Executive Summary

2014 began with the visit of the UNICEF Executive Director to Indonesia (Jakarta and Aceh) in February and ended with a solemn ceremony to commemorate ten years since the 2004 Indian Ocean tsunami. In July, the people of Indonesia turned out in high numbers to elect a new president. The election process was recognized as fair and peaceful, resulting in a smooth transfer of power in October.

Under the leadership of the Ministry of Planning (BAPPENAS), in 2014 Indonesia developed the Medium Term Strategic Plan (RPJMN) for the period 2015-2019. The plan includes the unfinished Millennium Development Goal (MDG) agenda, emerging priorities and elements of the Post-2015 agenda. UNICEF provided support to inform the RPJMN through participation in the consultation process and support to the Background Studies on Nutrition and Early Childhood Education as well as the Health Supply Readiness Study. UNICEF ensured attention to women, child rights and equity in the RPJMN process.

In 2014 UNICEF continued its efforts to strengthen data collection and monitoring systems to better measure results for children and progress in addressing inequities. Technical assistance provided by UNICEF was instrumental in revising the national socio-economic survey (SUSENAS) of the Central Bureau of Statistics (BPS). Alignment with international survey standards (including Multiple Indicator Cluster Survey, MICS) will translate to improved relevance and comparability of survey results from 2015 onward. Equity monitoring and bottleneck analysis were mainstreamed across the programme.

In August 2014, the new juvenile justice law, which increases the age of criminal responsibility and promotes diversion, entered into force, reducing the number of children in prison by 30 per cent. Capacity development conducted with multiple stakeholders in response is increasing diversion of children from the formal criminal justice system by 60 per cent.

In response to the Mid-term Review 2013 recommendations, in 2014 UNICEF Indonesia engaged in an ambitious program of evaluations and reviews. An evaluation of UNICEF’s engagement in the decentralisation process, a gender review and an updated situation analysis to inform the current cycle and guide the next country programme 2016-2020 were completed.

In 2014, UNICEF supported the development of a comprehensive Newborn Action Plan, the first of its kind in Indonesia, and a new communication strategy for immunization to improve community demand for vaccination. UNICEF also supported the roll out of the Scaling Up Nutrition (SUN) movement, scale-up of sanitation and improvement in access and quality of health planning and service provision.

To address the remaining complex challenges, including persistent lack of progress on issues like stunting, maternal mortality and birth registration, will require continued advocacy, institutional capacity building, real-time monitoring and use of data to ensure accountability and programme quality – all priorities for 2015.
Efforts to improve efficiency and effectiveness included introduction of e-banking, renovation of the Jakarta office, reduction of operations costs at Field Offices by moving into Government premises, and review of key work processes within the operations team in anticipation of the Global Shared Services Centre (GSSC).

A programme review conducted with Government at the end of the year identified the new Government-mandated fund channelling modality as a significant constraint to programme implementation at decentralized level. Agreements signed with line Ministries at the beginning of the year and revisions of work processes were inadequate in addressing complexities involved in the transfer of funds from the Centre to the Provinces and Districts. UNICEF adapted to the new law by engaging in new contractual arrangements and partnerships and in some instances implemented programmes directly to ensure programme continuity. This constraint was highlighted in an external evaluation and has prompted further discussions between BAPPENAS and the Ministry of Finance to develop Standard Operating Procedures (SOPs) that could advise line Ministries to channel funds more efficiently in line with the new law.

The Innovation Lab, established in 2013, allowed UNICEF to expand partnerships with adolescents and youth. The Design Challenge initiative allowed young researchers from two national academic institutes to develop more than 30 proposals of innovative solutions to address birth registration, sanitation and emergency response challenges. New opportunities for interactive communication on child rights priorities were initiated with the launch of a Twitter-based adaptation of the U-Report platform.

The year was marked by unprecedented public discussion on violence against children and a new Presidential Decree on Child Sexual Abuse was issued. UNICEF worked in partnership with children, the Government and civil society to launch a public service announcement on where and how to report child sexual abuse, reaching more than 2 million people across the country.

**Humanitarian Assistance**

Indonesia is one of the most hazard-prone countries of the world. Frequent natural hazards in Indonesia include earthquakes, tsunamis, volcanic eruptions, landslides and other soil movements, floods, droughts and forest fires.

UNICEF Indonesia supported the Government of Indonesia in improving preparedness and rapid response when an emergency hits the country as well as in strengthening child-centred Disaster Risk Reduction (DRR). Within the Inter-Agency Standing Committee (IASC) cluster system, UNICEF played a key role. As a cluster lead of four sectors, (Water, Sanitation and Hygiene/WASH, Nutrition, Education and Child Protection), UNICEF supported the establishment and subsequent strengthening of the cluster coordination mechanisms and related networks and creating linkages with Government institutions, civil society organizations and donors. This proved to be essential for creating DRR mainstreaming.

As a result of continued UN advocacy and capacity building, the Government of Indonesia has established a national cluster coordination mechanism. The Government reconfirmed its commitment to DRR by integrating Disaster Risk Management in its new five year development plan (RPJMN 2015-2019).

During emergencies, UNICEF provided initial assistance, including by carrying out rapid
assessments based on the Core Commitments for Children in Humanitarian Action and through the distribution of emergency supplies.

In response to the landslides in Banjarnegara district in Central Java in December 2014, UNICEF supported coordination efforts and distributed emergency items. The landslides killed 98 people, destroyed 50 houses and forced 1,024 people to be evacuated.

Throughout the year, UNICEF facilitated emergency training sessions related to Education, Nutrition and Child Protection. UNICEF also provided a WASH Cluster Sphere training. In total, more than 140 Government and non-government partners at both national and sub-national level participated. UNICEF also facilitated the WASH contingency planning workshop which resulted in the revision of the WASH contingency plan.

UNICEF partnered with World Vision Indonesia, Child Fund Indonesia and other local NGOs to provide capacity building support to sub-national level partners on an integrated orientation module on emergencies and on child-centred DRR.

**Equity Case Study**

Despite Indonesia’s progress in improving the health and welfare of its population in recent years, social and geographic disparities are still striking. The infant mortality rate in West Papua province stands at 74 deaths for every 1,000 live births, which is three times higher than in Jakarta. The under-five and infant mortality rates of the poorest households are more than three times greater than among households from the highest quintiles.

The UNICEF-Government of Indonesia Country Programme 2011-2015 was informed by an equity-focussed situation analysis, conducted in 2010. In addition to using available national and subnational data, UNICEF Indonesia also supported the development of the Child Deprivation Index 2010. This composite index used seven health and social indicators and highlighted disparities by province, district, urban-rural residence and wealth quintile. Based on this, the current UNICEF Country Programme aims to enhance targeting and allocation of resources for the most disadvantaged to reduce disparities.

The global Monitoring of Results for Equity System (MoRES), introduced in 2012 by UNICEF Indonesia, initially focused on child survival and development (CSD), building on existing work on the Investment Case-Evidence-Based Planning (IC-EBP) approach, which included district-level bottleneck analyses. The focus at that time was on seven districts, with the aim of generating experience for further replication and integration into existing government planning and monitoring mechanisms. Ongoing work on IC-EBP in Papua province (which employs MoRES principles) was further expanded.

UNICEF technical staff in target provinces were instrumental in building the capacity of local government counterparts to improve planning and monitoring and leverage local resources. District workshops were conducted to facilitate bottleneck analyses and monitoring. The approach was adapted to each local context with the engagement of key stakeholders to promote its integration into local planning processes.

The 10-determinant framework was used to identify bottlenecks to effective coverage of tracer interventions for CSD in the seven target districts. The main data sources were routine district level data and supplemented data from periodic surveys. Below are examples on equity-
monitoring from Aceh Timur (Aceh province), Jayawijaya (Papua province), and Mamuju (West Sulawesi Province).

The focus in Aceh Timur district was on sanitation, exclusive breastfeeding and diarrhoea treatment with Oral Rehydration Solution (ORS) and zinc. Monitoring revealed that parents were not giving zinc to their children because they believed zinc would make children ill. Midwives lacked the capacity to counsel parents and address their concerns. In response, the midwives received counselling training, and a simple form was developed to assist in tracking their experiences, thereby enabling improvements in the process. This resulted in a 40 per cent increase in coverage of counselling and of zinc uptake from 2013 to 2014.

Jayawijaya district was an IC-EBP pilot. A multi-stakeholder bottleneck analysis was conducted in 2012 which then informed district-level plans. Monitoring in 2013-14 revealed cultural barriers in the uptake of Maternal, Newborn, and Child Health (MNCH) services (e.g., pregnant women are forbidden to go outdoors and cannot seek services) or to the adoption of appropriate feeding practices (e.g., traditional foods being provided early in infancy during the period of exclusive breastfeeding). Stock-outs of vitamin A, deworming tablets, long-lasting insecticidal bed nets and iron/folic acid supplements occur frequently. Corrective actions were initiated to enhance services (e.g., inclusion of breastfeeding counselling in the postnatal package of care) and to address stock-outs. The monitoring approach has now been expanded to health centre level in Jayawijaya and an additional four districts in Papua to monitor equity at point of service delivery.

Using the global 7 per cent set-aside funds, a cross-sectoral bottleneck analysis for Holistic Integrative Early Childhood Development (HI-ECD) in Mamuju district was conducted in 2014. Following training of counterparts, an instruction in support of the approach was issued by the district head. Further technical support will be necessary before results can be demonstrated.

Periodic monitoring of bottleneck reduction across the seven districts is done through routine district data, periodic surveys and field trip reports. Depending on the type of bottleneck and the sensitivity to change, UNICEF-supported monitoring happens every 6–12 months. Equity monitoring in Indonesia has generated valuable data, experiences and lessons learned. Indicators have been adapted to better track reduction of bottlenecks. The analysis has informed district-level plans in all seven districts and in some cases successfully addressed bottlenecks.

There were also a number of challenges experienced:
• Indonesia has complex planning, budgeting and monitoring systems in place
• There is limited capacity for top-down systems change
• Indonesia’s extensive data systems do not systematically collect data on bottlenecks.

UNICEF Indonesia learned a number of lessons in the course of equity monitoring:
• UNICEF adopted a pragmatic approach avoiding the ‘brand’ MoRES in order to not be perceived as an externally driven initiative. UNICEF focused instead on integrating “MoRES concepts’ into existing planning and monitoring mechanisms. Indonesia is not a ‘blank canvas’ with regard to planning and monitoring, and identifying appropriate entry points is critical.
• UNICEF used a staggered approach in applying MoRES, initially focusing on pilots in seven districts to test and validate the initiative prior to replication.
• Within UNICEF a MoRES task force, consisting of staff from all programme sections, was critical to lead the process.
UNICEF is now using MoRES principles in the development and revisions of work plans and priorities with government partners in all areas of work, thus truly mainstreaming MoRES into the programme. Provincial and district capacities will be further strengthened to assess bottlenecks and monitor their reduction. Concurrently, opportunities for incorporation of MoRES principles into government systems are being explored for greater replication and sustainability.

### Summary Notes and Acronyms

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<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>ACT</td>
<td>Artemisinin-based Combination Therapy</td>
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<td>AMP</td>
<td>Annual Management Plan</td>
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<td>ARI</td>
<td>Aliansi Remaja Independent (Independent Youth Alliance)</td>
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<td>ARV</td>
<td>Anti-retroviral</td>
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<td>BAPENAS</td>
<td>Badan Perencanaan Pembangunan Nasional (Ministry of National Development Planning)</td>
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<td>BPS</td>
<td>Biro Pusat Statistik (National Statistical Agency)</td>
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<td>CATS</td>
<td>Community Approach for Total Sanitation</td>
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<td>CCT</td>
<td>Conditional Cash Transfer</td>
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<td>CO</td>
<td>Country Office</td>
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<td>CP</td>
<td>Country Programme</td>
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<td>CPD</td>
<td>Country Programme Document</td>
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<td>CPMP</td>
<td>Country Programme Management Plan</td>
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<td>CRBP</td>
<td>Children's Rights and Business Principles</td>
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<td>CRC</td>
<td>Convention on the Rights of the Child</td>
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<td>CSD</td>
<td>Child Survival and Development</td>
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<td>DRR</td>
<td>Disaster Risk Reduction</td>
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<td>DTR</td>
<td>Data Temperature Recorder</td>
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<td>ECE</td>
<td>Early Childhood Education</td>
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<td>EPI</td>
<td>Expanded Program on Immunization</td>
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<td>EU</td>
<td>European Union</td>
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<td>GFATM</td>
<td>The Global Fund to Fight AIDS, Tuberculosis and Malaria</td>
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<td>GIZ</td>
<td>Gesellschaft für Internationale Zusammenarbeit (German Agency for International Cooperation)</td>
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<tr>
<td>GKS</td>
<td>Gereja Kristen Sumba (Sumba Christian Church)</td>
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<td>GoI</td>
<td>Government of Indonesia</td>
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<td>GSSC</td>
<td>Global Shared Services Centre</td>
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<td>HACT</td>
<td>Harmonised Approach to Cash Transfers</td>
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<tr>
<td>HIV/AIDS</td>
<td>Human Immunodeficiency Virus &amp; Acquired Immuno Deficiency Syndrome</td>
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<td>HIECD</td>
<td>Holistic Integrative Early Childhood Development</td>
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<td>HRBAP</td>
<td>Human Rights Based Approach to Programming</td>
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<td>IASC</td>
<td>Inter Agency Standing Committee</td>
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<td>IB</td>
<td>Integrated Budget</td>
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<td>ICO</td>
<td>Indonesia Country Office</td>
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<td>IDD</td>
<td>Iodine Deficiency Disorders</td>
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<td>ILO</td>
<td>International Labour Organization</td>
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<tr>
<td>IMEP</td>
<td>Integrated Monitoring, Evaluation and Research Plan</td>
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<tr>
<td>IPB</td>
<td>Institut Pertanian Bogor (Bogor Agricultural University)</td>
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<tr>
<td>ITB</td>
<td>Institut Teknologi Bandung (Bandung Institute of Technology)</td>
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<tr>
<td>Kemenkokesra</td>
<td>Kementerian Koordinator Bidang Kesejahteraan Rakyat (Ministry for People Welfare)</td>
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<tr>
<td>KAP</td>
<td>Knowledge Attitude and Behaviour</td>
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UNICEF partnered with the Central Bureau of Statistics (BPS) to improve the quality of national household survey data through alignment with international standards, especially MICS, thus aiming to strengthen evidence-informed policy making. Close collaboration with BPS and academic partners also resulted in strengthened capacity for in-depth data analysis on child-related topics such as child poverty and child marriage.
The PKH Prestasi pilot project, a child health and nutrition promotion intervention linked to an existing cash transfer programme, is one example of how UNICEF supported the development and strengthening of capacities among multiple actors to achieve better child outcomes. Health service providers received training on counselling of mothers. Family Development Sessions educated mothers on child health and nutrition, and religious leaders and journalists were oriented on child rights to better communicate to their respective audiences. At the end of 2014, although pilot projects in one of two regions were still ongoing, the Government had started to scale up elements at a national level with its own resources.

Capacity development of government counterparts was also a central strategy within UNICEF’s child protection work. It aimed to mobilise increased demand for and supply of services for children who are exposed to or at risk of becoming victims of violence, exploitation and abuse. In 2014, UNICEF supported the national Training Institute of the Ministry of Social Affairs to develop a child protection module for facilitators for a national Conditional Cash Transfer (CCT) programme that targets two million poor children and families to help parents and community leaders recognize and report child protection cases. The Institute trains thousands of social workers across the country every year and this model will allow for national scale replication.

As part of a model being tested in four provinces, UNICEF supported the Ministry of Education and Culture in developing self-monitoring tools for Early Childhood Education (ECE) institutions to assess their performance, based on the National Standard of Education.

In collaboration with BAPPENAS and Gajah Mada University (UGM), UNICEF supported districts in Papua in evidence-based planning and budgeting. As a result, budget allocation for MNCH services increased in the 10 districts.

Evidence Generation, Policy Dialogue and Advocacy

Evidence generation, including through data analysis, provides key inputs for UNICEF’s policy advocacy in a middle income country like Indonesia. A UNICEF assessment of existing national data in 2014 drew attention to the high prevalence of child marriage. This data will be used for an advocacy strategy, aimed at ending early marriage.

UNICEF also mapped out the situation of Out-of-School Children, using a Community-Based Development Information System. UNICEF advocacy contributed to increased Government commitment to monitor and support children out of school.

UNICEF commissioned a review of national guidelines on CCT for child protection (PKSA). With only 10 per cent of beneficiary children receiving complementary social welfare services, low grant value and weak management, the grant impact is limited. In 2015, Ministry of Social Affairs (MoSA) will embark on national child and family welfare reform to expand quality and coverage of integrated social welfare and protection interventions to follow-up the recommendations of the review.

UNICEF, in collaboration with networks of key HIV affected adolescents, successfully advocated for the inclusion of this target group in the National HIV Strategic Plan 2015-2019, paving the way for refocusing the HIV response and leveraging of funds.

UNICEF also analyzed underlying causes of stunting and open defecation, key contributors to child mortality in Indonesia. The findings showed that sanitation and water treatment were
significantly associated with stunting. Research on WASH behaviour in Eastern Indonesia through a Knowledge, Attitude and Practice (KAP) survey also revealed the critical role of social norms and drivers at community level.

Government and academic partners, together with the Centers for Disease Control and Prevention (CDC) and UNICEF, agreed to conduct a meta-analysis of available data and research on violence against children in 2015. This follows an analysis of a previous government-funded survey, which did not yield sufficient quality results.

A financial assessment of Expanded Program on Immunization (EPI) funding flows was conducted in two provinces to understand barriers to effective implementation of EPI programmes. Results will be used for advocacy for more efficient and predictable funding in poor performing districts to improve the quality of services.

**Partnerships**

Building on its previous collaboration for knowledge dissemination, UNICEF Indonesia formalized a long-term partnership with the research NGO Bursa Pengetahuan Kawasan Timur Indonesia (BaKTI) to push for evidence-based advocacy on child rights, particularly in Eastern Indonesia.

As part of the ‘Global Design for UNICEF Challenge’, UNICEF Indonesia partnered with two of the country’s top universities, ITB Bandung and IPB Bogor, to involve students in generating innovative solutions to development issues.

To support the implementation of the new Juvenile Justice Law that entered into force in 2014, UNICEF engaged with the Centre of Child Protection (PUSKAPA) at the University of Indonesia and the Raoul Wallenberg Institute for Human Rights (RWI). Both institutions provided input for related government regulations on the introduction of diversion measures such as out-of-court agreements to prevent young people from being jailed. UNICEF supported the development of training tools on the new law for police officers, judges and social workers.

UNICEF worked with Griffith University (Australia) to develop a model of integrated social services to address child and family vulnerabilities.

Following the launch of the Children’s Rights and Business Principles (CRBP) in 2013, UNICEF, Global Compact Network and Save the Children commissioned Bina Nusantara (BINUS) University to conduct a mapping of company practices vis-à-vis child rights in some regions of Indonesia, focusing on the retail and hospitality sectors.

UNICEF Indonesia partnered with government institutions and NGOs to promote healthy and hygienic behaviour. In NTT Province for instance, UNICEF worked with the Government and the FBO Synod Sumba Christian Church (GKS) to roll out the community approach to total sanitation (CATS), reaching 400,000 people. In Sikka province, UNICEF collaborated with the Diocesan of Maumere and World Vision to improve feeding practices and to promote health seeking behaviour.

The Government appointed UNICEF as the Donor Convener for Scaling up Nutrition (SUN) in Indonesia. UNICEF initiated the formation of a Donor and UN Network on Nutrition to support better alignment, coordination and collaboration between UN agencies and the country’s SUN Movement.
External Communication and Public Advocacy

A main topic of UNICEF’s communication outreach in 2014 was violence against children, triggered by a high-profile abuse case. UNICEF supported government efforts to respond by raising awareness about the risk and impact of violence, including through press conferences and opinion-editorial pieces. UNICEF also collaborated with the Ministry of Women Empowerment and Child Protection (KPPPA) and produced cartoon videos aimed at enabling young children to protect themselves from abuse. By the end of 2014, the videos were viewed by approximately 100,000 people. A full national campaign on violence against children will be launched with government and the private sector in 2015.

Building on results of a KAP study on open defecation, UNICEF launched a digital media campaign “Tinju Tinja” or “Punch the Poo” to encourage people to talk about this taboo topic. It targets a young urban audience, encouraging them to act as agents of change. The launch received major media coverage, thanks to its provocative messaging and support from Indonesian rock star, Melanie Subono.

In addition to providing endless opportunities, the widespread use of the internet and social media in Indonesia also exposes children to risks, as demonstrated by a study on “Digital Citizenship and Safety” conducted by the Berkman Institute at Harvard University and supported by UNICEF and KPPPA. UNICEF and partners, including the KomInfo Ministry, launched the study in 2014, laying the groundwork for a National Action Plan on safe media.

The 10th anniversary of the Indian Ocean tsunami provided UNICEF with an opportunity to showcase the results of its emergency response in Aceh province. UNICEF highlighted the lessons learned on DRR and resilience building which have been informing UNICEF’s emergency work in other countries.

UNICEF used the 25th anniversary of the CRC to raise awareness among the new Government of major challenges and inequities when it comes to realizing children’s rights.

As a pilot country for the global communication and public advocacy strategy and to better communicate its upstream work, UNICEF invested in compelling story telling, including through blogs (http://unicefindonesia.blogspot.com/). In addition to traditional media, UNICEF increasingly reached out to its audiences through social media.

South-South Cooperation and Triangular Cooperation

In November 2014, UNICEF provided technical and financial support to a delegation from the Government of Indonesia attending a global conference on SUN in Rome. The delegates shared lessons learned from Indonesia’s experience in assessing and analysing nutrition data at community level and taking related action. Such cross learning among multi-disciplinary experts is considered critical for the implementation of SUN, in particular to ensure that all relevant sectors participate in the initiative.

UNICEF also facilitated a trip of an EPI Manager from the Ministry of Health to the Philippines to monitor a nationwide Measles Rubella campaign. This was considered a priority as Indonesia lags behind in the achievement of regional measles and rubella control goals. Indonesia remains one of the few countries in the region that have not introduced rubella vaccine in the routine immunization schedule. Through its support, UNICEF aimed to enable the EPI manager to become a leader and change agent for the introduction of rubella vaccine in routine immunization within the Ministry of Health (MoH).
UNICEF conducted South-South learning with UNICEF Nepal to model a cost-benefit analysis of child marriage in Indonesia. The problem of child marriage and early pregnancy is included as a priority in the final draft of the Government’s Medium Term Plan (RPJMN 2015-2019) in part due to such advocacy and analysis efforts.

As part of its support for the introduction of Artemisinin-based Combination Therapy (ACT) as first line treatment of malaria, UNICEF supported a specialized hospital and research centre in Papua in organizing internships for medical staff and facilitated the participation of its Director in a training on the clinical management of malaria at Mahidol University in Bangkok. Subsequently, Indonesia has started organizing such international training itself, with minimal UNICEF support.

**Identification Promotion of Innovation**

The UNICEF Indonesia Innovation Lab set up in 2013 introduced a national version of the global youth poll U-Report. U-Report Indonesia is based on a closed Twitter account to capitalize on the popularity of social media in the country. During the pilot phase until the end of 2014, UNICEF generated 1,500 young followers, who discussed topics such as violence against children, child marriage and breastfeeding. UNICEF further developed tools to analyse the responses, which will be shared for follow up with Government partners, once the project is launched in early 2015.

The Lab also rolled out the ‘Global Design for UNICEF Challenge’, in partnership with two universities. Through the project, university students developed innovative approaches to address development challenges like open defecation and birth registration. Some 140 students submitted 33 ideas which are being analyzed to identify those that can be prototyped for scale up in 2015.

Another initiative focused on promoting adolescent engagement in emergency response, using the tenets of Human Centred Design. In partnership with Muhamadiyah Disaster Management Center (MDMC) and Indonesia Red Cross (PMI) the project was piloted in neighbourhoods in Jakarta that are regularly flooded. The young participants developed innovative solutions to problems such as wait times at shelters for meals and access to showers, and created prototype solutions such as portable showers, and youth friendly spaces for prayer.

Building on the previous pilot for the use of Short Message Service (SMS) to improve skills of midwives in remote areas, UNICEF worked with MoH and the Midwives’ Association on scaling up the programme to potentially 10,000 midwives in Central Java. UNICEF also provided support in establishing a central online database for cold chain equipment inventory (CCEI) in 22 Provinces; 1,000 units of electronic visual display temperature monitoring devices in two provinces; and five units of a low cost android smartphone-based temperature device in 5 cold rooms in Java. This enables real time access and regular updating of information databases on cold chain equipment.

UNICEF also partnered with UN Global Pulse to monitor parental perceptions on immunization by mining social media data.

**Support to Integration and cross-sectoral linkages**

The coordination of its programme by BAPPENAS and existence of multi-sectoral expertise in its staff give UNICEF a unique advantage in supporting cross-sectoral collaboration for the
In Early Childhood Development (ECD), the partnership between the Government and UNICEF focused on the socialization of the presidential decree on Holistic Integrative Early Childhood Development (HI-ECD) issued in August 2013. This involved close collaboration between BAPPENAS, Kamenkokesra, and the Ministries of Home Affairs, Health, Education, Social Welfare and Children and Women’s Affairs. The socialization led to increased issuance of decrees and guidelines by provincial governors and district heads (Bupatis), and is expected to lead to the allocation of Village Funds for ECD activities.

Similarly, social policy and nutrition programmes have come together to support the Government in demonstrating the impact of linking PKH (cash transfer programme) to nutrition interventions (PKH Prestasi). The evidence generated from this initiative is expected to feed into broader policy dialogue on enhancing the effectiveness of the cash transfer programmes.

Adolescent development is integral to UNICEF’s partnership with the Government of Indonesia (GoI), which involves enhancing inter-sectoral synergies to develop a broader investment framework for the second decade of life. UNICEF builds technical capacities of partners to ensure that needs and vulnerabilities of adolescents are factored in to programme implementation. On child marriage and adolescent health, UNICEF served as a convener between adolescents and youth networks and Government to ensure their inclusion in public dialogue and development of programmes at the local and national levels.

**Service Delivery**

UNICEF’s role in service delivery in Indonesia is minimal given the country’s middle income status and resources available to the Government. Foreign monetary assistance represents a small proportion of overall budget.

UNICEF’s focus was on technical support and policy advocacy to ensure that services for women and children in Indonesia are delivered efficiently, effectively and equitably. Policy advice, evidence generation and capacity building were the primary focus, with service delivery limited to special circumstances such as response to emergencies.

The elements of UNICEF’s programme that can be loosely classified as service delivery are when support is provided to implement innovations and service delivery models to test implementation for future adaptation and replication using Government funds. Given the focus on replication, the emphasis is less on the conventional outcomes like supplies provided or services delivered but rather on the ability to replicate; the so-called multiplier effect for scale-up. UNICEF is increasingly involved in monitoring of services provided by Government or other implementing partners.

**Human Rights-Based Approach to Cooperation**

As recommended by the 2012 Global Evaluation of UNICEF’s application of the Human Rights Based Approach to Programming (HRBAP), UNICEF Indonesia continued to strive for the integration of human rights principles in all stages of the programme cycle. Following the Mid Term Review (MTR) in 2013 and the launch of the Government’s own medium term strategic planning efforts in January 2014, UNICEF supported the Government to facilitate a national consultation with children and adolescents from across the country. Children and adolescents presented their recommendations to the Government on which areas should be the priority for future national investment, including by the newly elected president. Children asked the Government to place greater emphasis on improving the lives of children from poor families,
children living with disabilities and children exposed to or at risk of violence, exploitation and abuse. The Government’s new strategic plan (RPJMN) 2015-2019 will be launched in January 2015 and UNICEF will help to conduct an evaluation together with children and adolescents on its incorporation of children's earlier ideas and views.

To better strengthen its own integration efforts, UNICEF Indonesia organized a Programme Policy and Procedures (PPP) workshop, including dedicated training on the Human Rights Based Approach to Programming (HRBAP), for staff in December 2014.

Concluding observations of the UN Committee on the Rights of the Child were released in June. More than a decade had lapsed since the previous report before the Government of Indonesia presented its (combined) Third and Fourth Report to the Committee in 2013. The observations by the Committee are critical to the design of UNICEF’s new country programme 2016-2020. UNICEF Indonesia will use the CRC observations to focus future programming efforts toward Mid Term Review the most vulnerable children and women in the country, including those marginalized by growing urbanization, disabilities, gender inequality and emergencies.

### Gender Mainstreaming and Equality

Gender equality has been UNICEF Indonesia’s key cross-cutting theme and was addressed through a dual approach of gender mainstreaming across sectoral activities and specific programmes focused on gender equality. A gender review was conducted in 2014 to strengthen UNICEF Indonesia’s work on gender equality. The findings and recommendations will inform 2015 activities and formulation of the next country programme.

Child marriage is a significant challenge to achieving gender equality and women’s and girls’ empowerment in Indonesia. In 2014, UNICEF worked toward building an advocacy case to reform the marriage legislation. The 1974 Marriage Law discriminates against girls, legalising the age of marriage at 16 years for girls and 19 years for boys. UNICEF partnered with a network of local legal civil society organisations to support the preparation of an advocacy brief for the Constitutional Court, arguing that the Marriage Law is unconstitutional and inconsistent with other legislation. A local movement ‘Koalis18’ (or ‘Coalition18’) was formed to promote awareness on the advocacy brief and to increase media reporting on child marriage. As a result, a variety of Islamic, Buddhist and Catholic leaders have spoken out against child marriage, and young people have joined the movement. These efforts illustrate a growing momentum to tackle child marriage in the country, including the active participation of young people in prevention and response programming.

In the WASH sector, gender differences carry important implications. For instance, in several parts of Indonesia women bear the burden of water collection. Analysis of MYCNSIA 2012 survey data show that more than 80 per cent of water collection and transport was being done by women and girls. UNICEF Indonesia worked with female sanitarians to mobilise communities around the issue of sanitation, with a strong focus on gender-balanced participation. Mining of WASH in Schools (WinS) data has shown a higher percentage of functioning toilets available for girls but little verification of this data has been done to date. UNICEF is analysing WinS data from the gender perspective and a major field level analysis and sustainability study are underway.

### Environmental Sustainability

Climate change is widely acknowledged as a major threat to the people and the development of Indonesia due to alterations in water and agricultural systems, extreme weather, and various
forms of environmental degradation. Given the increase in frequency and magnitude of climate-related disasters and extreme events, it is essential to continue to integrate climate change in national development and policy and to strengthen DRR programmes and actions.

UNICEF supported the Government of Indonesia in fulfilling its commitment toward a “Post-2015 Hyogo Framework for Disaster Risk Reduction”. UNICEF worked with the Government and other stakeholders at national and sub-national levels, with an aim to improve the capacity of Government and civil society for child-centred DRR, and to use evidence to strengthen DRR with an equitable focus on the most vulnerable children, adolescents and women.

In 2014, UNICEF Indonesia conducted a national level child centred risk assessment incorporating multi-hazards, vulnerabilities and climate data. This was a fundamental step for risk informed development programming. To mainstream DRR in development programming, UNICEF also took the child centred risk assessment to the sub-national level.

In partnership with city-level stakeholders, UNICEF piloted the ‘Child Friendly Resilient City’ in Surabaya. This involved a city level risk assessment and will create an evidence base for upstream policy advocacy by using local evidence alongside international best practices to advocate for increased resource allocation to child-focused DRR in sub-national planning and budgeting.

UNICEF programmes take into account environmental and climate issues as part of DRR. Under WASH, several programmes, such as sustainable community led sanitation, hand washing with soap campaign and school led total sanitation, focus on human waste disposal, cleanliness, garbage disposal and behaviour change.

**Effective Leadership**

UNICEF Indonesia had active statutory committees in place and membership was reviewed regularly. The local Central Review Board (CRB) met nine times (completing the review of 15 cases), the Contracts Review Committee (CRC) met 27 times (completing the review of 58 cases) and the Property Survey Board met four times (completing the review of 12 cases).

The 2013 Audit report was received by UNICEF Indonesia in March 2014 and by mid-June all 12 of the recommendations were addressed or closed. The Country Management Team (CMT) met monthly to review programme indicators, with a focus on monitoring closure of audit recommendations, programme implementation through financial performance, assurance exercises to ensure adherence to the revised Harmonised Approach to Cash Transfers (HACT) guidelines, and outstanding liquidations on funds disbursed to partners. UNICEF Indonesia recognised the need to closely monitor the timely liquidation of funds and this was stated as an area of improvement in the audit report. Consequently, this was a priority area of focus for all programme managers and was closely monitored by the CMT during 2014.

Managers have an overall knowledge of risk mitigation measures and partners were reviewed and assessed comprehensively prior to embarking on a partnership. Regular assurance exercises were undertaken in line with the needs identified during annual planning sessions as well as in response to evolving needs. Programme managers performed regular programmatic visits. Documentation of HACT monitoring was acknowledged as an area for improvement.

Emergency Risk Management procedures were reviewed and updated in January 2014 and areas of high risk were reviewed and revised. While the crime rate in Indonesia remains low,
compared with other highly populated mega-cities, concerns remain about potential political unrest, natural disasters, and epidemics of communicable diseases.

Indonesia is a known disaster prone country and this was taken into account in the development of business continuity plans for the office. UNICEF Indonesia engaged in the process of simplifying the format and documentation of these plans using new technology, as the previous versions are more than ten years old. Discussions are ongoing with the Regional Office and revised, simplified documentation of these plans and procedures will be available by early 2015.

**Financial Resources Management**

Financial resource management was conducted through the compilation of monthly indicators monitored by the CMT. Monitoring included the timely receipt of grants and their allocation; utilization of funds prior to grant expiry; and liquidation of cash transfers. Timely fund utilization or rephrasing and the systematic implementation of assurance activities needed improvement and were closely monitored by the CMT.

In 2014, the Integrated Budget was fully utilized and the funds available from Other Resources (OR) with grant validity beyond 2014 were re-phased before financial closure. The liquidation of cash transfers at the end of 2014 closed with 20 per cent outstanding liquidations between 6 to 9 months.

The amount that passes through the Office totalled US$25 million, 10 per cent less than 2013 and 29 per cent less than 2011. The reduced throughput is likely explained by UNICEF’s upstream role in a middle-income country with substantial resources and the new fund channelling law that limits transfer of donor funds directly to provinces and districts. Despite UNICEF’s proactive adaptation to the new law, the lack of clarity in operating procedures during the transition period contributed to the decreased throughput.

To ensure greater efficiency, five bank accounts (from a total of twelve) were closed and e-banking was adopted to expedite fund transfer. Bank reconciliations were completed on time with no outstanding transactions.

In 2014, the Finance and the Private Sector Fund-Raising teams collaboratively identified a dedicated Finance Assistant to manage financial recording and reconciliations. This has improved controls on incoming funds.

UNICEF Indonesia continued to adapt to the proposed establishment of the Global Shared Services Centre (GSSC). The Institutional Budget was reduced in line with the Regional Office target by delimiting a vacant position. A review of financial work-processes has been initiated to align with the proposed GSSC workflow.

**Fund-raising and Donor Relations**

In 2014, UNICEF Indonesia raised US$22 million OR, which corresponds to 83 per cent of its annual OR ceiling of US$25.5 million. The income included multi-year grants from Government donors, including USA, Australia, Netherlands, Norway and Canada, totalling US$14 million. National Committees (NatComs) contributed US$1.5 million, with the US Fund, the Australian NatCom and Swiss NatCom being the top contributors. Approximately US$6.5 million was generated from local private donors (individuals and corporate donors), an increase from the approximately US$6.1 million in 2013.
UNICEF Indonesia had approximately 40,000 pledged donors. Four companies and one foundation donated funds in excess of US$100,000 each. Approximately US$500,000 was raised through a public television event in collaboration with Metro TV and via other targeted fundraising events for emergencies in Afghanistan, Iraq, South Sudan, State of Palestine and Syria. US$650,000 was allocated to global regular resources, while the remaining private donor funds were used for programmes in Indonesia and to cover local fundraising costs.

For the overall programme cycle, total allotment of other resources regular (ORR) by the end of 2014 was US$95.9 million, corresponding to 75 per cent of the Country Programme Document (CPD) ceiling of US$127.5 million. In 2014, ORR allocation reached US$17.9 million, including US$ .76 million Thematic Funds. Actual expenditure reached US$15.3 million.

In 2014, 27 donor reports/human interest stories were due and all were submitted on time. UNICEF Indonesia has an internal quality assurance system for donor reports and external editorial support is used when required.

**Evaluation**

In 2014, the evaluation function was led by the Planning, Monitoring and Evaluation (PM&E) Unit, which was created following the 2013 Mid-Term Review (MTR). The PM&E Unit operates independently from the rest of the programme structure.

The PM&E Unit manages the Integrated Monitoring and Evaluation Plan (IMEP) for the office in collaboration with programme staff. The IMEP provides a framework for all research and evaluation activities that contribute to the evidence base of the programme. The annual IMEP is updated regularly based on the overall framework provided by the five-year IMEP, developed at the beginning of the country programme.

Evaluations are managed with an emphasis on carefully safeguarding their independence and impartiality. Programme staff provide technical inputs to the evaluation, as required, but do not exert undue influence on the process and outcomes.

In 2014, UNICEF Indonesia successfully completed evaluations of WASH, HIV/AIDS (in Papua province) and UNICEF’s support to Decentralisation. Each evaluation warranted a management response, closely monitored quarterly by the Country Management Team (CMT). Evaluation recommendations and follow up actions have the potential to make significant contributions to improving programme strategy and design. For WASH, recommendations focused on knowledge management and monitoring systems. For HIV/AIDS in Papua, recommendations focused on equity, consolidation, monitoring systems and intersectoral linkages. For Decentralisation, recommendations focused on field engagement, fund channelling, and upstream work in light of government regulations for sub-national fund channelling.

An evaluation of the Systems Based Approach to Child Protection initiated in 2014 will be completed in early 2015.

There were also two external evaluations on the USAID-funded programme on MNCH and Malaria in Eastern Indonesia as well as the Australian Department of Foreign Affairs and Trade funded programme on Evidence-based planning in Papua. Recommendations from these evaluations will inform necessary programme adjustments.
Efficiency Gains and Cost Savings

UNICEF Indonesia engaged in several efforts to improve efficiency and cost savings within UNICEF and the broader UN community.

The UNICEF Chief of Operations, as the Chair of the Operations Management Team (OMT), led efforts to improve transparency and reduce costs of the common UN budget.

Pre-empting an increase in office rental costs, UNICEF took a decision to reduce the physical space of the Jakarta office to 1,000 square metres (from 2,000 square metres previously) and adopted an open plan design to accommodate all personnel in the reduced space. This has resulted in an approximate US$300,000 per annum reduction in rental and maintenance costs of the UNICEF premises. An added advantage of the open plan design is that while it can successfully accommodate the approximately 90 Jakarta-based staff, it can easily be reconfigured to accommodate up to 150 persons in the same space in case of humanitarian emergency.

In response to an offer of free premises by the Provincial Education Office, the Banda Aceh Field Office moved into new premises in 2014. This resulted in a reduction of US$40,000 per annum in expenses for rental and maintenance costs.

The aging fleet of vehicles owned by UNICEF Indonesia was reviewed and older vehicles were disposed of through proper mechanisms. The Representative’s vehicle, more than ten years of age, was replaced by a vehicle which was priced lower than a direct replacement of the previous vehicle.

Supply Management

In 2014 the annual supply plan was projected at US$9.5 million, including US$8.5 million for service contracts and US$0.9 million for procurement of goods. Actual procurement values totalled US$4.7 million (including US$4.1 million for services). UNICEF Indonesia supported the procurement of school furniture for UNICEF Guinea. In 2014, UNICEF Indonesia raised 17 Long-term Arrangements with an estimated value of US$7.5 million, 87 per cent of which was for Private Sector Fund-Raising services to recruit regular pledged donors.

An increasing trend of procurement of service contracts has been observed in recent years. Consequently, the CMT requested a review of the profile of the Supply Unit. Based on that review, the Supply Unit was adjusted to strengthen capacity and competence in contracting during 2014.

UNICEF Indonesia concluded a Memorandum of Understanding with the Indonesian Red Cross (PMI) and a standby agreement with Oxfam to ensure emergency supplies. In agreement with Government partners, UNICEF emergency supplies have been handed over to PMI for storage, thus reducing UNICEF’s controlled stock to US$0.22 million.

Security for Staff and Premises

UNICEF Indonesia participated in the Security Management Team (SMT) and Security Cell Meeting (SCM) led by United Nations Department for Safety and Security (UNDSS), where risks to staff safety were reviewed. The UNICEF Chief of Operations is the security focal point for the UN.

In early 2014, political tension in Papua Province between indigenous populations and migrants
from other provinces was experienced and was monitored by UNDSS. Two UNICEF staff members were relocated to a local hotel until the tensions subsided.

There were a number of volcanic eruptions during the year and the UNICEF Emergency Officer was called to monitor the situation. The Government showed strong leadership in ensuring appropriate actions to respond to these emergencies. No UNICEF staff were affected by these events. Tremors and earthquakes are frequent occurrences in Indonesia and are monitored regularly by the Government.

Staff acquire Security Clearance prior to official and personal travel, given that Indonesia is a disaster prone Country. UNDSS has an updated list of airlines (October 2013) adhering to UN standards. International staff request UNDSS assessment of all new residential property in order to benefit from the Minimum Operating Security Standards entitlement.

The Jakarta Office is located in rented premises with security checks at the lobby. Upon advice from UNDSS, UNICEF acquired an x-ray machine and metal detectors for screening of everyone entering the office. Three security guards patrol the office floor. Bomb blast films are installed on the building windows.

Most of the Field Offices also have metal detectors and X-ray machines. Exceptions are those co-located in Government facilities (such as Banda Aceh and Makassar).

**Human Resources**

UNICEF Indonesia’s staff included 126 people in 2014, of which 26 were international and 100 were Indonesian nationals (46 National Officers and 54 General Service staff). New personnel were recruited using the standard UNICEF competency based approach. UNICEF Indonesia continued its commitment to pursue gender and geographical balance during all 22 recruitment actions completed in 2014. The completion of the individual work plans and performance appraisal processes were closely monitored by the CMT and managers were reminded to uphold the integrity of these critical Human Resource Management processes.

In addition to the Global Staff Survey, the Staff Association conducted a rapid survey of staff welfare issues to help define the multi-year work plan of the new staff association executive committee, created in mid-2014. The results covered key staff well-being issues, communication among staff and processes around the development of the new country programme and its impact on staff. More information on human resources policies and processes were requested despite relevant documentation being readily available on the UNICEF intranet. A draft work plan of the Staff Association was developed and will be presented to the CMT in early 2015.

The Office Learning and Development Plan was successful in incorporating individual learning needs with country office, regional and global priorities. Knowledge sharing initiatives were conducted through the delivery of six brownbag lunch events, providing opportunities to expand staff knowledge on key human resource and operational policies, program implementation, and internal work processes.

UNICEF Indonesia relied on the Emergency Specialist and the Human Resource Unit to ensure capacity for early warning and early action among all UNICEF staff and conduct training for staff members. In 2014, two training sessions for UNICEF staff were organized in two Field Offices.

The UN Cares functioned under the UN/OMT and conducted events for UN Staff across all
agencies. Two sessions were promoted on HIV/AIDS in the workplace to ensure awareness of HIV transmission and how to prevent transmission and receive support to check HIV status. The Human Resources Unit team kept an updated list of clinics and counsellors which can be made available to staff.

### Effective Use of Information and Communication Technology

The Information Communication Technology (ICT) Unit operated with reduced staff in 2014 as the team leader moved to UNICEF Iraq and the Senior Information Technology (IT) Assistant was on maternity leave. Former UNICEF IT colleagues were mobilized to cover these gaps.

The migration from Lotus Notes to Outlook in April was smooth. All Microsoft cloud-based tools were activated and an office calendar was operationalized by October. The share-point portal was finalized and will be launched in early 2015.

Connectivity in the Field Offices remains a challenge, especially for video-conferencing, due to weak capacity of service providers in the provinces. A new ICT Officer recruited in December has been tasked to undertake a thorough analysis toward improving connectivity with Field Offices.

UNICEF Indonesia’s digital presence grew substantially in 2014, with a 270 per cent increase in social media followers and a 135 per cent increase in monthly visitors to the UNICEF website compared to 2013. Rather than focusing merely on numbers, UNICEF Indonesia has been emphasising the facilitation of qualitative engagement with its audience. The social media engagement rate is well above industry standards at 9.3 (standard: 1.0) and 18.9 (standard: 10) for Facebook and Twitter, respectively. With more than 92,000 highly engaged followers in total, every UNICEF Facebook post potentially reaches up to 300,000 people, and every tweet receives an average of 55,000 impressions. UNICEF Indonesia’s digital reach is further enhanced by engaging with key influencers, such as celebrities, corporate partners, institutions, and opinion leaders. While most of these engagements are conducted on a pro-bono basis, UNICEF Indonesia also started experimenting with paid social media buzzers, for example during the digital campaign “Tinju Tinja” to promote awareness on sanitation. The result of this approach will be available in early 2015.

### Programme Components from RAM

#### ANALYSIS BY OUTCOME AND OUTPUT RESULTS

**OUTCOME 1:** By 2015, child disparity across all sectors will be reduced through evidence based planning, policy and resource allocation at national level and in 5 focus provinces.

**Analytical Statement of Progress:**
Indonesia’s strong and sustained economic development is leading to a reduction of extreme poverty, but is accompanied by rising income inequality and an increasing number of children being left behind. For instance, a reduction in extreme poverty has been accompanied by a slight increase in wasting rates among children under five years of age. During 2014, UNICEF Indonesia engaged with government partners at national and subnational levels to reduce disparities in child outcomes by strengthening the national statistical system and generating evidence on child poverty as well as advocacy and capacity development in the areas of child-sensitive social protection, evidence-based and child rights-based sub-national planning and budgeting.
UNICEF worked closely with the Central Bureau of Statistics (BPS) to improve the quality of the national household survey Susenas that is used to monitor the implementation of the National Development Plan (RPJMN). Technical support was provided to align the Susenas 2015 questionnaire with international standards and incorporate key MICS indicators, and to strengthen its sampling methodology and fieldwork organization. BPS had the opportunity to present Susenas to the Global MICS Consultation in Jakarta in December as a model for implementing MICS in large middle income countries.

In partnership with the local research institute SMERU, new research and in-depth secondary analysis was conducted on monetary as well as multi-dimensional child poverty in Indonesia and the impacts of migration on children left behind by migrating parents. An update of the 2010 Situation Analysis of Children in Indonesia was drafted, with a strong focus on equity, analysing children’s deprivation across key dimensions of inequity, including geographical and gender. Child-centred research continued to be disseminated through data forums, knowledge hubs and research networks.

Against the background of (yet unpublished) unfavourable evaluations/reviews of the main conditional cash transfers PKH (supported by World Bank) and PKSA (supported by UNICEF), UNICEF initiated advocacy with Government partners for a more generous, more universal and non-conditional cash transfer for children. The PKH Prestasi pilot was completed in Sikkha and is on-going in Brebes, aiming at improving health and nutrition interventions for poor families by strengthening the quality of health services and counselling of mothers and offering Family Development Sessions for beneficiaries to improve their knowledge on infant and young child feeding and child care practices. This was complemented by awareness raising among religious leaders and journalists. The implementation of the pilot was scaled down in 2014 in response to funding constraints. At the end of 2014, donor funding was secured, allowing for the evaluation of the PKH Prestasi pilot in 2015.

Collaboration was strengthened with Bappenas, line ministries and an Indonesian university on developing guidelines and implementation of the child budgeting engagement strategy aimed at mainstreaming it into GoI budgeting works. The implementation of the equity-focused provincial and district planning tool ASIA was further strengthened with capacity development of local government partners for its integration into the development planning process to strengthen a child rights based approach to local development. ASIA is increasingly taken up by new provinces without UNICEF support. ASIA is also linked to the Child-friendly districts/city (CFC/D) initiative. UNICEF provided technical support to local leaders and policy makers to translate national pro-child policies into the local planning and budgeting process, to support selected districts and cities to regularly review progress on the implementation of the CFC/D Action Plan and to strengthen children’s participation through Child Forums in three provinces and eight cities and districts.

OUTPUT 1 By 2015, child disparity across all sectors will be reduced through evidence based planning, policy and resource allocation at national level and in 5 focus provinces.

Analytical Statement of Progress:
Technical support to provide the government and development partners with improved data and more evidence on the situation of children and women continued in 2014.

Technical support on ASIA implementation was finalized with the launching of the national guidelines. It has been disseminated/socialized to all provinces/districts and related line
ministries. Training of Trainers (ToT) for ASIA national facilitators was conducted, followed by a national workshop for the formation of a national body to supervise and coordinate ASIA implementation at sub-national level. ASIA implementation was strengthened with routine Ministerial regulations for the development of sub-national planning documents always referring to ASIA and routine allocation of national budget at Ministry of Home Affairs (MoHA) to support its implementation. In 2015, ASIA will be replicated by other provinces/districts with government resources.

Partnership with BPS to improve the Susenas, which began in mid-2013, continued successfully. The new Susenas questionnaires (especially KOR) were produced and better aligned with international standards of definitions and features, incorporating MICS. The use of Susenas indicators for monitoring the RPJMN was further discussed with Bappenas. The new Susenas will be implemented in 2015. The work on improving the methodology, sampling, data processing, and reporting will be continued in 2015.

UNICEF actively participated in the GoI-UNFPA/WHO initiative to develop the instrument for the new survey on disability, and successfully advocated for the incorporation of the new working group-UNICEF child disability module into the instrument. The National Launch of the special survey on disability was conducted in May 2014, which resulted in government commitment to fund the implementation of the survey in 2015.

Under partnership with SMERU, the child poverty study was updated with more recent national SUSENAS data and a study on children left behind by migration was drafted.

The first draft of situation analysis was completed. Emerging issues identified by SitAn were presented at the Strategic Moment of Reflection in November to begin the consultation process with the Government and other stakeholders as part of the CPD development.

**OUTPUT 2** By 2015, evidence, advocacy and partnerships have influenced child-centred social protection reform.

**Analytical Statement of Progress:**
Against the background of a narrowly targeted and restrictive conditional cash transfer system (PKH for the poorest families and PKSA for child protection) with high administrative cost, UNICEF began advocating for a reform of the social protection system toward child grants that are more generous, more universal and unconditional, while at the same time improving the accessibility and quality of services for poor families.

In support of the latter, technical support continued to be provided to the PKH Prestasi pilot in two districts (Brebes and Sikkha), which links child health and nutrition related services to the PKH CCT. In 2014, monitoring tools for Family Development Sessions (FDS) were developed. All PKH Prestasi facilitators in both pilot areas were trained on FDS. UNICEF continued to partner with Nadhlatul Ulama, the largest Muslim-based organization in Indonesia, and also with the Catholic church in Sikkha for spreading health and nutrition messages through religious leaders. The training of religious leaders’ groups had to be postponed to 2015 due to pending decisions of GOI regarding the evaluation design for the pilot. The primary challenge experienced in implementing the PKH Prestasi pilot was the delay and shortage of funding, which prevented full scale implementation. With donor funding made available, programme implementation and evaluation will be completed in 2015.
By December 2015, development planning including RPJMN process informed by evidence and equity-based priorities for children at national and sub-national level

Analytical Statement of Progress:
Technical support was provided during 2014, including facilitation of the development of operational guidelines on components of the program to be included into annual local government planning and budgeting exercises. At the district level, UNICEF supported the local governments of Klaten and Brebes to develop planning and budgeting guidelines to mobilize the “Village Budget under the Village Law” in 2015. UNICEF also mobilized a CFC/D task force of selected Cities and Districts to conduct regular reviews of the progress of the CFC/D plan of action and to ensure the agreed plan of action is institutionalized and implemented. As a result, there are various significant increments of budget allocations to support the implementation of the CFC/D plan of action in three provinces and in eight selected Cities/Districts. Child Participation through Child Forums in all eight selected districts grew, with more than one hundred Child Forums at sub district and village levels. Kota Pasuruan declared that every village have an established child forum as the precondition for establishing Child Friendly Villages. Capacity development for Child Forums and Advocacy Forums continued, including the end of violence campaign, peer educators and child friendly schools, as well as birth registration. At the province level, UNICEF advocated with provinces and other districts/cities to adopt the CFC/D approach to realise the CRC. As a result, almost 80 per cent of districts/cities in East Java and Central Java declared their intention to become child friendly, and 21 districts/cities in central Java and seven in East Java were awarded by Ministries of Foreign Affairs (MFA) and Women Empowerment and Child Protection.

By 2015, child centred and policy-oriented socio-economic analysis strengthened amongst key national and sub-national research partners

Analytical Statement of Progress:
In 2014, UNICEF formed a partnership with Bakti in Makassar to work on Monitoring Results for Equity Systems (MoRES). UNICEF’s partnership with SMERU resulted in several research products: an update to the child poverty and disparities study of 2012; a study on how children are affected by the migration of their mothers; two videos on children affected by migration (a short and “catchy” three minute video and a longer informative one); and a study on multidimensional poverty that will be expanded upon in 2015. The partnership with Diponegoro University (UNDIP) produced work and final conclusions on their Child Budgeting trainings and Benefit Incident Analysis of education in the Polman District but did not fully achieve its main objective by the end of the contract.

Through the strategic partnership with SMERU and the establishment of JPAI (a research and evaluation network for child rights and policy), UNICEF expanded its networks for generation and dissemination of evidence on key child rights issues. The JPAI network was established in 2011 and has since hosted multiple annual meetings and trainings, in addition to facilitating information sharing electronically and over the internet (through its own website and Facebook, on which it has 56 members as of December 2014). The heavy focus on finalizing research during the last quarter of 2014 let UNICEF and SMERU identify important findings (particularly on children left behind by migrating mothers) that will be valuable inputs to the child research community and to policy practitioners in 2015. The findings will be shared through a national workshop planned for the third quarter of 2015.

Jakarta Research/analysis of policy, budgets, legislations for upstream advocacy
Analytical Statement of Progress:

UNICEF provided human resource support to help contribute to the achievement of other outputs within the programme component, or across Programme components in the country programme of cooperation.

OUTCOME 2 By 2015, political will to increase prioritization of children and women’s rights in policies, programmes and resources strengthened as a result of strategic partnerships and improved knowledge management

Analytical Statement of Progress:

UNICEF used a variety of communication channels in 2014 to pursue its child rights agenda in Indonesia and to promote a change in harmful attitudes and behaviour. A high-profile case of alleged child sexual abuse in an international school triggered broad coverage by both national and international media. Building on evidence gathered for the Indonesia launch of the global UNICEF campaign #EndViolence against Children in 2013, UNICEF raised public awareness of the prevalence of violence against children in many parts of the country, using both traditional and digital media channels. This included press releases, social media posts, blogs and opinion-editorial pieces signed by the Representative. In close collaboration with government partners, including the Ministries of Health and of Women’s Empowerment and Child Protection (KPPPA), UNICEF participated in a round table discussion with key editors-in-chief, welcoming the President’s Instruction to Ministries and other government institutions to address violence against children as a priority. UNICEF used this and other opportunities to remind the media of their obligation to respect and protect the rights of children who have become victims of violence or abuse. In close collaboration with KPPPA, UNICEF developed two animated videos that aim to enable young children to protect themselves from sexual abuse. The cartoons were disseminated via the internet and other channels and have been viewed broadly.

UNICEF used the global launch of the State of the World’s Children Report and the 25th anniversary of the CRC on 20 November to commend Indonesia for its commitment to children’s rights and the progress made in this regard, while at the same time highlighting the unfinished business in terms of children rights realization and equitable MDG achievements in the country. Through two ACTIVATE Talks in Jakarta, UNICEF provided a platform for young innovators and development leaders to showcase their efforts to find new solutions to long-standing development challenges such as the low rate of exclusive breast feeding, low quality of education particularly in remote areas and young people’s access to adequate HIV prevention and support services.

With view to the tenth anniversary of the Indian Ocean tsunami on 26 December, UNICEF developed media story ideas to illustrate the outcomes of UNICEF’s support to Building Back Better and long term development in Aceh province, the most affected region, where there were approximately 170,000 deaths. UNICEF facilitated visits to Aceh by some of the National Committees that were the main donors to the tsunami operation and for national and international media. The stories on reunification of children post-tsunami, emergency training in schools, the reform of the juvenile justice system and successes in strengthening the health system, including the elimination of malaria in certain areas, were covered broadly.

The Communication for Development and Social Media units, in collaboration with the WASH section, developed a digital campaign to promote an end to open defecation, one of the key contributors to child mortality in Indonesia. The launch of the digital campaign “Tinju Tinja” (Punch the Poo) together with the Indonesia Rock Star Melanie Subono received massive
media attention and was picked up broadly on UNICEF’s social media platforms. The campaign, which targets mainly urban residents who are invited to act as agents of change in their families and communities, will be further pursued in 2015 with the aim to fuel a social movement to make open defecation socially unacceptable.

All UNICEF advocacy efforts were supported through UNICEF’s digital platforms, which saw a substantial increase in their followership in 2014. The number of fans and followers on social media grew by 270 per cent, the number of visitors to the UNICEF Indonesia website increased by 135 per cent. In line with its social media strategy, UNICEF put particular emphasis on two way communication, resulting in engagement rates well above industry standards, at 9.3 (standard: 1.0) and 18.9 (standard: 10) for Facebook and Twitter, respectively. With more than 92,000 highly engaged fans/followers in total, every Facebook post has the reach potential of up to 300,000 people, and every tweet receives an average of 55,000 impressions.

In an effort to make UNICEF’s work more tangible, programme staff wrote blogs and human interest stories about their experiences in the field. These contributions proved to be among the most popular for visitors to the UNICEF Indonesia website.

UNICEF further documented results, evidence and lessons learned through Issue Briefs and other Knowledge Management products on topics such as adolescents affected by HIV and AIDS (Young Key Affected Populations, YKAP), the Strategic Use of antiretroviral treatment, system building for child protection and Sports for Development. UNICEF also commissioned an assessment of the government-led Child Friendly City/District initiative, which had been supported by UNICEF since 2006. Based on the findings, the study recommended strengthening the monitoring mechanisms for the implementation of the initiative and capacity building of staff. The results and recommendations were presented and validated during a national workshop with the Ministry of Women’s Empowerment and Child Protection as well as representatives from the child friendly cities and districts.

OUTPUT 1 By 2015, the capacities of select government partners to develop and implement evidence-based behaviour and social change communication strategies are enhanced

Analytical Statement of Progress:
Since the beginning of the Country Programme in 2011, the evidence base on knowledge, attitudes and behaviours regarding immunization, nutrition, out of school children and other issues was strengthened through several studies, based on which strategies were developed and implemented in partnership with government and other partners. In 2014, another study was undertaken on open defecation and hand washing. This was used to develop a national advocacy and behaviour change strategy and a multi-media campaign Tinju Tinja.

Preparation began for the upscaling of the InfoBidan pilot project to increase knowledge and improve counselling skills of midwives through SMS messages. A partnership was established with the midwives’ association in Central Java and a telephone survey was undertaken to determine the most appropriate technology for scaling up the project. Based on the findings, mobile apps and related content are now being developed. In partnership with government counterparts, TV public service announcements (PSAs) to support the implementation of the complete immunization strategy are under development. The air time will be funded by the government. A campaign to support the global #EndViolence campaign, in partnership with a private sector partner, is also under development.

The recommendations of the review of the government’s Clean and Healthy Lifestyle
programme (PHBS) were finalized, and advocacy was undertaken for their incorporation into the government’s next medium term strategic plan (RPJMN). To support the government’s conditional cash transfer programme (PKH-Prestasi), innovative multi-media materials were developed and facilitators were trained in their use. The government is adopting these materials in its national nutrition programme. To build the capacity for Communication for Development in Indonesia, an appropriate partner to develop and implement a course was identified, the partnership was established and a needs assessment to assess the demand is underway.

OUTPUT 2 By 2015, partnerships and relationships developed and enhanced to advocate for and promote children’s rights and equity

Analytical Statement of Progress:
During the first half of the Country Programme, focus was mainly on supporting the child-friendly city/district (CFC/D) initiative and children’s forums. As recommended during the Mid-Term Review, UNICEF commissioned an assessment of this Government-led initiative, which UNICEF had been supporting since 2006. The results were handed over to the Ministry of Women’s Empowerment and Child Protection (KPPPA) and disseminated during a workshop with sub-national counterparts. The recommendations pointed toward the need to strengthen progress monitoring and reporting frameworks as well as capacity building of staff. UNICEF’s technical support to the assessment and its dissemination was viewed as an important contribution by the Government. The recommendations were validated in a workshop with representatives of CFC/D and the Ministry.
The 2013 Mid-Term Review of the Country Programme also concluded that UNICEF needed to explore the wide range of potential partners in Indonesia. Initial consultation with Field offices on the mapping of potential partners began in 2014. UNICEF engaged with academic universities and youth organizations within the scope of its innovations initiatives to facilitate youth participation. The collaboration was formalized through Letters of Intent (LoI) with three youth networks and with the IPB Agricultural University Bogor and ITB Bandung. The collaboration is part of the Global Design Challenge for UNICEF, where university students have developed ideas and solutions addressing some of Indonesia’s key development challenges, such as open defecation and birth registration. More than 15 of the participating teams from these universities have made it to the final shortlist of the Global Challenge. The winners will be selected in 2015.

In the context of the UReport_Indonesia initiative, UNICEF signed formal Letters of Intent with three youth organizations, Alianzri Remaja Independen, Synergy Muda, and Pamflet, to mark the partnership between the organizations. Through these partnerships, the youth organizations supported UNICEF in identifying topics that are of importance to young Indonesians, increased UNICEF’s social presence in youth events, and provided technical support in designing the logo and other promotional materials for U-Report.

OUTPUT 3 By 2015, funds from private donors in Indonesia are supporting 25 per cent of the GoI/UNICEF Country Programme requirements, and private sector entities are actively engaged in upholding child rights through their business planning and activities

Analytical Statement of Progress:
Donor retention remained a challenge. At year end UNICEF was updating donor information and data through the Corporate Social Responsible (CSR) Market Research, the results of which will contribute in building the necessary skills around CSR in Indonesia.

In partnership with the government, results for children supported by private sector contributions
this year include: reduction of stunting in Sikka, Klaten, Jayawijaya and Belu; strengthening child participation and child-friendly communities in Central Java and East Java; expansion of integrated malaria control to South Sulawesi and West Sulawesi.

OUTPUT 4 By 2015, journalists and other key stakeholders have improved access to information on and understanding of children’s rights and equity

Analytical Statement of Progress:
UNICEF Indonesia focused on increasing understanding of child rights and the impact of inequities through strategic engagement with national and local media. One key topic has been violence against children, following a high profile case of abuse. UNICEF engaged with media to ensure broader understanding of the extent and underlying causes of different forms of violence against children, including through a high-level round table involving partner Ministries and editors from national media, which provided UNICEF with additional entry points to collaborate with media to raise awareness about violence against children. UNICEF issued press releases, participated in press conferences and pitched opinion-editorial pieces signed by the Representative in support of the President’s instruction to address sexual violence against children.

Launching the annual flagship report *State of the World’s Children* on 20 November, which coincided with the 25th anniversary of the CRC, UNICEF commended Indonesia for its commitment to children's rights and the progress made in this regard, while at the same time highlighting the unfinished business in terms of child rights realization and equitable MDG achievements in the country. On World Toilet Day, the Communication for Development and Social Media units, with the WASH section, launched a digital campaign to promote an end to open defecation, one of the key contributors to child mortality in Indonesia. The launch of the digital campaign “Tinju Tinja” (Punch the Poo) with Rock Star Melanie Subono received massive media attention and was picked up broadly on UNICEF’s social media platforms. The campaign aims to fuel a social movement to make open defecation socially unacceptable.

With view to the tenth anniversary of tsunami, UNICEF reached out to national and international media with story ideas to illustrate the results of the recovery work for children in Aceh province and to raise awareness about the importance of disaster risk reduction. UNICEF organized media visits to schools and ECD centres re-built by UNICEF and pitched stories related to the reform of the Indonesian juvenile justice system, which originated in Aceh after the tsunami. UNICEF also collaborated with National Committees and other UNICEF offices to showcase the successful investment in long term development in education, health and protection in Aceh.

The annual media award with the Alliance of Independent Journalists (AJI) and the training of journalists at sub-national level had to be postponed to 2015 due to a vacancy in the UNICEF Communication Section.

OUTPUT 5 Knowledge management child rights and equity in Indonesia is informed by a strengthened knowledge and evidence base

Analytical Statement of Progress:
In 2014, lessons learned with regard to selected programme initiatives were documented to allow for knowledge sharing, replication, and capacity building of partners. This included a lessons learned documentation for international audiences on Aceh’s experience post-Tsunami, to commemorate the 10 year anniversary of the disaster, allowing for good practices from Aceh to be showcased and used in Disaster Risk Reduction (DRR) management. Other knowledge
management products finalized included Issue Briefs on Young Key HIV-Affected Populations (YKAPs), the Systems Strengthening approach for Child Protection in Indonesia, Innovative Approaches to Sports for Development (S4D), and an in-depth documentation on the Strategic Use of Anti-retrovirals (ARVs) in Indonesia. UNICEF produced a technical guide on U-Report capturing lessons learned on how this innovative youth poll platform was operationalized in a middle income country setting. In commemoration of the 25 years of the Convention on the Rights of the Child, a brief on the CRC Committee’s Recommendations to the Government of Indonesia was also produced and shared with media and the general public. The Issue Briefs allowed for evidence-based advocacy to take place at national and sub-national levels with government and development partners. The Briefs on the situation of YKAPs and the programme on ARVs in Indonesia were tabled at relevant ministries to push dialogue and discussion on the need to look at policy review and formulation to address challenges and gaps. The Knowledge Management unit, in close collaboration with government counterparts, particularly the Ministry of Women’s Empowerment and Child Protection (KPPPA), undertook an assessment of the child-friendly city/district initiative, particularly with regard to the effectiveness of existing coordination mechanisms and the role of children in the decision making process.

OUTPUT 6 By 2015, the general public has increased access to information on child rights and equity

Analytical Statement of Progress:

UNICEF provided human resource support to contribute to the achievement of other outputs within the programme component, or across Programme components in the country programme of cooperation.

OUTPUT 7 By 2015, the general public has increased access to information on child rights and equity

Analytical Statement of Progress:

As part of its public information and advocacy outreach, in 2014 UNICEF organized two (TedTalk-style) Activate Talks involving innovators, in line with the topic of UNICEF’s report on The State of the World’s Children 2015, which focused on new approaches to long lasting development challenges affecting children. UNICEF co-organized a seminar on digital safety, in collaboration with KPPPA and the Ministry for Communication and Information Technology.

UNICEF used its social media channels and websites to disseminate cross-sectoral, visual-oriented informational and educational messages through the design and use of at least one info/factographic per week. Digital channels were utilized to support UNICEF Indonesia’s advocacy agenda, by creating awareness and visibility on violence against children, Tsunami+10 and other topics in the digital realm through targeted social media content.

UNICEF Indonesia’s digital presence grew substantially in 2014, with a 270 per cent increase of social media fans/followers, and a 135 per cent increase in monthly website visitors compared to 2013. UNICEF Indonesia’s social media engagement rate is well above industry standards at 9.3 (standard: 1.0) and 18.9 (standard: 10) for Facebook and Twitter, respectively. With 92,000 highly engaged fans/followers in total, every Facebook post has the reach potential of up to 300,000 people, and every tweet receives an average of 55,000 impressions.

UNICEF Indonesia’s digital reach is further supported by engaging with key influencers – such as celebrities, corporate partners, institutions, and individual opinion leaders – for content.
sharing and dissemination. While most of these are done on a pro-bono basis, UNICEF Indonesia also started experimenting with paid social media buzzers, including for the roll-out of the campaign Tinju Tinja on open defecation, the results of which will be available and analysed in the first quarter of 2015. The launch of the Tinju Tinja campaign received massive media attention and attracted thousands of followers on social and digital media. It involves musician Melanie Subono as main champion who aims to “punch out the poo” to end diseases caused by open defecation.

UNICEF produced more than 50 public information products (e.g. infographics, factographics, fact sheets) that were disseminated mostly through its social media and digital channels. These included a set of fact sheets on Child Protection topics and two animated videos aimed at enabling young children to resist sexual abuse. Audience feedback on the awareness generation videos has been very positive, and they have also been relayed in other public places by national corporate donors.

OUTCOME 3 By 2015, children and young people, boys and girls, are able to express their voices to influence policies and practices affecting their lives

Analytical Statement of Progress:
In line with the recommendation of the MTR, in 2014 UNICEF Indonesia invested in further facilitating the participation of children and adolescents in development processes and in creating spaces where they can safely express their opinion and concerns. A key component in this regard was the finalization of an assessment of the use of the internet and digital platforms by young people in Indonesia, taking into consideration the popularity of these communication channels in the country. The study on “Digital Safety and Citizenship” was initiated in 2012 with the Berkman Institute at Harvard University, in collaboration with the Ministry of Women’s Empowerment and Child Protection. It showed that children and young people in Indonesia massively use the internet to communicate with each other and for their studies. It also revealed that many of them openly share their personal data online and that cyber-bullying is quite common in Indonesia. The study findings were launched in early 2014, bringing together several Ministries, non-government and UN organizations as well as the private sector. Based on the study findings, a National plan of action on safe media is being developed.

UNICEF set up an Innovations Lab in 2013 which focuses on creating space for youth participation. One key project has been the adaptation of the U-Report youth poll platform, a UNICEF initiative that has already been operationalized in several countries, mainly in sub-Saharan Africa. As part of its innovation work, UNICEF developed a pilot version of U-Report_Indonesia to engage with adolescents and youth on issues of their concern, providing them with the opportunity to share their experience and opinion in response to concrete questions. UNICEF Indonesia opted to use a closed Twitter account to set up U-Report, while in other countries the U-Report initiative is implemented through SMS. The Twitter option proved to be less costly, but led to technical hick-ups during the pilot phase. In 2015, UNICEF plans to massively scale up U-Report_Indonesia, including through a targeted media campaign. Topics discussed so far include violence against children, secondary school dropout, child marriage and other child rights issues. The responses received are analysed and form the basis for evidence-based advocacy with the government on challenges affecting the lives of young Indonesians, and are expected to bridge the gap between young people and the government and other duty-bearers such as parliamentarians, media, and NGOs.
OUTPUT 2 Media literacy

Analytical Statement of Progress:
Against the background of steady increase in the use of digital platforms and the internet in Indonesia, concerns over safety of children in the virtual space has concerned both UNICEF and government partners since the onset of the new Country Programme. In 2012, a collaborative effort between UNICEF and the Ministry of Women’s Empowerment and Child Protection was made to engage with the Berkman Institute at Harvard University to undertake a comprehensive study that could help understand the actual risks and opportunities vis a vis children’s engagement in the digital space. In April 2014, the completion and launch of the Digital Citizenship and Safety study in collaboration with the Ministry of Communication and Information Technology, KPPPA and the Berkman Institute at Harvard University brought together a variety of actors, including from government, other organizations and the private sector. The study findings indicated the need to better educate children about the opportunities and risks of engaging on digital platforms. Based on the study findings, a National plan of action on safe media is being developed. In 2015, UNICEF will pursue the collaboration with the Ministry of Women Empowerment and Child Protection, which leads the effort, and other ministries to support the finalization of a country wide action plan.

OUTPUT 3 Adolescent participation adolescents have increased opportunities to express their views and contribute to development process

Analytical Statement of Progress:
The MTR reiterated the need to strengthen adolescent and youth participation and also to look at the scope of innovations within this context. This recommendation led to the conceptualization and operationalization of an Innovations Lab in Indonesia, which is strongly linked to and guided by the overall innovations work that is being led by UNICEF New York. Given that youth (under 25) constitute nearly one-third of the country’s population, and the use of social media and digital platforms is widespread, UNICEF decided to launch the U-Report platform in Indonesia to engage and incorporate adolescents and youth in processes of social development. UNICEF developed a pilot version of U-Report_Indonesia to engage with adolescents and youth (1,500 U-Reporters registered during the three month pilot phase) on issues of importance to them. Details of the project were presented and discussed with the Ministry of Women Empowerment and Child Protection. Owing to the high social media access and engagement rates among young people in Indonesia, UNICEF decided to use a closed group account on Twitter for the U-Report project. Indonesia is the only country using Twitter for the U-Report project to date.

Communication and outreach materials (including PSAs and a dedicated website) for U-Report were produced in partnership with adolescent and youth organizations and their inputs provided the basis for improving technical aspects of the platform. Topics discussed so far include violence against children, secondary school dropout, child marriage and other child rights issues. The responses received were analysed and formed the basis for evidence-based advocacy with the government on challenges affecting the lives of young Indonesians, and are expected to bridge the gap between young people and the government and other duty-bearers such as parliamentarians, media, and NGOs.

U-Report_Indonesia will be formally launched in 2015 to reach much bigger audiences.
OUTCOME 4: By 2015, children and women, especially the most vulnerable, benefit from improved access to and delivery of quality basic services such as nutrition, water, sanitation and hygiene, prevention of mother-to-child transmission, health, including in emergencies.

Analytical Statement of Progress:
The Indonesia Demographic and Health Survey (IDHS) 2012 data showed slow progress in reducing child mortality, estimated at 40 per 1,000 live births compared to 44 per 1,000 in 2007. Maternal mortality is even more concerning, estimated at 359 per 100,000 live births in 2012 compared to 228 per 100,000 in 2007. There has not been any change in the national estimates for stunting between 2007 and 2013.

UNICEF efforts in Child Survival & Development (CSD) completed the shift from a focus on service delivery to a focus on ‘upstream’ work involving technical support in identifying bottlenecks, policy advocacy, evidence generation, capacity building and monitoring with an equity lens. Indonesia is a middle-income country with considerable domestic resources to support social services and foreign aid represents a small proportion of overall needs.

The SUN Movement increased attention on child stunting and maternal undernutrition in Indonesia. UNICEF provided technical support to policies and guidelines and advocacy toward government decrees to support this initiative. In 2014, UNICEF was assigned to be the Donor Convenor for the SUN Movement in Indonesia and the effective execution of this role will be a priority for 2015.

UNICEF continued to advocate for the monitoring of violations of the ‘International Code on marketing of breast milk substitutes’. UNICEF advocacy contributed to the release of a Ministerial Decree in 2014 that stipulates the process for imposing sanctions against violations of the government regulations. UNICEF also supported the development of a Background Paper on Nutrition to inform the five-year National Medium-Term Strategic Plan (RPJMN). The paper covered current and emerging nutrition issues and recommended policy directions and strategies for all major sectors, including health, WASH, agriculture, food security, education and social protection.

Support was also provided for the development of a Ministerial Regulation on community-based Integrated Management of Childhood Illness (c-IMCI) in December 2013 to increase access to diarrhoea and pneumonia treatment in remote areas without qualified health providers. UNICEF continued to support the cluster island approach to improve referral pathways for maternal health services in Eastern Indonesia. A provincial Law legalised the approach in Maluku province in 2014.

UNICEF supported a Health Expenditure Tracking Study (HETS) to identify bottlenecks that hamper movement of funds from the central to sub-national level in the health sector as well as a more focussed financial assessment of immunisation funding flows in selected districts to inform corrective action and advocacy. In 2014, UNICEF also supported the development of Indonesia’s Supply Side Road Map of Universal Health Coverage (UHC) to inform supply needs to address the increased demand for services following UHC implementation.

UNICEF supported a Malaria Consortium to conduct research to inform malaria programmes and jointly published five peer-review articles, with an additional three due for completion in 2015. UNICEF continued to support malaria elimination in Sabang District in Aceh Province, a model which is being used to guide malaria elimination elsewhere. UNICEF used the attention, resources and structure of a disease specific programme as a wedge to improve health system
bottlenecks and to leverage existing funds for replication and scale up.

In 2014, UNICEF, in collaboration with WHO, supported the implementation of option B+ to increase access of pregnant women to HIV diagnosis and treatment in four pilot sites. This has already led to the trebling of national coverage of HIV testing among pregnant women.

Secondary data analysis to strengthen the national WASH evidence base, including exploring WASH-Stunting linkages, will be completed and disseminated in 2015. UNICEF is supporting the establishment of a national WASH in Schools (WinS) program using lessons from the WASH in Schools Empowerment (WISE) programme that concluded in 2014.

During 2011-2014, UNICEF supported ten districts in Papua in Evidence Based Budgeting and Planning (EBP). A provincial team was established and supported by a Governor’s decree to legitimise the team. An increased capacity for data driven planning and increased budget allocation for MNCH services has been observed in target districts. This approach was further adapted for micro-planning at health centres in five districts in Papua and West Papua and opportunities for further replication are being explored.

In Papua, the clinical mentoring for essential newborn care in three districts has shown improvements in managing asphyxia and infections in newborns, with two of three target hospitals reducing neonatal deaths by half in ten months. This approach will be mainstreamed in local government budgets in 2015.

In 2014, UNICEF trained 80 humanitarian actors on infant feeding in emergencies, with a specific focus on preventing and responding to uncontrolled distribution of breast milk substitutes (BMS). The WASH Cluster Contingency planning was revised with partners in October 2014 and a training on the SPHERE Standards for stakeholders was conducted in December 2014.

UNICEF also provided support to a number of innovations for vaccine monitoring, including testing an online database for cold chain equipment inventory; Electronic 30DTR visual display temperature monitoring devices (Fridge Tag2); and low cost android smartphone-based temperature devices (ColdTrace). This enables real-time monitoring of the viability of the cold chain and helps ensure vaccine quality.

UNICEF facilitated the participation of the National Immunization Manager in a nationwide Measles Rubella campaign in the Philippines in 2014 to draw lessons for Indonesia. UNICEF convened an exchange between a research hospital in Papua and Mahidol University in Bangkok to design an international training on malaria management in December 2014.

OUTPUT 1: By December 2015, government commitment to scale up high-impact nutrition interventions is enhanced based on evidence demonstrated in at least three districts in three provinces.

Analytical Statement of Progress:
UNICEF’s programme aimed to address bottlenecks to reducing stunting. The SUN Movement increased national attention on child stunting and maternal undernutrition in Indonesia. UNICEF provided technical support for the development of the SUN Movement’s policy framework and implementation guidelines (2012), Presidential Decree (2013), Ministerial Decree (2014) and advocacy materials. Enabling the 500 plus district government authorities across Indonesia to effectively roll-out the SUN Movement remains a significant challenge due to weak capacity at
provincial level, and insufficient coordinating structures at provincial and district levels. In 2014, UNICEF was assigned as the Donor Convenor for the SUN Movement in Indonesia, and similar networks involving civil society and business are forming. UNICEF provided technical support for an international meeting organized by the global SUN Secretariat to build understanding on how to address conflicts of interest within the Movement. UNICEF supported a Background Paper on Nutrition (2014) which has informed the integration of nutrition into the next National Medium-Term Development Plan (RPJMN).

Following approval of Government Regulations on Exclusive Breastfeeding in 2012, UNICEF supported a study to assess the prevalence and nature of violations of the BMS code. A Ministerial Decree, released in 2014, stipulates the process for imposing administrative sanctions against violations of the Government Regulations. Developing and introducing a system to monitor violations remains a priority.

A UNICEF-supported review of legislation on salt iodization and wheat flow fortification in 2013-14 indicated gaps and contradictions, which are now being considered by government. UNICEF also supported the development of technical guidelines and plans, including the national plan for Iodine Deficiency Disorders (IDD) control, guidelines on vitamin A supplementation, the control of intestinal parasites, and micronutrient supplementation for pregnant women and children. A supply chain review of nutrition commodities is underway and will be completed in 2015.

At sub-national level, UNICEF’s support to three districts was designed to provide evidence for leveraging resources and replication to other districts. UNICEF provided technical assistance for the development of provincial and district Food and Nutrition Action Plans. UNICEF’s advocacy contributed to substantial increases in fund allocations for nutrition interventions, including the leveraging of social protection funds (community block grants) for nutrition, and nutrition-sensitive actions in other sectors. A new project to develop an improved implementation model for community based management of acute malnutrition is underway.

**OUTPUT 3:** By 2015, coverage of key interventions to address life-threatening maternal and newborn conditions is increased by 20 per cent from baseline in at least nine districts across the provinces of Aceh, Central Java, NTT, Maluku, North Maluku, South Sulawesi, West Sulawesi, Papua, and West Papua.

**Analytical Statement of Progress:**

Recent data points to inadequate progress towards MDG 5. Current needs for PMTCT and paediatric HIV services have been met by 15 per cent and 8 per cent respectively. During the first half 2014, the new guidelines for maternal death surveillance were finalized and were ready for implementation. Following the implementation of revised PMTCT guidelines, the total number of pregnant women tested was doubled from 43,624 in 2012 to 202,873 as of September 2014. UNICEF, in partnership with USAID, continued to support the cluster island approach to improve access, management, oversight and quality of maternal health services in remote districts in eastern Indonesia. A provincial Law and a District Head Decree of Nusa Tenggara Barat (NTB) that legally integrates the island cluster approach within the province’s health system was issued in March 2014. This decree provided the legal basis to ensure budget allocation for policy implementation. In North Maluku Province, UNICEF advocacy has resulted in the establishment of five additional Maternity Waiting Homes (MWHs) to increase access to services among pregnant women considered at high-risk for pregnancy and child-birth complications in Tidore District. In Maluku, to address bottlenecks around data availability and quality, UNICEF supported integration and quality improvement of data collected by the MNCH
programmes through Routine Data Quality Assurance (RDQA). Eight districts in Maluku have adopted an integrated approach to data collection.

In both Papua and West Papua, UNICEF continued to provide technical support for the development of monitoring mechanisms for a flight-based health care strategy to improve access to care (termed Flying Health Care). UNICEF also supported a systematic approach to health centre level micro-planning to enhance planning and quality of services in Biak, Jayapura, Jayawijaya, Fakfak and Sorong. In West Papua, UNICEF supported an SMS-based reporting system for MNCH indicators in Sorong district and plans are being developed for further replication across Papua. In Papua, the clinical mentoring for essential newborn care in three districts showed quality improvements in managing asphyxia and infections in newborns. Two hospitals showed reduction of neonatal deaths by half after 10 months of mentoring. The local governments in the three districts have committed to supporting the continuation of this approach using their local budget in 2015. West Papua is planning to adapt this approach and has committed to share the costs using local government budget.

OUTPUT 4: By December 2015, equitable immunization system policies and strategies to support GoI achievement of international and national goals of vaccine preventable disease (polio, measles, rubella, maternal and neonatal tetanus) elimination and eradication goals as well as reduction of major killers due to VPDs of Under Five children are developed, approved and implemented.

Analytical Statement of Progress:

With UNICEF support, the Ministry of Health (MoH) released and socialised the first ever national evidence-based multi-stakeholder communication strategy to increase demand for routine EPI services among all provinces. The MoH allotted US$200,000 toward production of communication materials including training videos and TV PSAs.

To strengthen cold chain management and ensure vaccine viability, UNICEF supported central Cloud web database cold chain equipment inventory (CCEI) in 22 Provinces, 348 Districts and 7,188 Health Centres for real time access of an information database of cold chain equipment that allows regular updates for managers for enhanced monitoring and installation of five units of new low cost android smartphone-based temperature devices (ColdTrace) in cold rooms in Java. ColdTrace remotely monitors temperature and sends alarms to managers via SMS in case of temperature deviations to enable a quick response to a cold chain malfunction. UNICEF also supported installation of 1,000 units of Fridge Tag 2, an electronic 30 day visual display temperature monitoring device, in Banten and East Java provinces.

UNICEF, along with WHO and the UN Global Pulse Lab, tested an approach to analyse immunisation-related conversations in social media, specifically on Twitter. There were substantial discussions on social media related to immunisation that occurred soon after events, and were particularly related to adverse effects following immunisation. The analysis resulted in a recommendation that Twitter be used for public communication monitoring to be able to immediately respond to miscommunications and misperceptions regarding immunisation in the community.

UNICEF supported district financial assessments on immunization funds in eight districts in East and Central Java. Preliminary results revealed financial delays with impact on programme implementation and therefore immunisation coverage. Following complete analysis of data, a
high level advocacy event is planned in 2015 to disseminate study findings among key decision makers to improve efficient and effective use of available funds.

UNICEF supported monitoring of a tetanus immunisation campaign in Papua, West Papua and Maluku, where 160,000 women of reproductive age in high risk remote districts were vaccinated with at least one dose of Tetanus vaccine and 74,000 women received at least two doses. Further political commitment is needed to ensure that campaign targets (at least 80 per cent of women receiving 2 doses of tetanus vaccine) will be met by early 2015.

**OUTPUT 5:** By 2015, pregnant women and infants in high malaria endemic villages of Papua, West Papua, East Nusa Tenggara, Maluku, North Maluku benefit from a strengthened health system which protects them from malaria and one district in West Sulawesi, all districts South Sulawesi and Aceh Province have entered malaria elimination phase as per WHO standards and the experience used to scale up malaria elimination elsewhere.

**Analytical Statement of Progress:**
The UNICEF malaria programme continued to use the attention, resources and structure of a disease specific programme as a wedge to improve health system bottlenecks and to leverage existing funds for replication and scale up.

UNICEF continued support to remove bottlenecks in the delivery of quality malaria preventive and curative services in high malaria endemic districts in Eastern Indonesia. Coverage of key indicators such as effective treatment using ACT for all positive cases exceeded targets in four out of five target provinces for Malaria in Pregnancy (MIP) services in 2013. This consisted of screening of pregnant women upon first ANC visit, provision of appropriate treatment and provision of a Long Lasting Insecticide-treated Net (LLIN). In 2014, coverage was lower due to delay on procurement of Rapid Diagnostic Test (RDT) and LLIN by the Global Fund. This resulted in stock-outs of supplies at health facility level. Low coverage in the routine program was compensated by a massive LLIN distribution campaign in Eastern Indonesia, which was actively supported by UNICEF. This campaign successfully distributed 3.4 million LLINs to protect six million people living in some of the most malaria-endemic parts of Indonesia. The program also succeeded in supporting the country obtaining an additional US$63 million from the The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM) to support malaria control from 2015-17 under the New Funding Model (NFM). This new NFM malaria grant included child health interventions, such as integrated management of childhood illnesses (IMCI), which UNICEF will actively support in the implementation phase.

Sabang municipality, in Aceh province, continued to have no indigenous local malaria transmission, and gains made during preceding years have been maintained. A second publication documenting the experience in eliminating malaria in Sabang was submitted for publication. In Aceh province, 19 districts have endorsed a local regulation on malaria elimination, and 12 districts have received certificates of malaria elimination from the MoH.

**OUTPUT 6:** By mid-2013, one selected district of Aceh province enters malaria elimination phase as per WHO standard

**Analytical Statement of Progress:**
Sabang municipality continued to have no indigenous local malaria transmission and gains made during preceding years have been maintained. A second publication documenting the experience in eliminating malaria in Sabang is being prepared. Documentation of this success is
considered critical in replicating this model elsewhere in Aceh and to other malaria endemic
provinces.

In Aceh, UNICEF provided support to the Provincial Health Office (PHO) and other malaria
endemic districts with a view toward province-wide elimination of malaria. UNICEF staff worked
through provincial authorities to encourage mapping of malaria cases for the entire province,
with strategic investments in malaria elimination activities in the few districts that continue to
export malaria to other districts, mostly via migratory workers. A key element in this effort was
development of malaria surveillance in migrants, to ensure that interventions are consistent with
epidemiological reality.

Malaria cases from the gold mine in Aceh Jaya were reduced thanks to active case detection
facilitated by UNICEF and carried out by the District Health Office (DHO) and PHO. In 2014,
several districts (Aceh Besar, Aceh Singkil) shifted from malaria control to malaria elimination
mode in the province, with reported malaria incidence based upon routine surveillance of less
than one confirmed case per 1,000 population per year.

Aceh remains a national model for malaria elimination, with UNICEF Aceh staff asked to advise
the malaria program in other provinces in the country, most recently South Sulawesi. As an
active member of the Asian Pacific Malaria Elimination Network, UNICEF is able to share good
practices in malaria control and elimination in Indonesia with other countries in the region and
thus enhance South-South collaboration.

**OUTPUT 8:** By December 2015, government commitment to scale up high-impact WASH
interventions is enhanced based on evidence demonstrated in at least six districts in four
provinces.

**Analytical Statement of Progress:**
Considerable progress has been made around the Enabling Environment via UNICEF support
to the development of standard Community-Based Total Sanitation (STBM) training curricula.
All the modules and curriculum have been accredited by the Agency for Human Resources
Development & Empowerment – MoH. UNICEF also worked on the development of internal
tools such as Knowledge Management framework, Theory of Change for the UNICEF support to
the STBM program, brainstorming monitoring approaches with government and identification of
key weaknesses and bottlenecks that need to be addressed. The Communication and
Advocacy strategy was developed, and is complementing UNICEF’s support to this output.
UNICEF supported internal capacity strengthening in the Pokja AMPL and STBM Secretariat.
This included a Monitoring & Coordination Officer who is now on board in the Pokja AMPL
Secretariat and a planned Knowledge Management Officer and a Capacity Building Officer
embedded within MoH. This recruitment process was done collaboratively by UNICEF,
Bappenas and MoH. UNICEF supported sharing knowledge around Communication and
Advocacy and facilitated several discussion sessions. UNICEF supported the National meeting
on STBM (Rakornas) organized by MoH in September. A critical activity to facilitate joint
learning was joint monitoring field trips to all three Provinces with National Government.
Progress was also made in social norms around open defecation at National level, with the roll-
out of a social media campaign to widen this discourse. Major efforts were undertaken on
secondary data analysis to strengthen the national WASH evidence base. The analysis was
completed and shared with the Government and will be further disseminated in 2015.

Challenges in this area were mainly been linked to fund channelling of UNICEF funds from
central to subnational levels due to the enforcement of the new law. This resulted in slow fund
disbursement and delayed program activity. Programmatic challenges included strong systematic routine programme monitoring within STBM and also coordination challenges due to the many actors and programs working at national and sub-national levels on sanitation. In 2015, UNICEF will continue to work with partners on strengthening some of the challenges faced by the Pokja coordination mechanisms.

OUTPUT 9: By December 2015, humanitarian actors and government are prepared, have adequate sectoral capacity and provide an effective and coordinated response in WASH and nutrition in emergencies.

Analytical Statement of Progress:
UNICEF supported coordination among nutrition and WASH partners in the response to large national disasters, including the Jakarta floods (2013), Aceh earthquake (2013), Mount Sinabung eruption (2013-14) and Mount Kelud eruption (2014). Through regular meetings, up to 20 WASH and nutrition cluster partners conducted capacity mapping and information sharing to enhance coordination and avoid duplication during emergency responses.

In all emergencies in 2013-14, UNICEF acted to prevent and address uncontrolled donations and use of breast milk substitutes (BMS) by alerting the Ministry of Health, advocating with Provincial and District Health Offices, informing humanitarian actors and donors on the dangers of BMS use in emergencies and mobilizing NGOs to monitor actions on the ground. In 2014, UNICEF trained 80 humanitarian actors (government, UN and NGOs) on infant feeding in emergencies, with a specific focus on preventing and responding to uncontrolled distribution of BMS, and preparation of appropriate complementary foods for young children. A poster on complementary feeding to educate emergency affected populations and to guide public kitchens was developed by NGO partners with technical assistance from UNICEF, and was pre-tested during the floods in Bandung in December.

In October 2104, WASH Cluster Contingency planning was revised with all cluster members and, as one of the follow up activities, a Sphere training was conducted in December 2014 for key members, including private sector and youth groups. UNICEF Indonesia’s WASH team participated in the regional UNICEF Strengthening Humanitarian Action and WiE regional training workshop in Bangkok in May 2014, helping build internal capacity. DRR and WASH mapping is ongoing and will be completed in 2015.

OUTPUT 10: By December 2015, government commitment for a National School Sanitation Programme is enhanced based on evidence demonstrated in at least six districts in four provinces.

Analytical Statement of Progress:
UNICEF continued the shift from project mode to supporting the establishment of a national WASH in Schools (WinS) program. The final WISE (WASH in Schools Empowerment) consortium workshop was successfully conducted in February in Bogor, ensuring dissemination of knowledge gathered over the last three years as well as follow up actions. The workshop was attended by all the major players in WASH in Schools, including National and sub-National Government and partners. The WISE project successfully made WinS a priority in the Government agenda. It is now specifically included in the new Five Year Plan (RPJMN) as the result of intensive UNICEF and partner advocacy. Gender elements continued to be a major focus, with due attention on WASH facilities for girls as well as a focus on MHM best practice to minimise girl child drop-out in schools.
In coordination with stakeholders (GoI and NGOs) UNICEF’s WinS strategy was drafted and will be shared with partners for input in early 2015. Several technical activities are ongoing (partner mapping, WinS survey, MHM survey) and the work on technical advice on drinking water and waste management was completed. UNICEF also supported a Bappenas mapping exercise to include mapping of all stakeholders working on WinS to inform the WinS strategy. The Burnet Institute was recruited to conduct the MHM study in Indonesia, working with ARI, Water Aid and Survey meter for the field data collection. The fieldwork of this survey has been completed and the final report (MHM package of recommendations and tools) will be available by February 2015.

Coordination of WASH in Schools across all actors has been a challenge – new personnel in various Departments have taken time to be fully oriented on the importance of WinS. Constant advocacy is required for strengthening the BOS and monitoring in the Government system. Recent discussions on the upcoming WinS survey showed good collaboration across partners and Government and a strong shared emphasis for strengthening WinS data.

**OUTPUT 11 Output Programme Support**

**Analytical Statement of Progress:**
UNICEF provided human resource support to contribute to the achievement of other outputs within the programme component, or across Programme components in the country programme of cooperation.

**OUTPUT 12: By 2015, at least 5 of 20 target districts implement child survival programmes based on evidence-based child survival national strategy**

**Analytical Statement of Progress:**
UNICEF supported actions toward the reduction of bottlenecks to the equitable delivery of child survival interventions by supporting the development of a Ministerial Regulation on community-based Integrated Management of Childhood Illness (IMCI) implementation, which was approved by the Minister of Health in December 2013. Following adoption and dissemination, this approach is expected to increase access to malaria, diarrhoea and pneumonia treatment for children in remote parts of Eastern Indonesia where the lack of trained health providers presents a major bottleneck.

In partnership with Bappenas, MoH, University Gajah Mada and University of Queensland, UNICEF continued to support evidence-based planning (EBP) at district level for MNCH services in Papua. Immediate results included better use of subnational data in identifying bottlenecks and barriers in the delivery of services and better prioritization and allocation of resources to address these health system bottlenecks. Increased allocation of funds for key MNCH interventions is evident in the intervention districts. UNICEF supported the establishment of a provincial EBP team, which was endorsed by a Governor’s Decree to provide legitimacy and ensure a favourable enabling environment. The team included academia, PHO and Bappeda, and conducted evidence-based planning in ten districts (Jayawijaya, Yapen, Boven Digoel, Jayapura, Paniai, Biak Numfor, Supiori, Nabire, Sarmi, and Mappi). Provincial Government continued to provide support for this initiative through revising the Governor Decree to accommodate rotation of personnel within Government structures. Provincial Government also allocated development funds to support this initiative in three new districts (Yalimo, Tolikara, and Timika) in 2015.
UNICEF further linked district EBP efforts with micro-planning at health centres (Puskesmas) using EBP principles for better quality of care in these facilities. Puskesmas micro-planning was supported in three districts in Papua (Jayawijaya, Jayapura, Biak Numfor) and in two districts in West Papua (Manokwari, Fakfak). UNICEF identified potential entry points to mainstream the EBP approach into regular processes at subnational level and support its nationwide replication.

UNICEF also supported PHO in Aceh to develop and implement integrated monitoring tools in the districts of Aceh Jaya, Aceh Timur and Aceh Besar.

**OUTCOME 5:** By 2015, families and communities will sustain positive behaviours resulting in improved health and wellbeing of children and women.

**Analytical Statement of Progress:**
In Indonesia, despite rapid economic growth, the practice of key behaviours that have a proven impact on maternal and child survival and stunting remained low. Although recent IDHS data showed that the rate of exclusive breastfeeding increased from 32 per cent in 2007 to 42 per cent in 2012, there is still a long way to go to positively impact on maternal and child survival and stunting reduction. Low rates were also observed in the practice of hand washing with soap, seeking prompt curative and preventive services for childhood infections and the use of sanitation services.

Infant and Young Child Feeding (IYCF) practices are suboptimal in Indonesia and contribute to the high stunting prevalence. Caregivers in Indonesia often lack correct information and practical support to feed their young children appropriately. In response, UNICEF supported the Ministry of Health in 2011 to adapt the global UNICEF Community IYCF counselling package and establish a cascade training model for large-scale roll-out. A component on maternal nutrition and on locally appropriate actions that fathers can take to improve nutrition of their families was added to the package to address the gender dimension. Roll out of the package began in 2011 and as of the end of 2014 it has been used in 30 districts with government, NGO and UNICEF support. UNICEF advocated for its inclusion in the intervention package supported by the Millennium Challenge Corporation in 64 districts, beginning in 2014. As of December 2014, UNICEF supported the training of 5,395 health workers and community-based workers in four provinces.

To increase the access of caregivers to correct information, UNICEF provided support to integrate IYCF and maternal nutrition into Family Development Sessions delivered by community-based facilitators of a conditional cash transfer programme in 2013-14. Work is underway to integrate IYCF, early stimulation and good parenting into a model basic training package on Holistic Integrated Early Childhood Education and Development for service providers.

To ensure that the knowledge and skills of IYCF and Maternal Nutrition counsellors are further developed following training, UNICEF supported the MoH to develop supportive supervision tools and methods. Global tools were translated, adapted, and pretested in 2013-14, and are now being used in nine districts.

A Knowledge-Attitudes-Practice (KAP) survey on WASH behaviours was conducted in six districts in Eastern Indonesia. The initial focus was on quantitative data and the results were presented to Government. A decision was made to complement the quantitative findings with a further qualitative survey, which explored in more depth, the barriers and enablers to
accelerating the uptake of improved sanitation. Both surveys included a strong emphasis on
gender, ensuring disaggregation of the findings to determine entry points for gender sensitive
approaches. The headline findings and the associated implications and next steps were shared
with STBM, Promkes and Bappenas.

The survey revealed the role that social norms play in sanitation and key motivators for the use
of sanitation services in communities. The results have informed the development of a WASH
Communications Strategy as well as an online social media strategy to accelerate the dialogue
on open defecation in Indonesia.

With support from the Communication for Development (C4D) team, UNICEF developed a
WASH communication strategy to support improved sanitation uptake in the three target
provinces in eastern Indonesia. This included mapping available options for partnerships and
social mobilisation with a variety of stakeholders. The draft report was shared with MoH and
elements of the strategy are already in operation.

UNICEF developed a national-level advocacy and awareness campaign to create a sense of
urgency among decision makers and society at large on the sanitation crisis. It was launched on
World Toilet Day on 19 November 2014 and has already exceeded many of the planned
indicators. This innovative approach to raise the profile and level of discussion around sanitation
in Indonesia will continue in 2015.

Strong coordination in monitoring of sanitation activities across communication and
implementation is needed and will involve a mix of process and impact indicators.

With UNICEF support, the Ministry of Health (MoH) released the first ever national evidence-
based multi-stakeholder communication strategy to increase demand for routine immunisation
services across all provinces. In follow up, the MoH allotted US$200,000 toward production of
communication materials, including training videos and TV PSAs. Building on the previous pilot
for the use of Short Message Service (SMS) to improve skills of midwives in remote areas,
UNICEF worked with MoH and the Midwives’ Association on scaling up the programme to
potentially 10,000 midwives in Central Java. UNICEF partnered with UN Global Pulse to monitor
parental perceptions on immunization by mining social media data, an approach that could
potentially be replicated in other areas of child survival and development.

**OUTPUT 1:** By 2015, increased in health seeking, child feeding practices and WASH
behaviours in targeted populations of selected districts by: 1) At least an additional 5 per cent of
1a) children below six months of age will be exclusively breast-fed, 1b) children 6–23 months
will receive appropriate complementary feeding, 1c) children 20-23 months will benefit from
continued breast-feeding, 1d) pregnant women will receive at least 90 IFA/MMN tablets during
pregnancy and, 2) ) At least an additional 25 per cent of usage of improved sanitation facilities,
10 per cent of hand washing with soap and, 5 per cent households adopt water treatment and
proper storage.

**Analytical Statement of Progress:**
UNICEF supported the completion of KAP survey’s in three provinces – the initial focus has
been on quantitative data and the results have been presented to Govt. From these findings, it
was decided to complement the quantitative findings with a further qualitative survey which will
explore in more depth the barriers and enablers to accelerating the uptake of improved
sanitation. Both survey’s included a strong emphasis on gender through ensuring
disaggregation of the findings to determine entry points for gender sensitive approaches. This work will be completed in the third quarter.

With support from the C4D team and an expert consultant, UNICEF has been developing a WASH communication strategy to support improved sanitation uptake in the three provinces where the Gates Foundation supported work on STBM in Eastern Indonesia is focussed. This includes mapping available options for partnerships and social mobilisation with religious leaders, media, private sector and Bupati (local leader) associations in three provinces. The consultant has completed visits to all three provinces and a final report and recommendation will be available during the third quarter 2014.

UNICEF is partnering, via an institutional contract, to develop an advocacy campaign to create a sense of urgency among decision makers and society at large on the sanitation crisis. Target launch date is World Toilet Day in November.

Challenges have included the lack of focus on formative research and communication from National level on STBM. This needs much greater focus and this point will be raised by UNICEF at the upcoming Rakornas (National meeting) on STBM scheduled for early September which UNICEF is supporting technically and financially.

**OUTPUT 2** By December 2015, practice of three infant and young child feeding behaviours by women and caregivers of children under two years is increased in at least three targeted districts in three provinces

**Analytical Statement of Progress:**
Infant and Young Child Feeding (IYCF) practices are suboptimal in Indonesia and contribute to the high stunting prevalence. Caregivers in Indonesia often lack correct information and practical support to feed their young children appropriately, which contributes to the high stunting prevalence. In response, UNICEF supported the Ministry of Health in 2011 to adapt the global UNICEF Community IYCF counselling package and establish a cascade training model for large-scale roll-out. Components on maternal nutrition and on locally appropriate actions that fathers can take to improve nutrition of their families were added to the package to address the gender dimension. The cascade training model incorporated strict criteria to evaluate whether trainers have the sufficient skills, knowledge and competencies to train others. Roll out of the package began in 2011 and as of the end of 2014, it was used in 30 districts, with Government, NGO and UNICEF support. UNICEF advocated for its inclusion in the intervention package supported by the Millennium Challenge Corporation in 64 districts, beginning 2014. As of December 2014, UNICEF supported the training of 5,395 health workers and community-based workers in four provinces.

To increase the access of caregivers to correct information, UNICEF provided support to integrate IYCF and maternal nutrition into Family Development Sessions delivered by community-based facilitators of a conditional cash transfer programme in 2013-14. Work is also underway to integrate IYCF, early stimulation and good parenting into a model basic training package on Holistic Integrated Early Childhood Education and Development for service providers.

To ensure that the knowledge and skills of IYCF and Maternal Nutrition counsellors are further developed following training, UNICEF supported the MoH to develop supportive supervision tools and methods. Global tools were translated, adapted, and pretested in 2013-14, and are now being used in nine districts.
OUTPUT 3 By December 2015, practice of at least two WASH behaviours increased among the targeted population in at least six targeted districts in four provinces.

Analytical Statement of Progress:
UNICEF supported the completion of KAP surveys in three target provinces. The initial focus was on quantitative data and the results were presented to Government. A decision was made to complement the quantitative findings with a further qualitative survey which explored, in more depth, the barriers and enablers to accelerating the uptake of improved sanitation. Both surveys included a strong emphasis on gender, ensuring disaggregation of the findings to determine entry points for gender sensitive approaches. The headline findings and the associated implications and next steps were shared with STBM, Promkes and Bappenas.

With support from the C4D team and an expert consultant, UNICEF developed a WASH communication strategy to support improved sanitation uptake in the three provinces where UNICEF district work on STBM in Eastern Indonesia is focused. This included mapping available options for partnerships and social mobilisation with religious leaders, media, private sector and Bupati (local leader) associations in all three provinces. The draft report was shared with MoH and elements of the strategy are already in operation, including partnership with religious leaders in NTT, dialogue with Bupatis (District Heads) in South Sulawesi and partnership with PKK Women’s group in Papua.

UNICEF developed a national-level advocacy campaign to create a sense of urgency among decision makers and society at large on the sanitation crisis. The launch date was on World Toilet Day on 19 November 2014 and the campaign has already exceeded many of the planned indicators. This type of innovative approach to raise the profile and level of discussion around sanitation in Indonesia will continue in 2015.

Challenges have included the lack of focus on formative research and communication from a national level on STBM. UNICEF raised this issue at the Rakornas (National planning meeting) on STBM in September (UNICEF also provided technical and financial support for the meeting). Coordination of STBM across communication and implementation is also needed, which will involve a mix of process and impact indicators for a strengthened monitoring system.

OUTCOME 6: By 2015, children and young people especially from vulnerable groups are empowered and equipped with adequate knowledge, basic education and life skills to cope with challenges and opportunities.

Analytical Statement of Progress:
In 2014, the Government of Indonesia launched a programme for universal 12 year education for all by 2020. The implementation of the Scholarship for the Poor (BSM) Programme significantly decreased the number of out of school children, since transition from primary to secondary education is getting higher. The programme of the newly elected president (i.e. Indonesia Smart Card) that strengthens the school-based management (SBM) programme gives higher priority to out of school children to return to school. This is likely to substantially accelerate progress toward increased transition to secondary education.

OUTPUT 4: (Papua): By 2015, most disadvantaged children benefit from an increased access and retention in basic education.
Analytical Statement of Progress:
The implementation of the programme in Papua Tanah faced serious constraints in 2014. The funding agreement with the donor (DFAT) was signed only toward the end of February. Although the initial clearance on the work plan and implementation approaches was received from DFAT in June, delays in staff recruitment were encountered due to visa clearance related issues for international staff and unavailability of qualified national specialists. This led to further negotiation with DFAT to scale down the scope of the programme. The 2011 government regulation related to fund channelling required the development of new partnerships with civil society partners (i.e. NGOs and universities). Despite these constraints, preparatory work was completed, including development of work plans, selection of the focus districts and schools, development of monitoring frameworks, obtaining donor agreement on the implementation modalities, and ensuring ownership of the new Government officials on the programme. The Rural and Remote Education Initiative for Papua and West Papua Provinces programme promoted policy dialogues with parliamentarians and other education stakeholders within government on the issues of early literacy in rural and remote areas and teacher absenteeism, paving the ground for the implementation of the programme.

OUTPUT 6: (Papua) By the end of 2015, young people in focus districts in Papua and West Papua have increased knowledge and skills for prevention of HIV & AIDS.

Analytical Statement of Progress:

The programme evaluation of the averting new HIV infection among young people in Papua and West Papua through the education sector was concluded. The evaluation noted major improvements in the institutional environment for mainstreaming HIV&AIDS into the education sector in Papua and West Papua, attributable to support from UNICEF. Notable among these improvements were the provincial law Mainstreaming of HIV&AIDS into the Education Sector in Papua Province and four districts of Jayawijaya and Mimika (Papua), Manokwari and Sorong (West Papua); the official position of the Provincial Government of West Papua to develop a comprehensive youth policy; and the allocation of a cumulative total of US$141,875 for education sector HIV&AIDS response in 2014 by the district government in seven focused districts supported by UNICEF. The evaluation also noted improvement in comprehensive HIV&AIDS knowledge, attitudes and practices among school managers and teachers. Among young people (in and out of school) there were encouraging but varied findings with regard to different indicators of comprehensive HIV&AIDS knowledge, attitudes and practices, especially among those in rural and remote locations.

More than 100,000 school-aged boys and girls in rural and remote areas are expected to be reached through the roll out of simplified training school packages prepared in 2014. To further improve comprehensive HIV&AIDS knowledge, attitudes and behaviours among young people in Papua and West Papua, UNICEF focused on the introduction of a similar programme adapted for out of school population, in partnership with seven civil society partners. More than 5,000 out of school young people were reached with HIV life-skills based education, out of which only 566 (11 per cent) accessed health services. This highlights that in both settings (in and out of schools) linkages between education and health services are critical to enforce behaviour changes. Initial findings from monitoring of the implementation indicated that while the approach is highly relevant, linkages with health services still need to be established. This will be a priority for 2015.
OUTPUT 8: Programme Support, Education and Adolescents

Analytical Statement of Progress:

UNICEF provided human resource support to contribute to the achievement of other outputs within the programme component, or across Programme components in the country programme of cooperation.

OUTPUT 9: By the end of 2015, policies and strategies improved to support access to quality education for out-of-school children and children at risk of dropping out (National, Aceh, Java, NTB, and Sulawesi)

Analytical Statement of Progress:
UNICEF continued to focus on setting a conducive policy environment to reduce inequities in accessing quality education. Further analytical work was conducted on the magnitude, gaps, barriers and bottlenecks for out of school children (OOSC). The findings of the various analyses were useful in the formulation of the RPJMN, RENSTRA (education strategic plan) and the programme for implementation of 12 Years Universal Education. Findings from a School Grant Study supported by UNICEF influenced the revision of the policy on scholarships for the poor to include OOSC.

At sub-national level, UNICEF supported four districts (Mamuju, Majene, Mamasa, Mamuju Utara) in West Sulawesi to conduct Community Based Development Information System (CBDIS) to monitor access and participation of 13-15 year old adolescents in social services. As a result of UNICEF advocacy, the CBDIS was funded by the provincial government for its piloting in one sub-district in each of the four districts. The results of CBDIS were used to develop village action plans. The provincial government of West Sulawesi allocated funds for replication of CBDIS and to provide scholarships to enrol children identified through CBDIS in 2015. Mamuju district government issued a Bupati Decree and allocated funds to support district wide CBDIS implementation and all village heads in the district have been trained on use of CBDIS data in village development planning. A Bupati decree on Retrieval of OOSC children was issued in Situbondo to follow up the results of CBDIS and a local policy on OOSC was issued in Brebes district as well.

Aceh issued a Governor’s instruction for acceleration of Minimum Service Standards (MSS) in schools and the province and district governments are allocating increasing budgets for the implementation of the MSS Action Plan.

With UNICEF’s technical support, MOEC issued a National Action Plan to expand SBM to 95 per cent of primary schools by 2015. The Action plan will guide provincial, district, and school level education stakeholders to improve the quality of education. To support such expansion and improvement of quality in schools, UNICEF also continued its technical support to the SBM Resource Centre established at the University of Malang. To increase transition from primary to junior secondary education for boys and girls in rural and remote areas, UNICEF supported the MoEC to start piloting One- of-Schools (SATAP) in three districts (Bondowoso, Polewali Mandar, and Mamuju), for eventual replication in similar remote areas.

OUTPUT 10: By end of 2015, children participation rate in basic education in target districts is improved.
Analytical Statement of Progress:
In Sikka, following the results of the Community Based Education Information System (CBEIS) that was implemented in 2012 and 2013, the local government established a district team to conduct data reconfirmation on out of school children and to assess the capacity of village administrations, including in village planning, in addressing the issue of out of school children. As a result of this experience, the local government decided to socialize community based development information system (CBDIS) to an additional 130 villages in 2015, to further identify the magnitude of out of school children. The district CBEIS team will also synchronize its efforts with other sectors, such as social welfare sector, since this sector has scholarship funds for children from poor families.

A study on community participation with a view to increase children’s access to quality education services was completed by Laboratory Anthropology for Research and Action (LAURA) from Gajah Mada University (UGM) at the end of 2013. As a result, a Community Action Plan (CAP) module was developed that can be used to assess the reasons children are out of school and also to identify community perception on education. In July 2014, UGM tested the CAP module in Sikka and TTS and refinement of the module was completed. Data collected is expected to be used for the development of village action plans, as it relates to education and social issues.

In relation to the School-Health Program (SHP), the Governor and three districts (Sikka, Belu, and Alor) issued decrees to mandate the implementation of SHP. In Sikka, 21 primary schools were selected as model schools, with support from the Bupati. Thirty two schools were selected for collaboration with the malaria program on life skills and children participation (Laskar Jentik).

A number of activities planned for 2014 had to be postponed due to the new fund channelling mechanism. Partnerships with local NGOs were established to implement the delayed activities in 2015.

OUTCOME 7: By 2015, improved government and community-based organizations capacities at national and sub national levels for implementing a holistic early childhood development, strengthened legislation and increased budget allocations for achieving school readiness for children below 7 years age.

Analytical Statement of Progress:
UNICEF, in partnership with the Government of Indonesia, continued to support Holistic Integrative Early Childhood Development Programme by supporting the Coordinating Ministry of People’s Welfare to disseminate the Presidential Regulation no. 63/2013 on Holistic Integrative Early Childhood Development in the Eastern part of Indonesia. As a result of these advocacy efforts, a number of provinces and districts committed to translate the Presidential regulation into Governor’s decrees and Bupati’s decrees, paving the way forward for budget allocation and planning across sectors towards HI-ECD implementation.

To facilitate further learning and capacity-building for relevant stakeholders to implement and expand HI-ECD services, UNICEF provided financial and technical support for the establishment of a National Resource Centre for Pre-school in September 2014. This centre is expected to play a pivotal role as a knowledge management platform and guide the further scaling-up of HI-ECD services coverage. In 2014, UNICEF supported the documentation of good practices in expanding ECD services for the most marginalized children in East Java, Aceh, Central Java, NTT and Sulawesi to support knowledge sharing between HI-ECD
To enhance the quality of services for school readiness, UNICEF supported the development and piloting of a quality assurance mechanism. The pilot was implemented in Central Java, NTB provinces and in Sikka district of NTT province and targeted all kindergarten students. This tool enabled kindergartens to self-monitor their performance based on the MoEC national minimum service standards (Minister of Education decree no.58).

**OUTPUT 1** By the end of 2015, policy, guidelines and coordination mechanisms are improved to implement quality holistic-integrative early childhood development program (National, Aceh, Java, NTB, NTT and Sulawesi).

**Analytical Statement of Progress:**
UNICEF, in partnership with the Government of Indonesia, continued working toward developing a conducive policy framework to promote integrated, multi-sectoral Early Childhood Development (ECD) programmes that unite health, nutrition, education and protection, guaranteeing all children a strong start to life; and to expand access and improve quality of ECD programmes. To support the scaling-up of coverage of HI-ECD services, UNICEF supported the inclusion of HI-ECD services in the development of technical guidelines for the provision of basic services at village level by the Ministry of Home Affairs.

To improve the quality of school preparedness programmes, UNICEF provided technical and financial support to establish a National Resource Centre for pre-schools. This centre facilitates learning and capacity-building for relevant stakeholders to promote quality of early childhood education. UNICEF also provided technical support to the Early Childhood Education (ECE) Quality Assurance Centre of MOEC to reinforce the implementation of the National ECE Standards in Central Java, NTB and NTT provinces.

At sub-national level, UNICEF technical assistance and advocacy efforts resulted in the inclusion of HI-ECD in the RPJMD (local medium term plan) of Polewali Mandar and Mauju districts of West Sulawesi. This led to a significant increase in their respective budget allocations for HI-ECD for 2015.

In Polewali Mandar, Aceh Besar, Aceh Timur, Aceh Jaya and Surabaya, UNICEF served as a technical partner to build the capacities of partners, resulting in the establishment and/or the strengthening of a total of 149 ECD centres. These centres are expected to serve a total population of more than 5,000 pre-school aged children, including from the most marginalized families in deprived areas like slums areas in Surabaya city. Findings from this cross-sectoral implementation will also support gathering of more rigorous evidence on the quality of HI-ECD services, enabling UNICEF to formulate a more suited assistance to the GoI for the next country programme and to ensure that synergies are developed across sectors to develop a broader investment framework for the early years of life.

**OUTCOME 8:** By 2015, improved education sector preparedness plans and strengthened government and CSO response capacities to disasters and emergencies. (KRA 4)

**Analytical Statement of Progress:**
In 2014, UNICEF efforts focused on institutionalizing an inter-departmental coordination mechanism for Education in Emergencies (EIE) in the Ministry of Education and Culture (MoEC). UNICEF’s rigorous advocacy efforts resulted in a stronger involvement of the MoEC and Ministry of Religious Affairs (MoRA) in the Education Cluster to fulfil the right to education of
children in disaster-prone situations. With UNICEF support, a Disaster Management (DM) Secretariat was established within the MoEC under the leadership of the Secretary-General, responsible for coordination with all relevant education stakeholders, as well as the pre-positioning of EiE supplies. UNICEF handed over to the MoEC all its EiE supplies - 26 tents, 256 school-in-the-box kits, 247 recreation kits to the DM Secretariat, and 263 ECD Kits and 20 school tents to ECD Directorate-General in MoEC. This strategic support provided by UNICEF was essential, because the MoEC is now the leading government agency of the national Education cluster, as recognized by BNPB in 2014.

**OUTPUT 1:** By the end of 2015, government capacity is strengthened to produce education preparedness/contingency plans at national/sub-national in selected areas.

**Analytical Statement of Progress:**
In 2014, UNICEF efforts focused on developing the capacity of the MoEC and other education stakeholders to fulfil the right to education of children in disaster-prone situations. UNICEF provided intensive technical assistance to the DM Secretariat in MoEC, which resulted in the DRR and EiE partners mapping and the development of a concrete EiE action plan that is expected to be implemented between 2015 and 2019. The DM Secretariat, with technical and financial support from UNICEF, led the cluster through regular cluster coordination meetings, developing action plans and initiating capacity development of provincial education offices. As a result of UNICEF’s advocacy and technical assistance, DM was integrated in the draft of MoEC’s strategic plan (Renstra 2015-2019). Regional collaboration through field visits to East Java, North Sumatera, Central Java and Yogyakarta were also supported by UNICEF for information sharing and knowledge management purposes, resulting in a better understanding of EiE from MoEC officials.

**OUTCOME 9:** By 2015 all vulnerable children are progressively protected by a comprehensive and community-based child protection system (e.g. social welfare, police, and justice) especially in 5 focus provinces.

**Analytical Statement of Progress:**
The child protection system in Indonesia is developing within a highly dynamic context. Institutional structures for the protection of human rights, natural and social emergencies in a newly decentralised setting are still being worked out. Some dimensions of the national system, are very promising and offer good practice for scale-up. The Government made important progress in formulating its visions, priorities and standards with regard to child protection, as is evident in the national strategic plans prioritising child protection system building across Ministries. As a result of UNICEF upstream advocacy in 2014, the new Strategic Plan 2015-2019 (RPJMN) emphasises the importance of child protection system building as a development priority for the country and a number of ambitious targets to end violence against children, accelerate birth registration and increase quality of care are included.

Laws and policies for child protection are generally coherent with the CRC (with a few notable exceptions, especially in the area of violence and discrimination against girls) and sustained technical support and advocacy by UNICEF and other partners resulted in new legislative milestones in 2014. These included a new Presidential Instruction to combat child sexual abuse, draft implementing regulations in line with the new Juvenile Justice Law and entry into force of the Juvenile Justice Law itself. At subnational level, child protection is clearly stipulated in the provincial development plans in the provinces of Central Java, South and West Sulawesi.
Innovative practices with regard to capacity development and learning to bolster the national child protection system have been implemented. Indonesia spearheaded several child protection system mapping exercises, most recently the equity-based “Governance Indicator Framework Assessment”. This Assessment provided a coherent updated baseline for future system strengthening efforts, aligned to UNICEF MORES efforts globally. An independent evaluation of the child protection system in Indonesia commissioned toward the end of 2014 by UNICEF and Bappenas emphasised the need for practical technical support by UNICEF to the Government to strengthen work in the area of monitoring and evaluation of system strengthening, including indicators for institutional capacity development and child–wellbeing in the longer term.

UNICEF Indonesia participated in global efforts to define and cost child protection national systems, in collaboration with the Canadian government. This work will be followed by a pilot initiative to design a child protection benchmarking tool for future child protection system budgeting efforts applicable to Indonesia’s decentralised system.

In 2015, UNICEF will also be supporting increased coordination efforts (which are still limited to the national level “Pokja” forum or Task Force led by Bappenas), especially at local levels, to enhance children’s access to quality services as well as investments in social norms change with a focus on tackling norms perpetuating violence against girls. Special attention is needed to accelerate birth registration and ensure Indonesia’s active engagement in regional Civil Registration and Vital Statistics efforts. The Demographic Health Survey (DHS) 2013 indicated that only 66.6 per cent of children under five years are registered, a 23 per cent increase since 2007 but still one of the lowest figures in the East Asia and Pacific region. Efforts to accelerate a birth registration strategy have been limited, in part due to recent political shifts within the Ministry of Home Affairs. At subnational level, UNICEF initiated various efforts to strengthen birth registration coverage by continuing to strengthen a pilot online registration system linking hospitals/maternity clinics to civil registration, and by promoting an integrated service pilot for marriage and birth registration with religious and community leaders. UNICEF also partnered with UNHCR to accelerate access to registration for migrant and refugee children, who are largely invisible from development efforts. Existing small scale pilots need to be evaluated and documented for replication and innovations from international success models introduced.

OUTPUT 1: By 2015, selected child protection-related laws and policies are drafted at national level and the provinces of Central & East Java, Aceh, NTT, South and West Sulawesi.

Analytical Statement of Progress:
A significant policy achievement in 2014 was the inclusion of child protection as a national priority in the draft national development plan (RPJMN) for 2015-2019 coordinated by Bappenas. Ultimately, this will help local authorities and various line Ministries to dedicate budget against national targets in child protection and facilitate high level advocacy on long-neglected concerns such as violence against children and child marriage.

Advocacy efforts targeting the Parliament and the Ministry of Social Affairs to adopt a new law on family-based care regulating the high number of children sent to, and living in, institutions in Indonesia are ongoing. Alliances were established with civil society (international NGOs like Save the Children, a faith-based organisation and academia) to design and launch a national public movement for changes in legislation. Implementing regulations on the Juvenile Justice Law were drafted for further deliberation and adoption.

Despite a range of preparatory activities and investments in modelling in 2014, progress to
devise an accelerated birth registration strategy has been limited, in part due to recent political shifts within the Ministry of Home Affairs. UNICEF aims to advocate for increased action, building on the success of online innovations and private sector partnerships as well as the integrated and decentralized services on legal identity in selected provinces and districts. The recent regional conference on Civil Registration and Vital Statistics, in which Indonesia was represented, is already serving as a catalyst to generate increased action in this area.

OUTPUT 2: By 2015, regulations and standards of key state institutions are drafted in line with the national Juvenile Justice Law and with international standards and modelled in selected provinces.

Analytical Statement of Progress:
The new Juvenile Justice Law entered into force in August 2014, promoting the principle of diversion for children in conflict with the law and bringing the national legislative frameworks more in line with the Convention on the Rights of the Child. As a result, the number of children in detention decreased by approximately 30 per cent and the rate of diversion increased from 7 per cent in 2012 to 58 per cent in the last quarter of 2014. A total of 57 girls and 2,845 boys remain in detention as of December 2014.

UNICEF assisted the Government to meet its 2015 target of trainings on the Integrated Manual on Juvenile Justice (33 per cent achievement rate so far) in view of funds already allocated. The Manual and the subsequent trainings for police, social workers, corrections and probation officers and others were coordinated by the Human Resource Development Agency of the Ministry of Law and Human Rights and the Training Centres of the Ministry of Social Affairs, the Police, the Attorney General’s Office, the Supreme Court, and the Bar Association for sustainability and continued roll-out. The Manual included an introduction to international standards on juvenile justice, the theories and practices of diversion, restorative justice, and mediation as well as gender equality. To date, 120 officials have been trained on the Manual and 30 Training of Trainers were selected through a competitive and transparent process. A total of 360 staff across these sectors were trained on their respective roles and responsibilities under the new law. The government calculates that at least 21,000 officials need to be trained in the next 5 years: 670 batches of training at a cost of approximately US$50 million. In 2015, UNICEF will support the Government to design cost effective models for capacity development, for example, online modules together with civil society partners.

OUTPUT 3: By the end of 2015 coordination on child protection are effectively implemented at the national level and in Central and East Java, Aceh, South and West Sulawesi, and East Nusa Tenggara

Analytical Statement of Progress:
The wide array of Government actors responsible for child protection creates a challenging context for coordination in Indonesia. As noted by the independent Evaluation of the Child Protection System in Indonesia commissioned by UNICEF and Bappenas in 2014 (not yet finalized), agreement on which agency is the lead for child protection varies at sub-national levels. The common strategy used by government agencies to address coordination is through the establishment of a working group both at national and sub-national levels, although these have not been formalised in many cases. Service delivery, policy implementation or reporting against agreed targets varies widely, as do budgets for child protection. In Central and East Java and South Sulawesi, however, new local regulations on child protection (the “Child Protection Perda”) have enabled stakeholders to agree on a common framework for future
action and work is underway to develop effective case management mechanisms. In 2015, UNICEF will be working closely with local government, civil society and young people themselves to develop appropriate coordination mechanisms to implement the approved Perdas, including with clear action plans, terms of reference for working groups and annual milestones with transparent reporting procedures.

OUTPUT 4: By the end of 2015, a strategy for strengthening child protection system into child and family welfare system established at national level and implemented in the provinces of Central and East Java, Aceh and South and West Sulawesi.

Analytical Statement of Progress:
UNICEF advocacy and technical advice in 2014 resulted in explicit reference to children’s protection in broader poverty reduction efforts. The continuation and support of specialist facilities for women and children victims of violence, exploitation and abuse, including the Integrated Service Centres and Special Service Rooms, are also referenced for increased coverage and scale-up. Much work is still needed to ensure that the new RPJMN is reflected in local level planning and budget processes.

To support sub-national models of good practice in social welfare system strengthening, UNICEF worked closely with the Ministry of Social Affairs, the World Bank, the International Labour Organisation (ILO) and DFAT to design and implement a pilot model of “integrated case management” for vulnerable children and families in selected sites. This pilot aims to offer a vision for a continuum of care to children at risk of violence, exploitation, abuse and neglect, including those living in extremely poor families. Studies commissioned by UNICEF in 2014 informed this design, including an independent review of the conditional cash grant for children in crisis (the “PKSA”), a study of the drivers of child vulnerability among children living outside of family care, and a literature review of child protection and social welfare initiatives in the East Asia and Pacific Region. These studies were carried out with a variety of local and international academic research partners, including Griffith University - Australia, the University of Indonesia and the University of Padjajaran, to develop local research capacity and expand the availability of high quality research on child protection in Indonesia. In November 2014, UNICEF, together with the Minister of Social Affairs, held a workshop with private sector, government and civil society partners as well as selected local leaders to further elaborate the design of the pilot. As a result of this workshop, the Mayor of Makassar allocated seed funding for the pilot in South Sulawesi province.

To further strengthen linkages between child and social protection, UNICEF supported the government of Indonesia to develop a dedicated parenting skills intervention for families participating in the largest conditional cash grant in the country - the PKH Programme. This module started to be rolled out in 2014 and is anticipated to reach more than 2 million families in the coming five years. It is funded by the Government and will be linked to the broader case management systems development supported by UNICEF.

OUTPUT 5: By 2015, a national comprehensive strategy on prevention and response to violence against children is adopted.

Analytical Statement of Progress:
Political momentum to tackle violence against children in 2014 was significant. In July, the Government issued a Presidential Instruction on Combating Child Sexual Abuse outlining the roles of multiple sectors, including religious affairs, education, welfare, and justice, among others. The Instruction was launched, with UNICEF financial and technical support, together

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with a high level delegation of senior women leaders in civil society and the private sector for widespread dissemination and ownership. Accompanying this Instruction, and in support of the forthcoming new National Action Plan on Violence against Children in 2015, UNICEF and the Government, advised by children and young people’s consultation, issued an animation video for parents and children about children’s right to safety from harm and where and how to seek assistance. This video “went viral” on Youtube and was shown by local supermarket chains, theatres and religious institutions, thereby reaching more than 2 million people. A more comprehensive national campaign effort linked to Indonesia’s participation in the #End Violence campaign globally will be launched in 2015, aimed at fostering a public dialogue on violence against children; a subject that has been invisible from the development agenda previously. This campaign is informed by pro-bono engagement from the private sector. UNICEF invested in outreach with young people through the piloting, and upcoming launch, of the “U-Report” for Indonesia. U-Report users will be active in reviewing the current Violence Prevention Plan of the Government and in suggesting practical recommendations for the revised Prevention Plan beyond 2015. Students from local universities have also submitted ideas to prevent violence against children in the global “Design Challenge” supported by UNICEF. UNICEF also invested in robust monitoring and evaluation design behind several pilot prevention initiatives in Papua, South Sulawesi, and Central and East Java Provinces to gather evidence about “what works” to prevent violence against children. Together, these efforts, coupled with a meta-analysis of national and international literature on the nature and scale of violence against children in Indonesia, will inform a costed, evidence-based revised National Action Plan for Prevention in the future.

OUTPUT 6 Output Programme Support Child Protection

Analytical Statement of Progress:

UNICEF provided human resource support to contribute to the achievement of other outputs within the programme component, or across Programme components in the country programme of cooperation.

OUTPUT 7: By 2015, Young Key Affected Populations (YKAP) benefit from enhanced prevention and protection programmes and services to reduce their vulnerability to HIV and AIDS.

Analytical Statement of Progress:

UNICEF, in cooperation with the National AIDS Commission (KPA) and the Ministry of Health (MoH) focused on setting a conducive policy environment framework to address the needs of adolescents and young key affected populations (YKAP). These include children victims of sexual exploitation, boys having sex with boys, transgender, adolescents who inject drugs. The analytical work carried out by UNICEF in 2013 revealed that YKAPs are at the centre of the epidemic. Findings highlighted that YKAPs have high rates of infection, but have the least access to information and services, with comprehensive knowledge being below 50 per cent.

Following UNICEF’s rigorous advocacy efforts, adolescents and young people from key affected populations were recognized by the National AIDS Strategic Plan 2015-2019 as a priority group, paving the way for the development of appropriate strategies to target them and leverage funds from both the national budget and international assistance programmes, such as the GFATM under its new funding modality. To that end, UNICEF, in cooperation with KPA, MoH, YKAPs networks, UNAIDS/WHO, and UNPAD (University of Bandung) developed a framework for piloting a YKAP sensitive programme in Bandung, West Java, within the national continuum of
care framework (LKB). The LKB is an integrated decentralized service delivery model that was introduced to accelerate and expand access to ARVs for treatment and improve prevention activities in selected priority districts starting in 2012. This approach relies on close collaboration between district health offices, district AIDS commissions, the health services and increased involvement and mobilization of CSOs, and communities, in particular of key affected populations and people living with HIV. The LKB is currently implemented in 13 districts and will be scale up to a total of 75 priority districts by 2015. The YKAP model will be piloted in 2015 to inform the integration of YKAP in the national continuum of care framework and its further scaling-up. The pilot will specifically look at both supply and demand issues from a YKAP perspective, and will integrate specific gender components and further linkages with social welfare to protect rights and provide social and economic support for YKAPs.

Evidence based advocacy resulted in a nascent political commitment toward support for YKAPs, but continuous advocacy and technical support remain critical to ensure that YKAPs are placed at the centre of the HIV/AIDS response. Indonesia is one of only nine countries globally with a growing epidemic, so addressing YKAPs in its national response is more important than ever.

**OUTCOME 10:** By 2015 decision makers at national and sub-national levels have access to and utilize a comprehensive monitoring and data collection systems on child protection for policy, planning and budgeting purposes.

**Analytical Statement of Progress:**

An ongoing challenge in Indonesia’s child protection information management systems is the weak quality of databases, as pointed out by the Governance Indicator Framework Assessment (“GIF”) commissioned by UNICEF’s regional office for Asia and the Pacific (EAPRO) and Indonesia in 2013/2014. This is attributable to a lack of consistency in definitions and templates, poor division of responsibilities in data consolidation, and lack of proactive lead for streamlining and overseeing these processes. The 2010 mapping of child protection information management found that various actors involved in data collection and exchange used a range of definitions and templates (UNICEF; Universitas Indonesia; Columbia University Mailman School of Public Health, 2010). Core concepts, starting with the very notion of the “child” and including “neglected children”, “street children”, “children in conflict with the law”, were understood differently, resulting in major distortion of respective databases. Child protection partners also lacked consistency in the kind of indicators they tracked. Case management for children is directly impacted as there is no standardised process for record taking and documentation, frequent utilisation of untrained volunteers for data entering, and a lack of systemic data audits. Pro-active demand for child protection data from policy makers is also lacking, resulting in very few cases of evidence-based policy reform and programme investment by the Government in the area of child protection. To combat this problem, in 2012 UNICEF and the Government advised by the Centers for Disease Control and Prevention (CDC), together commissioned a Violence Against Children Survey to measure the prevalence and incidence of violence (physical, sexual, emotional) in the country. This Survey aimed to provide first-ever baseline data on violence and related risk factors to influence the design of the overarching new Strategic Plan (RPJMN) 2015-2019. Unfortunately, however, due to the poor quality of the data collected, the results of the survey are not recommended for publication. UNICEF and the Government- in collaboration with local and international academic partners- will commission a lessons learned paper to document the experience in Indonesia to inform future survey research efforts on this ethically complex, and sensitive, issue. In 2015, UNICEF will work closely with Government to conduct a “meta-analysis” of violence research in
Indonesia to fill this ongoing gap in knowledge. A compilation of incidence data from institutions engaged in child protection (police, health, justice, education other) will be included in this effort.

Overall, data collection on other child protection indicators is improving, due in part to sustained advocacy by UNICEF Social Policy and Child Protection in 2014 to include core child protection global indicators in regular surveys and studies supported by the Government (such as child discipline, child labour and birth registration indicators, now included in the annual household survey). UNICEF also made use of statistical experts to work closely with the National Statistics Office (BPS) to analyse existing surveys for hidden child protection violations, most notably child marriage. In 2014, UNICEF analysed government health surveys to gain new information about the prevalence of FGM/C, which is as high as 52 per cent in the country (Riskesdas, 2013) and child marriage, which is at 25 per cent (Susenas 2012 and Census 2010). These case studies helped to generate the first-ever evidence on violence against women and girls in the country. UNICEF aims to launch this data together with Government in 2015 for greater visibility and attention to these issues.

Noting the lack of progress toward achieving a clear set of child protection information indicators for tracking at national and local levels in previous years, UNICEF will work closely with the Government in 2015 to design a comprehensive child protection research agenda accompanying the new government’s Strategic Plan (RPJMN). The ownership of this agenda, and associated research requests, will remain with the Government and will be linked to coordinated policy priorities in this area.

OUTPUT 1: By mid-2014, completed national prevalence survey on violence against children is used to inform national development planning

Analytical Statement of Progress: Violence against children gained new prioritisation and importance in the national strategic plan of the government (RPJMN 2015-2019) as a result of a series of advocacy efforts and sustained technical support to the RPJMN drafting team in 2014. The draft now includes numerous commitments to ending violence against children in Indonesia, shared by multiple sectors and ministries. A range of surveys and studies was used to inform the draft, including specialised studies commissioned by UNICEF in previous years. The findings of the National Violence against Children Survey, conducted together with the Centers for Disease Control and Prevention (CDC) and the Government, were not included because of the low response rates and sample size for key indicators. To ensure ongoing learning from the survey process, including to inform future Government-led research efforts, UNICEF, CDC and the Government will embark on a secondary analysis of the data in 2015. The Office of Research, Innocenti, in UNICEF Florence, will support the launch of the “R3P” process in Indonesia to provide an alternative baseline for investment in future years. This will begin in 2015 with a comprehensive literature review with local and international universities on violence against children (using multiple data sources, including peer reviewed journals and grey literature).

OUTPUT 2: By End of 2015, Bappenas, MOSA, MOLHR and their counterparts in Central Java, Aceh, South Sulawesi have the capacity to collect, compile, analyse and utilize child protection data for planning, policy and budgeting.

Analytical Statement of Progress: UNICEF and government partners successfully included some critical child protection indicators on violence, juvenile justice and social welfare in the new national strategic plan (RPJMN), which will allow for improved funding and programmes in these areas. UNICEF Indonesia
piloted the regional model of “governance indicator frameworks” for the child protection system in selected districts in 2013, aimed at introducing MORES analysis at district level. This is part of a broader regional effort led by the UNICEF regional office for Asia and Pacific. The final report of this work, as well as the results of the UNICEF Indonesia- commissioned Child Protection Systems Evaluation 2014 (forthcoming), will inform UNICEF’s technical advice to the government in their roll-out of the national and sub national strategic plans. In the interim, however, progress against this indicator is stalled. UNICEF continued to advocate for the inclusion of key child protection indicators in regular household surveys in the country, such as FGM prevalence in the “Riskesdas”, child marriage in the Susenas and Census and corporal punishment in the upcoming MICS. Secondary analysis of these data sources already has provided unprecedented data sets on child marriage (25 per cent prevalence) and FGM (52 per cent prevalence), which will be included in UNICEF’s global databases for monitoring, as well as in regular programming and policy advocacy work in the country.

OUTCOME 11: By 2015 children are better protected from the immediate and long term impact of armed conflict and natural disasters

Analytical Statement of Progress:
In 2014, Indonesia continued to proactively lead and self-fund quality emergency preparedness and response actions in the area of child protection. UNICEF’s support continued to engage the Ministry of Social Affairs Child Protection Rapid Response Team, a mechanism established by UNICEF in previous years. This team is deployed at the onset of any disaster, and includes a rotation of specialists across the country who have regular access to skills building activities. As a result, 100 per cent of the country’s natural disasters in 2014 were responded to by the Rapid Response Team, with no additional support required. Child protection emergency stocks (e.g. recreation kits) were prepositioned with local faith-based partners, accompanied by training and technical assistance, as an additional preparedness measure.

UNICEF worked closely with local and international NGOs in the country, including World Vision and Plan International, as well as other UN partners, to lobby for protection to be included in broader national cluster arrangements (the cluster system was nationalised by the government in 2014) and to plan a capacity development workshop on the global Child Protection in Emergencies standards developed by the Child Protection Working Group (CPWG). These standards will be contextualised and rolled out in Indonesia in 2015, with the support of the CPWG.

OUTPUT 1: By 2015 the national child protection emergency preparedness and response mechanism is fully functioning at national and in 5 provinces

Analytical Statement of Progress:
UNICEF has invested significantly over the past decade in the capacity of the Government to respond to child protection concerns in an emergency. This is evident in the timely and proactive deployment of the National Child Protection Rapid Response Teams within the Ministry of Social Affairs; initially modelled by UNICEF. In 2014, the Rapid Response Teams were active in all disasters in the country and procured their own psychosocial support supplies independently of UNICEF. No major disasters were reported in the country, and UNICEF successfully handed over preparedness supplies and stocks to leading civil society partners and Government for better direct delivery in case of emergency. UNICEF, in collaboration with World Vision International and the global Child Protection in Emergencies Working Group, is scheduling a capacity development workshop for the Rapid Response Team representatives in early 2015, based on the new Child Protection in Emergencies Standards, which will be
adapted to Indonesia’s context, with advice from the Child Protection Working Group. More work is needed, however, to monitor emergency responses independently to ensure learning and preparedness efforts are translated into practice.

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