Nations Trust Fund for Violence Against Women
UHC	Universal Health Coverage
VAW	Violence Against Women
WFP	World Food Programme
WHO	World Health Organization
WPD	World Population Day
YAP	Youth Advisory Panel



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