

Foreword

SUSTAINABLE DEVELOPMENT BEGINS WITH CHILDREN

It is our pleasure to share with you the *SDG Baseline Report on Children in Indonesia*. This report has been produced through a joint effort between the Government of Indonesia and the United Nations Children's Fund (UNICEF) in Indonesia to deepen our understanding of the situation of children in the country, and make this data available for informed policy planning and monitoring. Investments in children are a precondition for achieving Agenda 2030, with its Sustainable Development Goals (SDGs), and we believe that every rupiah spent to improve a child's well-being is an investment in Indonesia's human capital and sustainable economic growth.

Sustainable development begins with children. Growing up free from poverty, healthy and educated, feeling happy and being safe, is the foundation for becoming adults that contribute to the economy, a sustainable environment and a socially cohesive society. At the heart of the SDGs is therefore a strong emphasis on equity: the global development goals are only reached if they are achieved for all children, everywhere. Thus, the well-being of children today constitutes an important marker of progress towards the attainment of the SDGs.

This report is a key contribution to Indonesia's efforts to operationalize and localize the global goals for our national context. It provides valuable insights and an in-depth, disaggregated analysis of the 2015 baseline status of SDGs for children in Indonesia.

Since children are not always visible in data and policies, dedicated efforts are required to make sure that no one child is left behind in the implementation,



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monitoring and reporting of Agenda 2030.

Impressive progress toward SDG achievements in Indonesia have been made. SDG priorities were firmly captured in the National Medium-Term Development Plan 2015–2019, supporting strong progress in primary school enrolment rates and eradication of malaria. Further, important strategies and national action plans have been developed, aimed at improving food security and nutrition, the roll-out of universal health care and addressing climate change, as well as the elimination of violence against children.

This report supports the tracking of progress towards SDG achievements and makes recommendations on how Indonesia can accelerate achievement of each goal, making it a valuable tool that can inform planning and programming for the SDGs and children at national and local levels in Indonesia. It is for the inclusion of every child.



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THE SDGS AND DATA FOR CHILDREN: A SUMMARY



The SDGs and data for children: A summary

INTRODUCTION

The SDGs, laid out in United Nations Resolution 70/1, *Transforming our World: the 2030 Agenda for Sustainable Development*, reflect a globally agreed plan of action to protect and promote the planet and its people while ensuring prosperity and peace for all by the year 2030. The SDGs comprise 17 goals supported by 169 targets to track social, economic and environmental dimensions of sustainable development. They were adopted by the United Nations General Assembly in 2015 and build on the Millennium Development Goals (MDGs), which guided international poverty eradication efforts between 2000 and 2015. The SDGs seek to complete the work of the MDGs, while also mapping out a broader forward-thinking agenda. They are global goals for all countries and stakeholders. Importantly, the SDGs emphasize inclusion and ‘closing the gap’ to ensure that no one is left behind on the road to sustainable development. Accordingly, one of the key features of the SDG targets is the increased focus on disaggregated data within countries to monitor disparities.

The 2030 Agenda also emphasizes the indivisible nature of the 17 goals and 169 targets and the need to address the links between the social, economic and environmental aspects of development. For example,

poverty (the topic of SDG 1) is a risk factor for child development and is associated with worse-than-average outcomes in the areas of nutrition (SDG 2), health (SDG 3), education (SDG 4), child marriage (SDG 5), water and sanitation (SDG 6) and birth registration (SDG 16).

The Government of Indonesia is strongly committed to the 2030 Agenda and is integrating the SDGs into the national development planning process and localizing the global indicators. Indonesia played an active leadership role in negotiations for the Post-2015 Development Agenda, which led to the formulation of the SDGs. Indonesia was particularly active in advocating for a strong partnerships approach, which is a key pillar of the SDGs. The Government’s commitment to implementing the SDGs is reflected in the establishment of a national SDGs coordination team, supported by the SDG Secretariat. The current National Medium-Term Development Plan 2015–2019 already aligns well to the SDGs, with its focus on social development; economic development; environmental development; and law and governance development. Efforts are also under way to mainstream the SDGs into the next National Medium-Term Development Plan 2020–2024.

PURPOSE OF THIS REPORT

This report provides a baseline for priority child-related SDG indicators that have been identified as most relevant for monitoring the situation of children under each goal. Indonesia's 84 million children represent one third of the country's total population. How children are faring – in terms of their health and nutrition, their welfare and education, and the environment in which they grow up – is a direct predictor of what Indonesia's future will look like. Investing in all children and young people is central to achieving sustainable development, and monitoring progress for children is crucial in determining which investments to make. Indeed, the SDGs recognize that children are both agents of change and torch-bearers for sustainable development.

This report is a first accounting of where Indonesia's children stand at the start of the SDG era. The data were derived from Government sources, including representative surveys such as the National Socio-Economic Survey (SUSENAS) conducted by BPS and

the Basic Health Research (RISKESDAS) by the Ministry of Health, as well as administrative databases from line ministries and agencies. Data values were computed as close as possible to 2015, the year selected as the benchmark against which to measure progress in future years. To the extent possible, information is disaggregated – by sex, age, place of residence, province, socio-economic status and other relevant markers – to shed light on the situations of particularly vulnerable groups.

The report is a key contribution to Indonesia's efforts to operationalize, track progress and localize the SDGs for the national context. It complements the country's 2017 National Voluntary Review by deepening our understanding of the situation of children in Indonesia and offering high-level policy suggestions for accelerating progress towards the SDGs. The report also identifies data gaps that require further attention to improve monitoring of progress in future years.



OVERVIEW OF PRIORITY CHILD-RELATED SDG TARGETS AND INDICATORS

GOAL | 01 | NO POVERTY



Sustainable Development Goal 1 calls for an end to poverty, including child poverty, in all its manifestations, over the next 15 years. It explicitly recognizes that poverty is a multidimensional phenomenon and underscores the important role of national social protection systems and floors as a key instrument to help address poverty.

- BPS has started developing national measures of child poverty and multidimensional deprivation to enable tracking of progress towards SDG 1.
- The proportion of Indonesia's population living below the national poverty line dropped from 24 per cent in 1990 to 11 per cent in 2015. Among children, nearly 14 per cent were living in households below the official poverty line in 2015.
- Many families live on incomes that are only marginally higher than the national poverty threshold. Doubling the value of the national poverty line would lead to a four-fold increase in the national child poverty rate, up to 60 per cent.
- Indonesia's main child-focused social protection schemes are primarily directed at school-age children. They reached an estimated 36 per cent of school-age children in 2015, while coverage of young children under age 6 is below 5 per cent.



14%

of Indonesia's children are living below the national poverty line



65%

of children are deprived in two or more non-income dimensions of poverty



The main cash transfer programme (PKH) reaches around

7%

of children

GOAL | 02 | ZERO HUNGER



Sustainable Development Goal 2 seeks sustainable solutions to end hunger and all forms of malnutrition by 2030 and to achieve food security.

- Over 37 per cent of children under 5 years of age were stunted in 2013 – roughly 8.4 million children nationwide. The prevalence of stunting is high, even among children from the wealthiest households.
- The double burden of malnutrition is an increasing concern. For Indonesia, this is an active challenge: in 2013, 12 per cent of children under age 5 were affected by wasting (low weight-for-height), and the same number of children were overweight.
- Anaemia – one of the most common nutritional disorders in the world – affected 23 per cent of women older than 15 years of age and 37 per cent of pregnant women.
- While modest progress has been made, less than half of infants (45 per cent) benefited from exclusive breastfeeding for the first 6 months of life in 2015.



1 in 3

children under age 5 is stunted



1 in 10

children is acutely malnourished



2 in 5

infants under 6 months of age are exclusively breastfed

GOAL | 03 | GOOD HEALTH AND WELL-BEING 



9 in 10

births are attended by skilled health personnel



For every 1,000 live births, **40 children** die before their fifth birthday



74%

of infants 12–23 months receive the third dose of the DPT vaccine

Sustainable Development Goal 3 aims to ensure health and well-being for all at all ages by improving reproductive, maternal and child health; ending the epidemics of major communicable diseases; reducing non-communicable and environmental diseases; achieving universal health coverage; and ensuring access to safe, affordable and effective medicines and vaccines for all.

- Some 89 per cent of births were delivered by skilled health personnel in 2015.
- Indonesia’s maternal mortality ratio was equal to 305 maternal deaths per 100,000 live births according to the 2015 Intercensal Population Survey (SUPAS).
- The under-five mortality rate was 40 deaths per 1,000 live births during the period 2008–2012. Nearly half of all under-five deaths occur during the neonatal period – in the first four weeks of life.
- The national immunization coverage for the third dose of diphtheria, pertussis and tetanus vaccine (DPT3) was 74 per cent in 2015. Protection against measles was somewhat higher, reaching 82 per cent of infants 12–23 months old.
- Nearly half of children (47 per cent) were covered by health insurance programmes in 2015. The National Health Insurance Programme (JKN) aims to extend financial coverage for health care to at least 95 per cent of the population by 2019.

GOAL | 04 | QUALITY EDUCATION 



The participation rate in organized learning among 6-year-olds was nearly **96% in 2015**



56%

of youth complete senior secondary education



Only half

of primary school children achieve the minimum national benchmark in reading

Sustainable Development Goal 4 aims to ensure that all people have access to quality education and lifelong learning opportunities. This goal focuses on the acquisition of foundational and higher-order skills at all stages of education and development; greater and more equitable access to quality education at all levels, as well as technical and vocational education and training; and the knowledge, skills and values needed to function well and contribute to society.

- The participation rate in organized learning among 6-year-olds was nearly 96 per cent in 2015, though many children of pre-school age are already attending primary school.
- All but one province have achieved universal or near universal access to primary education. At junior secondary level, the adjusted net attendance rate reached 87 per cent in 2015 while 57 per cent of youth aged 16–18 years were attending senior secondary or higher education.
- Gender parity has been achieved at primary level – with a slight advantage for girls in several provinces – but the picture is mixed at secondary level. Adolescents and youth from the poorest households and those living in rural areas are much less likely to complete their education.
- Only half of primary school children achieved the minimum national benchmark in reading and less than a quarter in mathematics.

GOAL | 05 | GENDER EQUALITY



Sustainable Development Goal 5 seeks to empower women and girls to reach their full potential, which requires eliminating all forms of discrimination and violence against them, including harmful practices.

- According to the 2016 Women's Health and Life Experiences Survey (SPHPN), 28 per cent of ever-partnered women and girls aged 15–64 years have experienced physical, sexual and/or psychological violence by a current or former intimate partner. One in 10 experienced intimate-partner violence in the 12 months preceding the survey.
- One in four (24 per cent) women and girls aged 15–64 years has experienced some form of physical and/or sexual violence by someone other than an intimate partner in their lifetime, with 6 per cent of them experiencing this in the past 12 months.
- Nationwide, 12 per cent of women aged 20–24 years were married or in union before the age of 18 in 2015. Child marriage rates vary significantly across provinces.



12%

of women aged 20–24 years were married or in union before the age of 18



28%

of ever-partnered women and girls have experienced violence by an intimate partner

GOAL | 06 | CLEAN WATER AND SANITATION



Sustainable Development Goal 6 seeks to ensure the availability and sustainable management of water and sanitation for all. Universal access implies going beyond monitoring access at the household level and addressing access to water, sanitation and hygiene (WASH) in institutional settings, including schools and health-care facilities.

- In 2015, some 71 per cent of Indonesia's population used an improved drinking water source in their households.
- In educational settings, 86 per cent of primary and secondary schools reported having an improved water source.
- Six in 10 people used basic sanitation facilities at home, but 12 per cent did not have any facilities at all and continued to practise open defecation in 2015.
- Efforts are ongoing to bring national data collection instruments in line with the requirements of the SDG indicators on WASH and to improve the availability of information on the accessibility and quality of services provided.



7 in 10

people use an improved drinking water source at home



86%

of schools have access to an improved water source



6 in 10

people use basic sanitation at home