World's population reaches 7,000,000,000 this year... Be part of it!
OVERVIEW:
Seven Billion People - Counting on Each Other
Message: This global milestone is both a great opportunity and a great challenge.

POVERTY AND INEQUALITY:
Breaking the Cycle
Message: Reducing poverty and inequality also slows population growth.

WOMEN AND GIRLS:
Empowerment and Progress
Message: Unleashing the power of women and girls will accelerate progress on all fronts.

YOUNG PEOPLE:
Forging the Future
Message: Energetic and open to new technologies, history’s largest and most interconnected population of young people is transforming global politics and culture.
REPRODUCTIVE HEALTH AND RIGHTS:
The Facts of Life
**Message:** Ensuring that every child is wanted and every childbirth safe leads to smaller and stronger families.

ENVIROMENT:
Healthy Planet, Healthy People
**Message:** All 7 billion of us, and those who will follow, depend on the health of our planet.

AGEING:
An Unprecedented Challenge
**Message:** Lower fertility and longer lives add up to a new challenge worldwide: ageing populations.

URBANIZATION:
Planning for Growth
**Message:** The next two billion people will live in cities, so we need to plan for them now.
In October 2011, Earth’s population reaches 7 billion. This global milestone is both a great opportunity and a great challenge. Although people are living longer and healthier lives, and couples worldwide are choosing to have fewer children, huge inequities persist.

The current pace of growth is adding about 78 million more people every year—the population of Canada, Australia, Greece and Portugal combined.[1]

Nearly all that growth—97 of every 100 people—is occurring in less developed countries, some of which already struggle to meet their people’s needs. Gaps between rich and poor are growing. And more people than ever are vulnerable to food insecurity, water shortages, and weather-related disasters. Meanwhile, many rich and middle-income countries are concerned about low fertility, declining populations and ageing.

Whether we can live together on a healthy planet will depend on the decisions we make now. In a world of 7 billion people and counting, we need to count on each other.

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
</tr>
</thead>
<tbody>
<tr>
<td>1804</td>
<td>World population reached 1 billion</td>
</tr>
<tr>
<td>1927</td>
<td>2 billion (123 years later)</td>
</tr>
<tr>
<td>1959</td>
<td>3 billion (32 years later)</td>
</tr>
<tr>
<td>1974</td>
<td>4 billion (15 years later)</td>
</tr>
<tr>
<td>1987</td>
<td>5 billion (13 years later)</td>
</tr>
<tr>
<td>1999</td>
<td>6 billion (12 years later)</td>
</tr>
<tr>
<td>2011</td>
<td>7 billion (12 years later)</td>
</tr>
<tr>
<td>2025</td>
<td>8 billion (14 years later)</td>
</tr>
<tr>
<td>2043</td>
<td>9 billion (18 years later)</td>
</tr>
<tr>
<td>2083</td>
<td>10 billion? (40 years later)?</td>
</tr>
</tbody>
</table>

The rate of increase appears to be slowing. But the large number of people now in their reproductive years, 3.7 billion,[12] means world population will keep growing for several more decades.

The date we reach the next billion—and the ones after that—depends on policy and funding decisions made now about maternal and child health care, access to family planning, girls’ education, and expanded opportunities for women.
THE TRENDS

- Average life expectancy worldwide has increased by 20 years since 1950, from 48 to 69 years today.[4] Meanwhile, the death rate has steadily declined, as medical breakthroughs and access to sanitation and health care have saved millions of lives.
- The world total fertility rate has declined by nearly half in 50 years (from 5 children per woman in 1950 to 2.5 in 2010-15, with wide country variations). If current trends continue, human kind will number just over 9 billion by 2050 and more than 10 billion by the end of the century.[5]
- Global rates mask wide disparity among countries. Japan, most European nations, Singapore and Russia have fertility rates of 1.5 children per woman or lower, while rates are 5.0 or higher in Afghanistan and many African countries.[6] If such differences continue, they could bring significant change to the world.
- Fertility levels matter. For example, Germany at 82 million people and Ethiopia with 83 million are now similar in population size. But Germany’s fertility rate is 1.4 children per woman and Ethiopia’s is 4.6. By 2050, Germany’s population will likely decline to 75 million while Ethiopia’s will nearly double, to 145 million.[7]

NEW FACTORS IN THE NEW CENTURY

Economic, political and environmental factors are changing the way populations grow and shift. Since October 1999, when world population reached 6 billion:

- The communications revolution has spread worldwide. Cell phone technology and social media have created instant worldwide news and views from the grassroots. Internet commerce has changed global consumption, migration and trade patterns.
- China has transformed itself into a dominant factor in every global demographic, economic and environmental equation.
- September 11, 2001, altered the U.S. role in the world and reshuffled global politics, conflict zones and the resulting migration trends.
- The Millennium Development Goals established ending poverty as world leaders’ top development priority, with women’s reproductive health as key.
- The global economic downturn of 2008-10 raised food prices, undermined developing countries’ prospects and slowed the flow of international assistance.
- Donor assistance for family planning has stagnated at US$400 million per year worldwide, after peaking in 2002 at $700 million.[8]
- HIV/AIDS has become a treatable chronic illness for those with access to the necessary drugs and medical care. For millions in poor countries, the pandemic continues to spread, and HIV/AIDS remains a certain death sentence.
- Climate change has become a much more certain prospect, with its attendant impacts on every aspect of life in every country.


While global trends point to poverty reduction, wide gaps persist between and within countries. In the poorest countries, extreme poverty, food insecurity, inequality, high death rates and high birth rates are linked in a vicious cycle. Reducing poverty by investing in health and education, especially for women and girls, can break this cycle.

As living conditions improve, parents can feel more confident that most of their children will survive. Many then choose to have smaller families. This takes pressure off families and governments, allowing greater investment in each child’s health care and education, improved productivity and better long-term prospects – for the family and for the country.

Longer spacing between pregnancies improves the health of mothers and children, with long-lasting benefits to their families and communities. Women have more options to work, to earn more money, and to spend and save more.

Smaller families can give their countries a “demographic dividend,” which is a spurt in productivity, wealth and economic growth that results when populations have a large number of working-age people with relatively fewer dependents. Reducing poverty and inequality in developing countries is also the best way to reduce migration.

Educating girls and women and expanding their access to credit, training, property ownership and legal rights gives them options for their lives beyond childbearing and expands their economic potential.

**THE GLOBAL SITUATION**

- Studies show that about a third of East Asia’s major economic growth between 1965 and 1990 was due to the “demographic dividend,” the productivity spurt that followed government investment in health and education, especially for women.
Family size declined and the working-age population rose in relation to the number of dependents.

- The world’s poorest countries are those that discriminate most against women, sidelining half the population’s productivity. In descending order, the bottom 10 countries on the UN’s rankings for gender equality are Cameroon, Cote d’Ivoire, Liberia, Central African Republic, Papua New Guinea, Afghanistan, Mali, Niger, the Democratic Republic of the Congo and Yemen.2
- Children in rural areas are nearly twice as likely to be underweight as urban children.
- The many dimensions of poverty are worst in South Asia. The 26 poorest African countries together have 410 million people, but eight states in India alone have 421 million people who are just as poor.3

THE INDONESIA SITUATION

- One of Indonesia’s success stories has been the implementation of its Family Planning Program, which started in the 1970s and has brought significant structural changes in family size. Today Indonesia is beginning to reap the benefits of the demographic dividend, as the working age portion of the population increases. If all the people of working age could be absorbed into the labour market with decent jobs, then the level of earnings in per capita terms would have increased in Indonesia.

- Indonesia has made significant progress during the last two decades in improving nutritional status, as indicated by the decline of malnutrition prevalence among children under 5 from 31 per cent in 1989. In 2009 15.9 percent of children under age 5 in urban areas suffered from severe malnutrition; in rural areas the figure was 20.4 percent.5

THE GLOBAL TRENDS

- The number of people living in extreme poverty on US$1.25 per day or less declined from 1.8 billion in 1990 to 1.4 billion in 2005. In developing regions it dropped from 46 per cent of the population to 27 per cent in that period.
- About one in four children under age 5 was underweight in 2005 in the developing world. That’s down from almost one in three in 1990, with particular success in China.
- The proportion of hungry people has fallen since 1990, and most of that success came in Asia (especially East Asia). But population growth means the absolute number of the hungry has increased – from 815 million to 925 million.
- Many families in the poorest countries already spend more than half of their income on food. Since June 2010, another 44 million people were pushed below the poverty line of $1.25 a day as a result of higher food prices.6
- In East Asia, the poverty rate has fallen since 1990 from nearly 60 per cent to under 20 per cent. But little progress was made in sub-Saharan Africa, where the rate fell only from 58 per cent to 51 per cent.
- The global economic crisis of 2008-2010 was expected to push another 64 million people into extreme poverty, mostly in sub-Saharan Africa and Eastern and Southeastern Asia.
- Wealth disparities are increasing. In 1960, the richest 20 per cent of humanity claimed 70 per cent of all income. In 2005, the World Bank found that the share for the richest 20 per cent had risen to 77 per cent. Meanwhile the poorest fifth saw their share fall from 2.3 per cent in 1960 to just 1.5 per cent in 2005.7
- Climate change may derail anti-poverty efforts in many ways, especially by ravaging crop yields through drought, floods and storms. Another 25 million children could be malnourished by 2050, mostly in South Asia.8
THE INDONESIA TRENDS

- The percentage of poor people in Indonesia decreased from 15.1 percent in 1990 to 13.3 percent in 2010. However, this also means that there are still a total of 31 million people living in extreme poverty on less than $1 per day, which is larger than the figure for 1990 of 27.2 million people.9

- Most poor people live in rural areas. From the 31 million people who fell below the poverty line in 2010, 64.3 percent lived in rural areas and 35.7 percent lived in urban areas. Among the provinces, Papua Province had the highest percentage of poor people in 2010, at 36.8 percent.10

- The proportion of hungry people has fallen. In 2009, 14.47 percent of the people consumed less than 1400 calories per capita per day; in 1990 that same figure was 17 percent.11

- By 2010 only 4.9 percent of children under the age of five suffered from severe malnutrition, a decrease when compared to previous years.12

![Prevalence of Malnutrition among Children Under Five, 1989-2010](image)


- External economic factors have sent many people back below the poverty line and could do so again in future. For example, before the financial crisis in the region in 1996, there were 22.5 million poor people, 13.3 percent. By the end of 1998, the number of poor people in Indonesia rose sharply to 49.5 million, 24.2 percent of the population.13

![Total and Percentage of Poor People in Indonesia, 1976-2010](image)

The figure below shows that there has been no direct link between economic and population growth rates since 1990. During the economic crisis, economic growth experienced a sharp decline of minus 13.3 per cent while population growth remained low at 1.45 per cent.14

Annual Economic and Population Growth Rates, 1990-2009


---

2 United Nations Development Programme, ibid., p. 93
5 Ibid.
6 The World Bank, “Food Prices Hike Drives 44 Million People Into Poverty”, press release 2/16/2011, Washington DC:
8 United Nations Development Programme, op. cit., p. 102
10 Ibid.
11 Achievement Report Millennium Development Goals in Indonesia, op. cit.
12 Achievement Report Millennium Development Goals in Indonesia, op. cit.
13 Ibid.
15 Trends of the Selected Socio Economic Indicators of Indonesia op.cit.
In a world of 7 billion, every person should enjoy equal rights and dignity. We cannot afford to lose the full potential of half the world’s population.

Investing in women and girls is cost-effective and essential to solving the world’s most challenging problems. When women are healthy and educated and can participate fully in society, they trigger progress in their families, communities and nations.

Yet women continue to face widespread discrimination and violence. They lag behind men in access to land, credit and decent jobs, and hold far fewer policy-making roles. Their social roles are often justified by culture or religion, but not biologically determined. These are societal arrangements which vary widely by locality and change constantly.

Advancing women’s education, reproductive health and rights will enhance their well-being and productivity, improving prospects for current and future generations.

Most of the money women earn is spent on their families’ food, education and health care. Thus, investing in girls and women gives multiple returns: it boosts national security by strengthening families, which promotes economic growth and community peace and stability.

THE GLOBAL SITUATION

- In 1979, the United Nations approved the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), a landmark treaty that offers a practical blueprint for achieving human rights and equality for women around the world.
- Laws and customs often deny women and girls the right to go to school, own land, inherit property, get credit, receive training or move up in their field of work. Laws...
against domestic violence are often unenforced. Achieving gender equality will therefore require the support of men, who exercise most of the power in these areas.  
- Of the world’s 776 million illiterate adults, two-thirds are women.¹
- Women perform some two-thirds of the world’s work and produce half of all food, but they earn only 10 per cent of the world’s income and own 1 per cent of the property.²
- More than 134 million women are “missing” worldwide – because of a preference for boy babies that leads to sex-selective abortions and neglect of infant girls.³
- In sub-Saharan Africa, girls and women age 15-24 are twice as likely as men their age to become infected with HIV, in part because of economic and social vulnerability.⁴
- Despite increasing coverage, HIV antiretroviral drugs reach only half of women in need.⁵
- Up to 70 per cent of women experience violence in their lifetimes.⁶ Gender-based violence kills or disables as many women age 15-44 as cancer does.⁷
- More than 101 million primary school age children are not attending school, and more than half of them are girls.⁸
- Poor reproductive health is the leading cause of death and disability among women 15-49 in developing countries.⁹
- More than 350,000 women die each year – one every 90 seconds – from complications of pregnancy or childbirth. Nearly all these deaths (99 per cent) are in developing countries.¹⁰

THE INDOONESIAN SITUATION

- The sex ratio at birth in Indonesia is within normal range. In 200, 103 baby boys were born for every 100 baby girls. The myth that Indonesia has more women than men is just that. General population estimates from 2010 put the number of women at 119,956,522, the number of men at 121,438,894.¹¹ ¹²
- Early marriage is still a practice in Indonesia: 31.6 percent of women age 20-49 said they were married by age 18 and 9.3% said they were married by age 15.¹³
- The number of reported cases of violence against women has increased five times over, from 20,391 in 2005 to 105,103 in 2010. Two out of three violent incidents arise from conflicts at home indicating a high prevalence of violence against women.¹⁴
- Thirty-one of every 1,000 women has experienced violence. Married women have experience the highest proportion of violence compared to single and divorced women, no matter where they live. Physical violence is the most frequent type of violence that occurs.¹⁵
- Ration of Women to Men for Key Indicators about Work, Indonesia (2010)

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Women to Men</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number participating in the labour force</td>
<td>61 to 100</td>
</tr>
<tr>
<td>Portion of wages earned for similar work</td>
<td>70 to 100</td>
</tr>
<tr>
<td>Estimated earned income (PPP) US$</td>
<td>44 to 100</td>
</tr>
<tr>
<td>Legislators and senior officials managers</td>
<td>27 to 100</td>
</tr>
<tr>
<td>Professional and technical workers</td>
<td>64 to 100</td>
</tr>
</tbody>
</table>


- For every 10 men there are 6 women participating in the labour force. For similar work, women are paid 30 per cent less than men.
- The economic participation and opportunity gap between women and men remains high. One in three economically active individuals is a woman.¹⁶

THE GLOBAL TRENDS

- The 186 countries that have ratified CEDAW report every four years on their progress for women and girls. The treaty has been a guide for success in reducing sex trafficking and domestic abuse, providing access to education and vocational training, ensuring the right to vote, improving maternal health care, ending forced marriage and child marriage, and ensuring inheritance rights, among other benefits worldwide.
- Nearly all maternal deaths are preventable with cost-effective measures developed countries take for granted, such as access to basic and emergency health care before, during and immediately after delivery.
- Providing women with a full package of family planning and maternal and newborn care would reduce productivity losses related to pregnancy and premature death by 66 per cent.¹⁷
- Stereotyping of gender roles and gender-based discrimination begins in childhood, so efforts
to support gender equality must start there, by addressing the roles of girls and boys and men and women in the household.

THE INDONESIAN TRENDS

The number of women participating in the labour force has increased, but the percentage of women working 35 hours or more is lower than men. Women are still doubly burdened by their work in and out of the household.18

<table>
<thead>
<tr>
<th>Percentage of People Age 15 Who Worked during the Previous Week, by Gender and by Working Hours, 2005-2007</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working Hours</td>
</tr>
<tr>
<td>----------------</td>
</tr>
<tr>
<td>1-34</td>
</tr>
<tr>
<td>15-24</td>
</tr>
<tr>
<td>25-34</td>
</tr>
<tr>
<td>35+</td>
</tr>
<tr>
<td>55+</td>
</tr>
</tbody>
</table>

Source: Women and Men in Indonesia 2008, 2009; Statistics Indonesia and UNFPA

EMPOWERMENT

The adult illiteracy rate in Indonesia in 2009 was 7.42 per cent. The illiteracy rate among adult women is higher at 10.32 per cent.19

The average number of years of schooling for women has increased from 7.1 in 2008 to 7.3 years in 2009. This figure is, however, a full year lower than the same figure for men.20

<table>
<thead>
<tr>
<th>Gender Parity Index by Education Level, Indonesia</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level of education</td>
</tr>
<tr>
<td>-------------------</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>Primary</td>
</tr>
<tr>
<td>Junior high</td>
</tr>
<tr>
<td>Senior high</td>
</tr>
<tr>
<td>Higher education</td>
</tr>
</tbody>
</table>


The gap between girls and boys in school increases the higher the educational level.21

Women have also been elected to the house of representatives. For every 100 representatives in 2009, there were 18 women. This number is a 5 percent increase since the previous election in 2005.22

HIV/AIDS

In 2006 an estimated 193,000 adult Indonesians were living with HIV, 21 per cent of whom were women. By 2009, the estimate of people living with HIV had risen to 332,200, 25 per cent of whom were women. These figures show a feminization of the epidemic in Indonesia.23 By 2010, 26.6 per cent of HIV cases in Indonesia were women.24

The most at risk segment of the population are female sex workers, female injection drug users and spouses of high risk men. This high risk group includes 6 million people.25

The data on prevalence of mother to child HIV transmission is still limited, but the number of HIV positive pregnant women is increasing. It is projected that the number of HIV positive women needing transmission prevention (PMTCT) services will increase from 5,730 women in 2010 to 8,170 women in 2014.26

The number of people in general who have adequate knowledge of HIV/AIDS is still low and the knowledge among women is inadequate. Most married women surveyed (61 per cent) said that they had never heard of AIDS. And only 9.1 per cent of married women had comprehensive knowledge of AIDS. Further information is still needed due to the lack of correct information about AIDS.27

Of the population infected with HIV, only 38.4 per cent have access to antiretroviral drugs. Among those with access to antiretroviral drugs in 2009, half were women (49 per cent). This is a slight increase since 2006, when the proportion was 44 per cent. Lack of knowledge or access to antiretroviral drugs must be improved to prevent further growth of the HIV/AIDS epidemic.28

GIVING BIRTH SAFELY

Maternal mortality has decreased slowly since 2003. There are 228 maternal deaths for every 100,000 live births. Nevertheless Indonesia ranks high among Southeast Asian countries for maternal mortality.29,30 For every 100 women, 11 have pregnancies with complications.31
In 2005, 28 of every 100 deliveries were not assisted by health professionals, but in 2009 this proportion decreased to only 16 per cent.\(^\text{32}\)

---

4. UNFPA and UNICEF, op cit., p. 12
7. UNFPA and UNICEF, op cit., p. 12
8. UNFPA and UNICEF, op cit., p. 18
13. Indonesia Demographic and Health Survey. 2007.
20. Ibid.
27. Indonesia Demographic and Health Survey. 2007. USAID, Statistics Indonesia, Ministry of National Development Planning, Health Department
29. Indonesia Demographic and Health Survey, op cit.
31. Indonesia Demographic and Health Survey, op cit.
32. Indonesia Demographic and Health Survey, op cit.
People under 25 make up 43 per cent of the world’s population, but the percentage reaches 60 per cent in the least-developed countries. As parents and teachers of the next generation, their choices will determine future population trends. Investing in young people creates a pathway for accelerated development.

When young people can claim their right to health, education and decent working conditions, they become a powerful force for economic development and positive change.

Investing in adolescent girls is one of the smartest investments a country can make. With health, education and opportunities, girls and women can contribute fully to their societies and help break the cycle of poverty.

THE GLOBAL SITUATION

GENERAL DESCRIPTION

- More than 1.2 billion people are adolescents age 10-19, the parents of the next generation, and 88 per cent of those teens live in developing countries.²
- Of the world’s 620 million young people in the labour force, fully 81 million, or 13 per cent, were out of work at the end of 2009, the highest number ever. That rate is three times higher than the average adult unemployment rate worldwide.³
- Millions of young people live on their own or on the streets. Programs of sex education, peer mentoring and reproductive health services can reach them through special messengers: soap operas, comic books, posters, magazines, dramas and music videos.
About 40 per cent of new HIV infections are among young people age 15-24. In this age group, only 40 per cent of men and 38 per cent of women have accurate knowledge about HIV transmission.¹

GENDER DIVIDE

Girls are more than half of the 143 million young people who are out of school.⁵

Girls’ primary school enrollment rates are high worldwide, approaching those of boys, but their completion rates are below 50 per cent in most developing countries. In 19 African countries, fewer than 5 per cent of girls complete secondary school.⁶

Some 100-140 million girls and women have undergone female genital mutilation/cutting, and more than 3 million girls are at risk for the procedure in Africa alone.⁷

Girls are often the last family members to receive food and health care. Nutritional anemia affects an estimated half of all girls in developing countries. It stunts growth and increases the risk for miscarriage, obstructed labour and fistula, stillbirth, premature birth and maternal death.⁸

Worldwide, more than 50 million adolescent girls 15-19 are married, some with little understanding of reproduction. Most will not complete secondary education, and many will become pregnant before their bodies are mature enough to safely deliver a child.⁹

Every year, 16 million adolescent girls become mothers. Half live in just seven countries: Bangladesh, Brazil, Congo, Ethiopia, India, Nigeria and the United States.¹⁰

Complications of pregnancy and childbirth are the leading cause of death in Africa and South Asia among girls age 15-19.¹¹

THE INDONESIAN SITUATION

GENERAL DESCRIPTION

Investing in adolescent girls is one of the smartest investments a country can make. With health, education and opportunities, girls and women can contribute fully to their societies and help break the cycle of poverty.

The portion of young people age 15-24 when compared to the whole population has been increasing over the past 10 years, from 20 per cent in 2000 to 25 per cent in 2010. This demographic shift is increasing the demand for education, especially at affordable general and vocational schools.

Of Indonesia’s 21.7 million young people in the labour force, 4.8 million, or 22 per cent, were out of work in 2009. This number was considered very high, almost five times greater than the number of unemployed in the age 25 and above group.¹²

Although only 3 per cent of women and 1 per cent of men have comprehensive knowledge about HIV/AIDS, findings indicate that the vast majority of Indonesian youth know that an HIV-positive person does not necessarily show signs of infection: 72 per cent of women and 60 per cent of men age 15-24.

Young people tend to consume less than the minimum required energy or less than 70 per cent of recommended nutritional intake.

GENDER DIVIDE¹³

More young women than men are still in school, whereas more young men than women are working. About one-third (30.8 per cent) of single young women age 15-24 attended school in 2007, but only 23 per cent of young men did. Young men age 15-24 surveyed were more likely to indicate they were “working” than young women.

When the highest level of education attained was broken down by gender, those who completed lower levels of education (primary and below) were predominantly male. But 37.5 per cent of girls and young women had continued on to higher levels of education (secondary and above), compared to 30 per cent of boys and young men.

A greater portion of girls than boys selected the reason “enough schooling” to explain stopping their education: 15.8 per cent of the girls surveyed as compared to 10.9 per cent of the boys.

The proportion of young girls and women who read newspapers and watch television at least once a week was only slightly higher than that of boys and young men. More young men (44.6 per cent) than women (43.1 per cent) prefer to listen to the radio.

Indonesian 2010 Riskesdas found that 44.2 per cent of women age 15-19 who have married and 58.3 per cent of such women age 20-24 who have married use contraceptives.
Adolescents worldwide are generally healthier today than in the past, largely due to investments in early- and mid-childhood health care. Accidents cause a third of adolescent deaths, especially for boys, who are also more prone to violent deaths.\(^{14}\)

Many threats to young people from violence, abuse and exploitation are highest during adolescence: boys are forced to work as child soldiers, unpaid farmers or in hazardous jobs; girls are forced into sex, marriage or domestic labour.\(^ {15}\)

Involving young people in designing and running programmes aimed at helping them often leads to unique approaches, improving the projects’ success rate, while teaching the young people communication, negotiation and civic participation skills.\(^ {16}\)

A year of schooling for a girl reduces her children’s mortality rate by 5 to 10 per cent. With five years of school, her children are 40 per cent more likely to live past age 5.\(^ {17}\)

Each year of secondary schooling increases girls’ future wages by 10 per cent to 20 per cent, compared to the 5 per cent to 15 per cent return on an extra year of schooling for boys.\(^ {18}\)

Educated women are more likely to resist abuses such as domestic violence, traditions like female genital cutting and discrimination at home, in society or the workplace.\(^ {19}\) These changes transcend generations, resulting in better health for women, their children and eventually their grandchildren.

In 2007, UN agencies joined to form the UN Adolescent Girls Task Force to make girls a priority in national policies and promote investments in education, health care, data collection, prevention of violence and support for girls’ leadership development. By 2015 the Task Force will roll out comprehensive programmes in 20 developing countries. Work has already started in Ethiopia, Guatemala, Liberia, and Malawi.

The number of young people (15-24) active in the labour force has declined over the nine years from 2000 (54.8 per cent) to 2009 (50.3 per cent). Specifically, more young men are in the labour force than young women; participation in work has declined for both. If youth participation in education rises in the future as expected, their labour force participation is expected to decline at the same time.\(^ {20}\)

Despite the declining trend over nine years, the number of young people in the labour force increased in 2005. The unemployment rate among young women is higher than that of young men.

Infant mortality rates are higher when mothers give birth at younger ages. The rate was 56 per 1,000 live births when mothers under age 20 gave birth. The rate dropped significantly when birth occurred when the mothers were age 20-29 or age 30-39. The rates for the 20-29 and 30-34 age groups were 32 and 43 per 1,000 live births, respectively.\(^ {21}\)

Educated mothers are more likely to have lower infant and child mortality rates. Mothers who have senior high school or higher tend to have 67 per cent lower rate of infant mortality rate as compared to those who don’t have education at all.
1 United Nations Population Division, World Population Prospects, 2010,  
5 UNESCO Institute for Statistics, Out of School Adolescents, Montreal, Quebec, 2010, p. 12  
13 2007, Young Adult Reproductive Health Survey.  
15 UNICEF, The State of...ibid., p. 5  
19 UNICEF, The State of...ibid.  
20 Statistics Indonesia (BPS). Population Census and SAKERNAS.  

18
The worldwide trend toward smaller families—average family size has declined by half since 1950\[1\]—is linked to advances in education and health care and increased opportunities for women. This great global success story can continue only if access to family planning continues to grow worldwide.

Individual decisions determine global population growth. However, some 215 million women in developing countries lack access to effective family planning and are not able to exercise their reproductive rights. Meanwhile, development assistance for contraception has stalled at US$400 million a year, 50 per cent below 1995 levels.[2]

Too many women give birth too young, too often or with too little time between pregnancies to survive. This year an estimated 5.8 million newborns will die before their first birthday.[3] The risk is greatest for women in poor countries and for poor women in all countries.

These tragedies leave gaping holes in families, diminish the prospects of the surviving children and weaken communities.

The health of the mother is inseparable from the health of newborns, to the point that the World Health Organization now talks in terms of “maternal-newborn health”.[4]

Providing quality reproductive health care and other economic and social encouragements for safe motherhood is a cost-effective strategy that can also help countries concerned about low fertility rates.
THE GLOBAL SITUATION

- Some 215 million women in the developing world want family planning but cannot get it. This unmet need for contraception results in 82 per cent of all unintended pregnancies.\[^{[5]}\]
- Becoming a mother can be dangerous and life-threatening. More than 350,000 women die annually in pregnancy and childbirth, most from preventable causes: one every 90 seconds. Ninety-nine per cent of all maternal deaths occur in the developing world.\[^{[6][7]}\]

THE INDONESIAN SITUATION

- Family planning since 1962 has successfully reduced the number of children each woman has from a high of 6.0 in 1962 to 2.3 in 2007.\[^{[8][9]}\] However, access to reproductive health services is still a problem in Indonesia especially poor people and people who live in remote areas. These services are even more difficult to access by adolescents and unmarried individuals.
- Most married couples want to have children. However, some pregnancies are unwanted, often because the parents are too young or they already have many children. Data from IDHS 2007 shows that about one in 10 births was unwanted.\[^{[9]}\] For parents having their fourth child, 25 per cent were unwanted.
- As women become older, they tend to have children that were unwanted at conception.\[^{[9]}\]
- A major cause of unwanted births is unmet need, which is a lack of access to family planning services. The number of couples of reproductive age who want to space pregnancy or limit births but do not use any contraceptive is 9.1 per cent.\[^{[9]}\]

THE GLOBAL TRENDS

- World Bank studies have found reproductive health care extremely cost-effective: an investment of US$4.10 per person could avert 8 per cent of the global burden of disease. (That’s 90 cents for family planning, $3 for prenatal and delivery care, and 20 cents to fight sexually transmitted infections.) Another $1.70 in HIV/AIDS prevention could avert another 2 per cent of the disease burden.\[^{[10]}\]
- Strengthening systems to improve maternal health care also benefits many other areas of health, such as emergency treatment facilities, HIV/AIDS prevention, transportation and the availability of trained medical personnel.\[^{[11]}\]
- Educating women has a direct impact on reducing child mortality. According to a recent analysis published in The Lancet, half the reduction in child mortality over the past 40 years can be directly attributed to better education for women.\[^{[12]}\]
- Providing pregnant women and their newborns with adequate maternal and newborn care would cost US$23 billion a year (in 2008 dollars). Also satisfying the unmet need for family planning would add $3.6 billion – but by averting 50 million pregnancies it would reduce health care costs by $5.1 billion, thus saving $1.5 billion: a very cost-effective investment.\[^{[13]}\]
- Investing to both satisfy the unmet need for family planning and provide adequate maternal and newborn care in the developing world would reduce maternal deaths by more than two thirds, from 356,000 to 105,000 per year; newborn deaths by more than half, from 3.2 million to 1.5 million; unintended pregnancies by more than two-thirds, from 75 million to 22 million; and unsafe abortions by almost three-quarters, from 20 million to 5.5 million.\[^{[14]}\]

THE INDONESIAN TRENDS

- According to the World Health Organization, the definition of maternal death is the death of a woman while pregnant or within 42 days after the end of any pregnancy, from any cause related to or aggravated by the pregnancy or its management, but not from accidental or incidental causes.
- The maternal mortality ratio has declined from 390 deaths per 100,000 live births in 1994 to 228 in 2007. Given the current trend, extra efforts are needed to achieve the MDG goal of only 102 deaths per 100,000 live births by 2015.\[^{[15]}\]

**Figure 1. Maternal Deaths per 100,000 Live Births in Indonesia, 1994-2007**

Source: Indonesia Demographic Health Survey, 1991-2007
The two most effective ways to reduce maternal mortality are to have births attended by skilled health providers and institutional delivery.[15] Studies found that deliveries assisted by skilled health workers contributed to reducing maternal death by 45 per cent.[16] The proportion of births assisted by medical professionals has increased from 66 per cent in 2002/03 to 79 per cent in 2007. By 2007 institutional delivery took place with 46.10 per cent of births, a 40 per cent increase since 2002. [17][9]

However, there are disparities in the proportion of skilled medical personnel assistance at birth across regions in Indonesia. In 2009, the highest proportion of births assisted by medical professionals occurred in DKI Jakarta (98.1 per cent) and the lowest occurred in Maluku Province (42.3 per cent). [15]

To reduce maternal mortality as stated in the Millenium Development Goals, in 2011 the government launched a maternity security program (jaminan persalinan) to help all pregnant women who deliver in public health centres (puskesmas) or third-class hospital wards. Maternal security covers prenatal, delivery and postnatal care. The government provides Rp 900 billion to cover 2.5 million pregnant women throughout Indonesia, [18, 22].

Unmet needs for family planning causes unwanted and unintended pregnancies, which in turn leads to termination of pregnancies. Since abortion is illegal in Indonesia, pregnant women often seek unsafe, unprofessional abortion services,[15] putting them at risk for death or complications.

Unmet needs for family planning has slightly increased, from 8.6 per cent in 2002/03 to 9.1 per cent in 2007. The number of people who want to limit births has slightly increased, from 4.6 per cent to 4.7 per cent over the same period. However, there is a decline in the number of people who want to space births from 4.5 per cent to 4.3 per cent. [9]

The 2007 IDHS finds that 18.1 per cent of women age 15-49 were unwilling to use any contraceptive due to side effects and 10.1 per cent, due to health problems. The data shows that concerns about side effects and the inconvenience of using contraceptives are the main contributing factors to the high unmet need in Indonesia. [15]

Another issue in reproductive health is the spread of HIV/AIDS in Indonesia.

The cumulative number of reported HIV/AIDS cases increased about eight times over from 2,682 cases in 2004 to 21,349 by 2010 [19, 20].

The HIV epidemic in Indonesia is among the fastest growing in Asia. The epidemic is largely concentrated among specific populations segments and their partners, particularly female partners. The specific populations include injection drug users, sex workers, their clients, men who have sex with men and transgendered people (waria)[20].

In 2006 it was estimated that 193,000 adults were living with HIV/AIDS in Indonesia, 21 per cent of whom were women. By 2009, the estimate of people living with HIV had risen to 333,200 people, 25 per cent of whom were women. The figures show an indication of a feminization of the epidemic in Indonesia. [20]

In Papua and West Papua provinces, the epidemic is driven almost completely by unsafe sexual intercourse. The epidemic in these two provinces has the highest percentage of HIV/AIDS cases of all the provinces with a prevalence of 2.4 per cent among the general population aged 15-49. This is categorized as a low-level generalized epidemic.[20]

A 2007 United Nations Population Fund study estimates that providing adequate reproductive health care would cost US$237.6 million a year (in 2010 dollars) or US$3.68 for every married woman. The breakdown of costs by component of reproductive health[21] is given in Table 1:

<table>
<thead>
<tr>
<th>Health component</th>
<th>Cost in 2010 US$, in millions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family planning services</td>
<td>99.5</td>
</tr>
<tr>
<td>Prenatal and delivery care</td>
<td>64.6</td>
</tr>
<tr>
<td>Obstetric complications</td>
<td>57.8</td>
</tr>
<tr>
<td>Other maternal conditions</td>
<td>1.5</td>
</tr>
<tr>
<td>Newborn intervention</td>
<td>6.9</td>
</tr>
<tr>
<td>Sexually transmitted disease prevention</td>
<td>7.3</td>
</tr>
<tr>
<td>Total estimated costs</td>
<td>21</td>
</tr>
</tbody>
</table>

The paramount challenge of this century is to meet the needs of 7 billion human beings now – and the billions to come – while protecting the intricate balance of nature that sustains life.

Demands for water, trees, food and fossil fuels will only increase as world population grows. Human activity has altered every aspect of our planet, including its climate. Shortages of clean water and arable land are already a problem, while species loss continues. The resilience of ecosystems – from fisheries to forests – is threatened.

Impoverished people, who contribute the least to climate change, are likely to suffer the most from its effects – drought, floods, heat waves, tornadoes, blizzards and other extreme weather disasters – and many will seek a better future elsewhere.

Wealthier countries, meanwhile, are consuming resources at a rate that the earth cannot sustain for all humankind. Rising expectations everywhere put more pressure on the earth, and will require everyone to adopt more efficient, ‘greener’ ways so that all people may have decent lives.

Our collective future depends on rapidly lowering greenhouse gas emissions while reducing excessive consumption. Greater social equity and slower population growth will help make cooperative solutions possible.

THE GLOBAL SITUATION

The world's richest half-billion people (7 percent of the global population) are responsible for half the world's emissions of carbon dioxide, a main contributor to global climate change. The poorest half create just 7 percent of those emissions. [1]
Carbon dioxide emissions of one person in the United States today equal those of about 4 Chinese, 20 Indians, 30 Pakistanis, 40 Nigerians or 250 Ethiopians.\(^2\)

The United States is the world's largest consumer in general: sustaining the lifestyle of the average Americans uses all the resources from 9.5 hectares of land. Germans require 4.2 hectares, while Indians and most Africans require less than 1 hectare. The world average is 2.2 hectares.\(^3\)

Worldwide, some 884 million people have no access to safe drinking water, and 2.6 million lack access to basic sanitation services such as latrines or toilets.\(^4\)

Seeking safety from conflict zones or natural disasters, gainful employment or just a better life, some 214 million people have migrated to live in countries other than their own, and 49 percent are female.\(^5\)

**THE INDONESIAN SITUATION**

Environmental conditions in Indonesia are fragile. Deforestation has caused harm to the country's natural resource and degraded environmental quality. Intense flooding and landslide in the rainy season are more frequent, due to decreased land cover and climate change.

Water quality has been declining due to greater waste from industry and private homes, as well as poorly managed urban infrastructure. Many rivers and the groundwater are polluted, especially in urban areas. Uncontrolled groundwater tapping and lack of local government efforts in managing water consumption also put stress on groundwater resources.

Air quality in urban areas is worsening due to emissions from the industry and transportation sectors. The rampant growth in number of motor vehicles has increased traffic jams. This is made worse by poor infrastructure development and planning.

The demand for clean water has increased steadily. In 2008 consumption reached 9.1 billion cubic metres, 58 per cent of which are consumed by people living in Java.\(^6\)

In 2008, 48 per cent of Indonesians had no access to basic sanitation (toilets or latrines) and 20 per cent had no access to potable water. This means that many people in Indonesia are still at risk for contracting waterborne diseases.\(^7\)

In 2009, about 9 per cent of households still drank water from unhealthy sources, such as unprotected springs and rainwater;\(^8\)

Carbon dioxide emissions from energy consumption is still increasing, reaching an estimated 434 million tonnes in 2007, a 50 million tonne increase (13\%) from 2000.\(^9\)

The average annual deforestation rate reached 1 million hectares between 2000 and 2005. The fastest rate of deforestation was in Kalimantan and Sumatra where more than 250,000 hectares of forest were cleared per year. The loss equals 0.5\% of the total primary forest of these two islands.\(^10\)

Indonesians discard 51.4 million tonnes of waste every year, excluding waste from industrial and agricultural sector. Each year around 16 million tonnes (30\%) of this waste are not transported to landfills. This condition is dangerous for public hygiene, because unmanaged waste contributes to the spread of disease.\(^11\)

Energy supplies in Indonesia are still derived from fossil fuels (69 per cent) with only 31 per cent coming from renewable resources. Since Indonesia still depends on fossil fuels, energy use will increase overall greenhouse gas emissions and produce more environmental pollution.\(^12\)

**THE GLOBAL TRENDS**

- Per-capita water consumption is rising twice as fast as world population. Over the next 20 years, the human need for fresh water will be 40 percent more than today's.\(^13\)
- From 1970 to 2008, world-adjusted net financial savings fell by more than half (from 19 percent of gross national income to 7 per cent) while total emissions of carbon dioxide (the main greenhouse gas contributing to climate change) more than doubled.\(^14\)
- About 17,000 known species of plants and animals are at risk of extinction by habitat loss, invasive species, high consumption rates, pollution and climate change that are not being adequately addressed.\(^15\)
This loss of biodiversity reduces human food security, puts remaining species at greater risk of disease and extinction by natural disasters, and reduces possible sources of new medical and scientific breakthroughs.

THE INDONESIAN TRENDS

- Indonesia’s estimated 2005 emissions baseline is 2.1 Gt CO\textsubscript{2}e, which makes Indonesia among the world’s major emitters. Indonesia’s emissions are expected to grow by 1.9 per cent annually, reaching 2.5 Gt CO\textsubscript{2}e in 2020 and 3.3 Gt CO\textsubscript{2}e in 2030. (A gigatonne is equal to one billion tonnes.)\textsuperscript{[16]}
- 1,087 species of plants and animals in Indonesia are in danger of extinction. The threats come from excessive exploitation of natural resources, illegal logging, forest fire, and the introduction of foreign species.\textsuperscript{[17]}
- The frequency of floods and landslides has increased from 116 incidents in 2002 to 646 incidents in 2008.\textsuperscript{[18]}

\[2\] Pearce, Fred, “Consumption…” ibid
\[3\] Pearce, Fred, “Consumption…” ibid
\[10\] ibid
\[12\] UNDP. 2010. op cit.
\[15\] UN Department of Public Information, “Goal 7,” op cit.
\[18\] Ministry of Environment. 2010. op cit.
As expansion of family planning allows people to have smaller families, and as people live longer through medical breakthroughs and better access to health care, the proportion of older people is increasing almost everywhere.

This is a major global success story, but it also presents societies with new challenges related to economic growth, health care and personal security for people as they age.

Smaller percentages of people in their prime working years, relative to older or younger dependents, skew social and economic structures. When fertility drops below replacement level, labour shortages may result, because the number of retiring workers each year will eventually exceed the number of new workers coming into the labour market.

Yet healthy older workers represent a growing reservoir of unrealized human capital. When they remain active in the workforce, older people can contribute much to their families, communities and countries. This may require a rethinking of work, family and institutional arrangements.

Population ageing is particularly pronounced in Asia, Europe and Latin America. While more developed countries have higher proportions of older people, less developed countries are ageing at a faster pace, with less time to prepare.

THE GLOBAL SITUATION

- Average life expectancy is now at an all time high of 69 years (67 for men, 71 for women). But regional disparities are huge: from 54 years in sub-Saharan Africa (53 for men, 55 for women) to 80 in northern Europe (77 for men, 82 for women).\[1\]
The number of people over age 60 worldwide has been rising steadily. In 1980 there were 384 million people in the world aged 60 or above. Now that figure has more than doubled, to 893 million. By 2050, the number is projected to rise to 2.4 billion.[2]

People age 80 or over used to be rare, but today they are the world’s most rapidly growing age group.[3]

They use a greater proportion of medical and social support services than younger people.

In the industrialized countries of the Organization for Economic Cooperation and Development (OECD), where ageing populations are of greatest concern, three-quarters of people age 24-49 are employed, but fewer than 60 percent of people 50 to 64 are.[4]

Four out of five adults of retirement age or older have no retirement income from pensions or government programs.[5]

Laws in 61 countries require women to retire earlier than men, usually five years earlier, despite women’s longer life expectancy. These include Algeria, Austria, Italy, Panama, the Russian Federation, Sri Lanka and the United Kingdom.[6]

THE INDONESIAN SITUATION

Life expectancy at birth in Indonesia (2005-2010) is estimated to be 70.7 years, 68.7 for men and 72.7 for women.[7] Compared with other Southeast Asian countries, life expectancy in Indonesia is much lower than in Singapore where life expectancy is 80.7 years, and is much higher than in Cambodia, where life expectancy is only 62.2 years.[8]

Women are a majority of the older population and, as in most countries, are an even greater majority of the oldest segment of older people. The number of women today age 60 and above is estimated at 11,775,000, or 54.9 percent of everyone age 60 and above. This proportion is expected to increase to 64 percent by 2030.[9]

Although older people should not be required to work, in Indonesia, as in most developing countries where social security coverage is at best very limited, economic activity can be used as a proxy for financial security and independence. Women are both more likely to be single in old age and more likely to be economically inactive, with no income of their own. Only 30 percent of women age 65 or older are economically active as compared to 57 percent of men age 65 and older.

One-fifth, 20.75 percent, of older people have become unpaid workers and there is no official retirement age.

The population age 60 and above in 2010 was 21,429,000 or 9.15 percent of the total population. Compared to 30 years ago, this percentage is much higher. In 1980 only 5.59 percent of the population was age 60 or older.[10]

Most of these older people have only primary or no education (70.7 percent). In 2004 the percentage of the older population that had attended senior high education and above was only 5.7 percent.

Today 86.1 percent of the ageing population declare that they are dependent on others. They must live with their children or other people, adding to the burden of the family.

THE GLOBAL TRENDS

In the more developed regions, about 1 in 4 people is now over 60. By 2050, more than 1 in 3 will be. In the least developed countries, 1 in 20 people is now over 60; by 2050, 1 in 9 will be.[11]

By 2050, the number of working-age people available to support each person 65 or older will decline by half worldwide,[12] straining government social support and retirement financing.

In 1950, there were 12 working-age people for every person over 65 worldwide. Now there are 7, and by 2050 there will likely be only 3.[13]

The median age worldwide (half the people are older and half are younger) will rise from 29 in 2010 to 42 in 2100.[14] But disparities among countries are enormous: Niger’s median age now is the world’s lowest at 15.5, while Japan’s is the highest at 44.7.[15]

Programs to encourage older people to keep working – and to encourage employers to hire them – include tax code revisions, pension system reform, training incentives, microcredit programs, health care subsidies and work-time scheduling flexibility.

THE INDONESIAN TRENDS

Life expectancy has increased very rapidly in Indonesia, from 52.2 years in 1980 to 71.5 years in 2010.[16] This indicates that there is improved access to better
health facilities and services for the general population.

- The older population in 1950 was 4.9 million and is projected to reach 73.6 million in the year 2050.
- In 1950, there were 16 older people per 100 children (age 0-15). This number has almost doubled by 2010 to 30 older people per 100 children. By 2050, it is predicted that there will be 42 older people per 100 children (age 0-15).

### Number of people age 60 and over, 1950-2050 (In millions)

![Graph showing the number of people age 60 and over from 1950 to 2050](image)

Source: Papers in Population Ageing, 2007, UNFPA.
Almost all future population growth in the next 40 years will be absorbed by cities of the developing world, which are unprepared for such rapid expansion. Planning needs to begin now to take advantage of the many benefits cities can offer.

While cities concentrate poverty, they also provide the best means of escaping it. Cities have long been the engines of economic growth. Densely populated areas can be more environmentally sustainable than sprawling communities and allow for more efficient provision of services. The ideas, connections and activities in cities often generate the solutions to the problems they create.

Urbanization also accelerates the trend toward smaller families and offers more opportunities for women and young people.

THE GLOBAL SITUATION

- In 1960, one in three people lived in a city. The urban population has more than quadrupled since then, and today about half of all people do: 3.4 billion people. By 2045, more than two out of three people will likely live in urban and peri-urban areas.[1]
- The 21 “mega-cities” with 10 million or more inhabitants (such as Tokyo, Sao Paulo, Mexico City and New York, the four largest) account for only 9 per cent of the world’s urban population. Most urbanites (52 per cent) live in cities of 500,000 or fewer.[2]
- Most people who move to cities seek better jobs and higher incomes, as productive industries, services and technologies tend to cluster in cities: 80 per cent of the world’s gross domestic product is thought to be generated in urban areas.[3]
- Overall, some 60 per cent of urban growth is due to natural increase, with rural-urban migration and reclassification of land accounting for the remainder.[4]
Governments often focus on ways to reduce migrant flows to large cities. Many refuse to give slum dwellers access to legal land tenure, and that lack is often a barrier to access to basic services such as water, sanitation, electricity and waste collection. Meanwhile the threat of eviction gives residents little incentive to make home improvements.\[5\]

THE GLOBAL TRENDS

- More than 200 million slum dwellers have gained access to improved water, sanitation or more durable and less crowded housing in the last 10 years, greatly enhancing their prospects of escaping poverty, disease and illiteracy.\[6\]
- By mid-century, the world’s urban population will likely be the same size as the world’s total population was in 2004.\[7\]
- Most cities in the developing world will double in size by 2025.\[8\]
- By 2025, the world will have eight more mega-cities: Asia will gain another five, Latin America two and Africa one. Today, Tokyo is the largest, with 36.5 million people.\[9\]
- Between 2009 and 2050, Asia’s urban population will double, from 1.7 billion to 3.4 billion. Africa’s will triple, from 399 million to 1.2 billion, and Latin America and the Caribbean will rise from 462 million to 648 million. Europe’s city dwellers, meanwhile, will increase from 531 million to 582 million, and North America’s from 285 million to 404 million.\[10\]
- Over the past 10 years, the share of the urban population living in slums in the developing world has declined significantly from 39 per cent in 2000 to 33 per cent in 2010. However, in absolute terms, the number of slum dwellers in the developing world is actually growing, and will continue to rise in the near future.\[11\]

THE INDONESIAN SITUATION AND TRENDS

Indonesia has experienced a demographic shift with the rise of urbanization – more people live in urban areas due to rural-urban migration, population growth rates in cities and the re-classification of rural areas as urban areas. In 1971, only 17.3 percent of the population lived in urban areas. By 2000, that percentage increased to 42 per cent. By the end of 2010 an estimated 54.2 per cent of the population will live in urban areas. At the current population growth rate, by 2025 the percentage of people living in urban areas in Indonesia is projected to reach 68.3 per cent.

The distribution of urban dwellers across Indonesia varies widely. For example, Greater Jakarta is largely urban. Other provinces whose urban population is more than 50 per cent include Bangka Belitung Islands, Riau Islands, East Kalimantan, Banten, West Java, Central Java, Yogyakarta, East Java, and Bali. The provinces of Sulawesi and Papua have less than a quarter of their population living in urban area. Urbanization requires facilities and services that meet the needs of urban dwellers.

Jakarta and Surabaya, the two largest cities, together contribute more than one-fifth of Indonesia’s economy. Yet only 5 per cent of Indonesians live in Jakarta and Surabaya. Of the 95 largest cities in Indonesia, only 29 have more than 500,000 inhabitants. Most of the population lives in the metropolitan area of Jakarta, Bogor, Depok, Tangerang and Bekasi (Jabodetabek). According to Statistics Indonesia, Jakarta has 9.58 million inhabitants, while the Jabodetabek area has 26.6 million inhabitants. More people live in Jabodetabek than live in Australia, Singapore, Timor Leste and Brunei Darussalam combined.

Gerbangkertosusilo in East Java is the second largest metropolitan area, followed by Bandung and plateau Bandung, Semarang. Mebidang in North Sumatra and Mamminasata in South Sulawesi are the two largest metropolitan areas outside Java.

As in many countries, migration from rural to urban areas is primarily driven by the need for better jobs and higher income. Other reasons for migration into the urban areas include family, marriage, and workplace of the breadwinner. Income disparities are far wider in big cities than those in rural areas.

Today, two-thirds of Indonesian workers make their living in the informal sector with no proper legal protection. Urban informal sectors have different characteristics than rural informal sectors, especially lacking in social safety nets since urban communities tend to be more loosely knit with fewer social interactions than rural communities.
In more advanced economies, the formal sector plays a bigger role in providing better social protection for the labour force which in turn helps reduce poverty and buffer significant fluctuations in the dynamics of poverty.

As cities play a bigger role in driving the country’s economy, two-thirds of the population is expected to live in urban areas. Hence urban planners must start preparing to accommodate the increase in urban population. One of the most urgent issues that needs to be addressed is urban poverty. If urban poverty continues unabated, it may lead to social and political instability with adverse consequences to the national economy.

Another consequence of larger urban populations and continuing poverty is the increase in slum areas. The poorest people in cities tend to live in areas lacking in sanitation, clean water or city services.

There are a number of social indicators related to urban areas that merit our attention.

- In 2009, 4.18 per cent of city dwellers age 15 or older were illiterate.
- Data from the 2007 Demographic and Health Survey shows that 80.4 per cent of urban households were using clean water. Although this figure is far higher than the 54.5 per cent of households with clean water in rural areas, there is still a great need to address the remaining 20 percent of urban households needing access to clean water.
- The data also shows that 1.8 percent of urban households have no access to electricity.
- And finally, 22.7 per cent of urban households have no access to sanitation facilities.
