



Oxford Policy Management

Overview of Promising Practices in Adolescent Programming in Indonesia by UNICEF (and other partners)

Document Review

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Executive summary

The purpose of the document review is to contribute towards development of an evidence-based set of criteria for what constitutes a ‘promising practice’ in adolescent programming in Indonesia. This appreciation of the useful strategies and interventions in adolescent programming will be critical to effective future targeting of limited resources in a context of inequality and huge need.

The document review is the starting point for identification of effective strategies which can contribute towards improvements in outcomes for adolescents as they move towards adulthood. It is the starting point for inclusion and exclusion of programmes for in-depth case study review against a specific set of ‘promising quality’ criteria.

This report applies the UN definition of adolescence as the period from 10 to 19 years of age. Special attention is drawn to the unique growth period in the 10-14-year age group. Equally the distinctive needs of adolescent girls and boys, adolescents with disabilities and minorities are considered.

This paper considers,

-) global and regional priorities and commitments relative to adolescents, and
-) those specific to adolescents in Indonesia, as well as,
-) programme interventions which target adolescents in Indonesia, benchmarked against a human and child rights framework within the five domains of the UNICEF Adolescent Country Tracker.

These five domains are,

-) Health and wellbeing,
-) Education and learning,
-) Protection,
-) Transition to work,
-) Participation and engagement.

Recent reports commissioned by UNICEF predict six major trends which will impact on Indonesia’s achievement of the Sustainable Development Goals,

-) Growing economic inequality
-) Limited access to quality healthcare and education
-) Increasing youth unemployment
-) Rise in non-communicable diseases
-) Threat to health posed by pollution
-) Increasing vulnerability to climate change

Reports point to a growing “inequality dynamic” in Indonesia which results in a high rate of out of school adolescents and which will significantly impact on the potential to achieve SDG 8 on decent work and economic growth. This link between adolescent development, education and employment, will be critical to future programming design to assure the potential for human development.

The Indonesian policy and legislative environment is structurally robust although gaps in implementation and enforcement remain. A recent Government of Indonesia report launched at the High Level Political forum on SDGs in July 2017¹ with baseline data for the SDGs in Indonesia recommends that for useful implementation to occur national action plans and draft national actions plans should be fully costed, with commitments in the national budget and with clear monitoring

¹ <https://sustainabledevelopment.un.org/hlpf>

strategies (Indonesia Ministry of National Development Planning and the United Nations Children's Fund 2017).

The document review, also intended to identify emerging practice in adolescent programming which can be considered for further review as a 'promising practice. The programmes were considered under the five domains of the Adolescent Country Tracker. Whilst the domains provided a structural framework for the review it is understood that many programmes are crosscutting and can be considered as having contributed to improved outcomes across more than one domain. For example, WASH in Schools can relate to protection - prevention of bullying, health – reduced infections, and education – girls stay in school. For ease of reading and analysis, a 'primary' domain has been selected for the programme intervention.

Health and wellbeing: programmes identified through the document review include those related to nutrition, HIV and AIDS and access to sexual and reproductive health. The adolescent friendly health services (PKPR) are provided by government through government mandated community health clinics (Puskesmas) throughout Indonesia. These tend to focus on adolescent maternal and child health, although a 2016 study noted the continuing prevalence of anaemia amongst adolescent girls in some districts, as a severe public health problem. Through the Child Friendly City/District initiative these PKPR should also offer sexual and reproductive health services (SRH) however the 2014 report on the implementation of this initiative does not explicitly address access issues. A life skills programme in Papua which ran from 2010-2014 which showed that 91 per cent of schools have provided HIV education to students although the programme did not manage to produce significant and sustained changes in the lives of young people and the HIV epidemic among the targeted population group remained unchanged. A current HIV related programme with young key populations in Bandung, integrated within the broader Education Sector System Strengthening programme, is emerging as an interesting model. There is limited information on adolescents' access to sexual and reproductive health services, which is believed to be constrained by prevailing cultural, religious and social values. UNICEF report that,

“The social acceptance for adolescent SRHR, such as the use of modern contraceptive for unmarried adolescents remains highly contested. Reproductive Health is introduced in limited human reproduction function with the promotion of family, moral, and religious values”.
(UNICEF 2017, written communication)

Education and learning: programmes identified through the document review include those related to access to secondary education and to WASH² in Schools. The One Roof School Programme, (SATAP) combines primary and junior secondary education in one compound, aiming to increase access for students in remote rural areas. Studies in 2011 and 2013 are inconclusive in understanding if the model supports secondary education retention. A further remote rural initiative on early grade literacy is considered outside the scope of this review. Reports of support for strengthening the national curriculum by UNESCO and for a UNICEF supported Community Based Development Information System to track out of school children have not been verified by documentation. The WASH in Schools programme has included cross-sectoral approaches to menstrual hygiene management to improve girls' health, to increase girls school attendance, and to address bullying and harassment of girls during menstruation. The programme design is embedded in formative research and initial reported results demonstrate positive outcomes.

Protection: UNICEF Indonesia report that they are involved in adolescent programming to i) reduce school bullying and to introduce positive discipline in schools, ii) around child marriage, and iii) in the juvenile justice sector, to support diversion and reintegration of children from prison. The pilot programme to prevent peer violence and bullying in Junior High Schools, has been identified as a promising practice internationally however implementation in Indonesia is in the earliest stages and the documentation on design and intended results is limited.

Transition to work: The smooth transition from education to employment will be a key predictor of Indonesia's future economic prosperity (Economist Intelligence Unit 2016 a.). Ensuring that

² water, sanitation and hygiene WASH

'education' is fit for purpose will require an examination of the intersection between future employers needs and current education sector goals, so that adolescents have a realistic expectation of future employment.

UNICEF does not report any current programmes in the transition to work domain and documentation regarding specific programmatic interventions by UNICEF and other stakeholder were not available to this review.

Participation and engagement: This document review identified a range of tools and instruments being applied to encourage participation and engagement however the integration with programmatic interventions which had clear intended outcomes for adolescent development was not evident. Reality Check Approach, U-report, community digital storytelling are useful tools for gathering evidence and the Adolescent Kit for Expression and Innovation provides a support to interventions using creative methods to achieve outcomes for adolescent development. These tools were posited as promising practice in adolescent programming. However, their value as standalone interventions is limited.

Key findings

- J The context for adolescent programming in Indonesia is heterogeneous and complex. Inequalities persist and the underlying trends are predicted to continue. This will likely exacerbate the poor outlook for youth employment which may contribute to rising tensions. The links between education and consequent employment for economic growth stand-out as critical contextual factors for adolescent programming. This includes both ensuring that adolescents stay in school or other educational systems and that the quality of the learning programmes offered meets their needs.
- J UNICEF and other stakeholders' adolescent programming is designed against this background of inequality, high need and limited resources.
- J Adolescent programming is a critical intervention area for UNICEF Indonesia. Significant key interventions are underway in programmatic silos and the links/integration across programme areas is not well-defined through a strategic plan which details intended outcomes.
- J Tools for participation and engagement appear to be misunderstood as standalone programming interventions rather than as instruments and mechanisms which may prompt and support effective programming to achieve results for young people.
- J Much of the available evidence is anecdotal rather than evidence-based, which is a critical criterion for measurement of irrefutable best practice. Although a significant number of documents were provided, these did not provide corroboration of the programme interventions subsequently described during key informant interviews.
- J Consequently, when programmes were reviewed against the 'promising practice' criteria for inclusion as in-depth case studies, there is a high exclusion rate.
- J Equally, the inclusion of the most marginalised and excluded adolescents in programme interventions remains indiscernible.

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List of abbreviations

ACT	Adolescent Country Tracker
AFHS	Adolescents Friendly Health Services
CDC	Center for Disease Control and Prevention
DFAT	Department of Foreign Affairs and Trade. Australian Government
EAP	East Asia and the Pacific
EFA	Education for All
EIU	Economist Intelligence Unit
ESCAP	United Nations Economic and Social Commission for Asia and the Pacific
FBO	Faith-based Organization
GER	Gross Enrolment Rate
HIV	Human Immunodeficiency Virus
IBBS	Integrated and Behavioural survey on HIV
IFA	Iron Folic Acid
ILO	International Labour Organization
JSE	Junior Secondary Education
MoH	Ministry of Health
NAC	National AIDS Commission
NGO	Non-governmental Organization
OPML	Oxford Policy Management Limited
ORSP	One Roof Schools Program
SD	Primary School
SDG	Sustainable Development Goals
SGA	Small for Gestational Age
SMA	Senior Secondary School
SMP	Junior Secondary School
SOWC	State of the World's Children
SRH	Sexual and Reproductive Health
STI	Sexually Transmitted Infections

UN	United Nations
UNCRC	United Nations Convention on the Rights of the Child
UNESCAP	United Nations Economic and Social Commission for Asia and the Pacific
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNHCR	United Nations High Commissioner for Refugees
WHO	World Health Organization
WIFA	Weekly Iron and Folic Acid
YKAP	Young Key Affected Populations
YKP	Young Key Populations

1 Introduction

1.1 Purpose

The purpose of the document review is to contribute towards development of an evidence-based set of criteria for what constitutes a 'promising practice' in adolescent programming in Indonesia. This appreciation of the useful strategies and interventions in adolescent programming will be critical to effective future targeting of limited resources in a context of inequality and huge need.

This report,

-) provides an update on knowledge and understanding of recent developments in adolescent programming globally, regionally and in Indonesia
-) examines the strategies that have been identified as most effective in contributing towards improvements in outcomes for adolescents as they move towards adulthood to become, "the agents of change for economic growth and torchbearers for sustainable development" (UN General Assembly 2015), and,
-) defines what is meant by 'promising practice' in the context of this review.

The document review supports the selection process of specific adolescent programmes for further in-depth case study review as promising practices.

1.2 Definition of adolescence

Adolescence is, 'a stage of major growth and development in which significant physiological, cognitive, psychological and behavioural changes take place and important developmental tasks, such as developing an identity and becoming independent, need to be accomplished', (Schmeid and Tully 2009; WHO 2014). It is a social rather than biological construct which is applied to define that period of transition from childhood to adulthood and as such definitions can vary according to culture and context.

This report applies the UN definition of adolescence as the period from 10 to 19 years of age, acknowledging that characteristics of this stage may extend up to age 24, and that adolescent well-being is also determined by early child development before age 10 (UNICEF 2011). There is also an acknowledgement that the age range 10-14 years old is of critical importance because this is the onset of physical, emotional, cognitive and social changes - a rapid and rich learning period and associated risk factors (Ibid.). The broader review of adolescent programmes notes that although the target group is 10-19 year olds, programmes for young people in the age group 15-24 whilst not adolescent-specific, nonetheless include adolescents and can be considered for inclusion.

Special attention is paid to sex and gender differences. The World Health Organisation notes that girl reach biological development milestones up to two years ahead of boys and that expectations and societal norms differ significantly between adolescent boys and adolescent girls in most societies (WHO 2014). Equally the diverse needs of adolescents with disabilities is also considered, in alignment with the 2012 UNESCAP Incheon Strategy policy direction.

In this paper, the terms 'young person' and 'young people' are used interchangeably with adolescent/s for ease of reading.

1.3 Scope of the document review

This paper reviews global and regional priorities and commitments relative to adolescents, and those specific to adolescents in Indonesia, as well as programme interventions which target adolescents. It considers the strategies and interventions that are considered effective in promoting positive outcomes for adolescents as well as the key criteria for identifying a promising practice. The

evidence is considered across five domains identified by UNICEF Indonesia as critical to adolescent development,

-) Wellbeing
-) Education
-) Protection
-) Engagement, and
-) Livelihoods

These domains reflect the priority areas identified in the State of the World's Children Report 2011 Adolescence, An Age of Opportunity (UNICEF 2011),

-) Health
-) Education
-) Protection
-) Participation

Which have been similarly translated into the UNICEF Adolescent Country Tracker (ACT) 5x5PLUS5 indicators (UNICEF 2017 a.),

-) Health and wellbeing
-) Education and learning
-) Protection
-) Transition to work
-) Participation and engagement

Whilst UNICEF programmes in Indonesia, are the starting point for considering promising practices in adolescent programming, where information has been available the review extends to those programmes implemented by UNICEF partners and other organisations operational in the area. This includes specific government programme interventions.

The document review acts as the starting point for inclusion and exclusion of programmes for in-depth case study against a specific set of 'promising quality' criteria.

The overall review process is conducted in two phases,

Phase 1

-) Document review
-) Participant workshop for a) validation of promising practice criteria and b) identification of programmes for case study review
-) Key informant interviews

Phase 2

-) Field work for case study review in three locations
-) Data analysis and identification of promising practice
-) Final report

1.4 Methods of the document review

This review is based on documents provided by UNICEF Indonesia, including peer reviewed and grey literature, as well as studies and evaluations on adolescent priorities and programming. In addition, a more general Google and Google scholar search was conducted, to access other

published resources and unpublished documents from several national and international government, UN and NGO sources. The full list of documents reviewed is contained in Annex A and the Bibliography, attached to this report.

The minimum requirement was to review 15 documents provided by UNICEF. Acting on advice from UNICEF the authors filtered the 82 documents provided to prioritise those referencing the overall context as well as programme documents related to specific interventions conducted between 2011-2016 (Annex A). Where necessary a request was made for additional documentation to support a thorough review of these interventions.

The priority recommended documents for background and situation analysis included,

- J Indonesia Ministry of National Development Planning and the United Nations Children's Fund (2017) *SDG Baseline Report on Children in Indonesia*
- J UNICEF (2017) Adolescent Briefing Note
- J Economist Intelligence Unit (2016) Megatrends to 2030. UNICEF: Jakarta
- J Economist Intelligence Unit (2016) Scenarios to 2030. UNICEF: Jakarta
- J UNICEF (2011) The State of the World's Children. Adolescence – An Age of Opportunity. UNICEF: New York
- J UNESCO (2012) Youth and Skills. Putting Education to Work. Education For all Global Monitoring Report. UNESCO: Paris

Given the vast and complex context that is Indonesia, and to ensure inclusion of as wide a range of programmes as possible, the review of programmes was supplemented with consideration of interventions suggested by stakeholders attending the 'promising practices in adolescent programming' workshop in Jakarta on 6th July 2017. During the period 5th-7th July further requests were made for supplementary documentation related to the programmatic interventions nominated for consideration as promising practice.

1.5 Methodological limitations

In view of the rapid nature of this document review, and the wealth of available documentation, as well as the complex context, a hybrid convenience-snowball sampling modality has been applied to identification of adolescent programme interventions in Indonesia. This method combines selection of convenient contributions with snowball sampling according to the needs of the developing enquiry. Measures to reduce selection bias included a follow-up participative workshop and enquiry through key informant interviews. Whilst the programmes identified include those supported by UNICEF, government and non-government stakeholders, current national government programmes are excluded because of their implicit good practice.

Thus, this paper cannot be considered to have conclusively covered all adolescent programming interventions in the country. Those that are reviewed are juxtaposed against the wider global and regional policy and practice frameworks.

The review includes reference to pertinent policy and legislation in Indonesia, however this does not constitute a full legal review and analysis.

2 Context

2.1 Nature and characteristics of adolescence

Adolescence is considered second only to early childhood in the rapid rate of growth and development which young people undergo (UNICEF 2011; WHO 2014; Sheehan and others 2017).

Alongside physical changes this is a period of intellectual, emotional and social development, with an increasing capacity for abstract reasoning and relative thinking (Ibid.). Adolescents experience unparalleled developmental challenges related to their increasing need for independence and evolving sexuality (Schmeid and Tully 2009). At the same time, they are confronted with major life changes such as transitioning from education to employment, and in many circumstances from being cared for to becoming carers for siblings, parents and elderly extended family members and for their own children. This negotiation of changing relationships with family, friends and communities takes place against a background of personal transformation, which lends itself to precarious decision making and increased involvement in risk behaviours which may affect young people's long-term outlook (UNCRC 2016).

Box 1: UNICEF 2012 Progress for Children

A report card on adolescents

Neither young children nor adults, adolescents lack the services that respond to their distinctive needs. Interventions for children very often focus on the younger ages; adolescents 'age out' of paediatric health care, for example, and they are often unreached by programmes for adults. Many adolescents are excluded from services that would reduce their risk of HIV and sexually transmitted infections, or that would help them prevent pregnancies, because of laws that limit their access to these services without parental consent. Adolescents who live on their own, either by choice or by circumstance, may no longer have the protection of their families.

Developmental changes during the adolescent period cannot be described in generalities. Individual change takes place at different rates and is shaped by contextual factors (UNCRC 2016). As early as the beginning of last century, early adolescence, that period between ages 10-14, has been recognised as a unique growth stage because of the rapid developmental change which occurs (Hall 1904). Consequently, the concept of early adolescence developmental stage theory has been advanced by notable researchers and theorists (Piaget 1960; Kagan and Coles 1972; Kagesten and others 2016). Therefore, responsiveness to the special developmental needs of this cohort is encouraged through tailored interventions which begin programmes early, consider the needs of boys and girl separately, and which pay attention to the context including religious, cultural and traditional expectations, family income and opportunities, and geography (UNCRC 2016).

Research on adolescents with disabilities is more limited (Maxey and Beckert 2016). Though this group will face the same challenges as their non-disabled peers, the way in which they deal with them will be different, and again is dependent on context and early experience. They may struggle with access to the same social experiences and are more likely to be subject to skewed perceptions regarding their capabilities. Much of the discourse on disability, especially intellectual disability, is based on a notion of an 'eternal child' and therefore the transition to adulthood is more challenging (Franklin, Raws and Smeaton 2015). Significantly, the notion of sexuality is often denied for young people with disabilities, consequently they are unable to access to sexual and reproductive health education which has implications for increased vulnerability (Neufeld and others 2002). Exclusion and marginalisation of children with a disability extends through adolescence and affects their opportunities to attend or complete schooling and consequently isolates them from the employment market (UNICEF 2011; UNCRC 2016). Support for active decision making is promoted as a fundamental requirement for participation and active engagement of adolescents with disabilities (UNCRC 2016).

The UN Committee on the Rights of the Child (2016) also recommends paying special attention to the needs of lesbian, gay, bisexual, transgender and intersex adolescents, through implementation of special support measures. This group of young people are more likely to be exposed to violence, to experience mental illness and to have their behaviour criminalised than their peers. Padilla and others (2007) note that access to information with regards to their own transition from childhood, is limited by prevailing social mores which disapprove of homosexuality and which may lead to poor health outcomes including sexually transmitted infections (STIs).

Similarly, adolescents from minority and indigenous communities can be socially excluded resulting in high rates of mental illness and depression, poor educational outcomes and consequent lack of access to the employment market, as well as high levels of detention within the criminal justice system (UNCRC 2016).

The terminology of youth and adolescence in Bahasa Indonesian language is given some consideration by Ramadhan (2013), who notes that both “Anak muda” and “Pemuda” have been used to describe youth with the former seen as more useful to describe the active engagement as equal partners. Many programmes use “remaja” as terminology too. It refers to both adolescents and youth. Equally the age group suggested by ‘youth’ can extend up to 30. Ramadhan further suggests that the term ‘adolescent’ has been used to position young people as not civically engaged, or perceived solely as an object, with an image attached to consumerism. Thus, the definition of adolescent applied in this review is 10-19 years of age.

2.2 Relevance of global and regional perspectives for Indonesia’s adolescents

Children’s rights enshrined in the UN Convention on the Rights of the Child, ratified by Indonesia in 1990, are explored in depth in relation to the 2016 UNCRC General Comment No. 20 on the implementation of the rights of the child during adolescence³. This proposes to take into consideration the ‘evolving capacities’ of the child, and to adopt approaches which recognise the different needs of younger children and adolescents. The General Comment provides an authoritative interpretation of Treaty obligations, and implementation guidance for State Parties. In this instance, it makes the case for a focus on the rights of adolescents as they negotiate an increasingly complex and challenging world, and notes the potential of adolescents to contribute to growing economies to cope with shifting population changes.

It provides specific guidance in the areas of,

-) Violence against children,
-) Family environment and alternative care,
-) Basic health and welfare,
-) Education, leisure and cultural activities, and
-) Special protection measures – for example, migration, trafficking, conflict and crisis.

The General Comment recognizes the challenging environment in which adolescents are operating and calls for new approaches to, “tackle local and global challenges, including poverty and inequality, discrimination, climate change and environmental degradation, urbanization and migration, ageing societies, pressure to perform in school and escalating humanitarian and security crises”, (UNCRC 2016).

These same themes are at the core of the Sustainable Development Goals 2015-2030 which were adopted through the resolution of the United Nations General Assembly in September 2015. The SDG agenda calls for all countries to, ‘promote prosperity while protecting the planet’⁴. UNICEF (2016) has worked with government partners to identify priority SDG targets and indicators for

³ A comprehensive listing of Indonesia’s ratification status of UN Treaties can be found at <http://indicators.ohchr.org>

⁴ <http://www.un.org/sustainabledevelopment/development-agenda/>

children in Indonesia, recognising that, 'investing in all children and young people [adolescents] is central to achieving all aspects of sustainable development'. They have identified three key principles to assure a reduction in inequalities,

-) Disaggregated data; by income, gender, age, religion, and geographic location, to ensure that no child is left behind. This will allow progress for adolescents to be effectively monitored.
-) Universality; no target is met unless it is met by all groups of the population. This reflects the content of the UNCRC General Comment No. 20 on the implementation of the rights of the child during adolescence.
-) Priority indicators to monitor progress for children; the SDGs do not target children explicitly but are relevant to their lives. UNICEF Indonesia proposes the inclusion of 9 additional child specific indicators which relevant to the country context challenges.

The Member States, including Indonesia, of the United Nations Economic and Social Commission for Asia and the Pacific (ESCAP) have committed to a regional strategy for promoting the rights of people with disabilities through the implementation of the UN Convention on the Rights of Persons with Disabilities. The Incheon Strategy to "Make the Right Real for Persons with Disabilities in Asia and the Pacific" 2013-2022, contains the world's first set of regionally agreed disability-inclusive development goals. Each of the set of 10 goals, targets and indicators has a relevance for adolescents and can be benchmarked against the SDGs. The strategy also requires disaggregated data including on women and girls with disabilities, as well as age.

The State of the World's Children

2011 report on adolescence also notes the paucity of disaggregated data which is essential to tracking progress (UNICEF 2011). Universal systems for health and education data collection tend to focus on early years; as children grow and develop they are more likely to fall out of information management systems as well as the basic social services which these systems track (Ibid.). This report also considers adolescent rights to,

-) Health: nutrition, sexual and reproductive health, HIV and AIDS, mental health, and disability specific health
-) Education: links secondary education to improved outcomes for adolescents including long-term benefits for girls, increased civic participation, reduced poverty, lower rates of violence etc.
-) Protection: notes the increased exposure, including through social media, to violence including sexual violence, peer to peer violence, child trafficking, child marriage and other harmful practices during adolescence
-) Participation: notes adolescence as time to practice and prepare for "citizenship" and promotes communication technologies and social media particularly for marginalised groups.

The SOWC 2011 also reflects the challenges of the 21st century noted in the SDGs related to,

-) Climate change and the environment
-) Poverty, unemployment and globalisation
-) Conflict and emergency settings

These issues are similarly noted as challenges in the priority SDG targets and indicators for children in Indonesia (UNICEF 2016). Climate change has been linked to the Sendai Framework for Disaster Risk Reduction 2015-2030 which commits States to action, "in the context of sustainable development and poverty eradication, and to integrate, as appropriate, both disaster risk reduction and the building of resilience into policies, plans, programmes and budgets at all levels". In setting SDG targets and indicators UNICEF has aligned this with the Child Friendly City/District Initiative in Indonesia (Ibid.).

A focus on adolescent health is also gaining momentum at global, regional and national levels. Specifically, health related behaviours and conditions that begin in adolescence and can have

immediate and longer term effects (WHO 2014). These included the consequences of unprotected sexual behaviour, underweight or obesity and other nutritional issues, and alcohol, tobacco and other substance usage. Data is again noted to be an issue for tracking and planning and WHO (2014) call for “improved monitoring of implementation of national policies and strategies which can lead to improvements and readjustment”. It is noted that policies on specific health issues can affect adolescents, for example those that limit access to substance injurious to the health of adolescents such as tobacco. It is also noted that adoption of youth specific policies in some countries indicates a level of political commitment to adolescent and youth issues and can provide a framework for access to national budget resources and services (Ibid.). However, a 2013 review of youth policies in Indonesia suggests that the, “fragmentation of youth-related policies resulted in unintegrated distribution of funding for programmes and they often overlapped between one ministry and another” (Ramadhan 2013).

The general findings of the UNICEF (2015 a.) evaluation of its global strategies and programme performance in child protection suggest that whilst some progress has been made towards systems strengthening, results on social norms change are less conclusive. Gaps also remain regarding inclusion of children and adolescents with disabilities and young people’s participation in decision making. Concerns are also noted regarding global coherence and standard setting. The report concludes that more attention should be paid to system strengthening and to developing and managing the evidence base.

The emerging importance of robust research into adolescent development is acknowledged in the set of seven Innocenti Research Briefs, “designed to expand and improve the conduct and interpretation of research on adolescent health and well-being in low- and middle-income countries”, (Reavely and Sawyer 2017). This urgent need relates to a serious gap in evidence-based programming with this important cohort. Without the evidence the determination of priorities for investment will be neither effective nor efficient (Azzopardi and others 2017). This supports the inclusion of evidence-based programme design as a key criterion for promising practice in adolescent programming. Given there are 48 million 10-19 year olds in Indonesia, there is an added imperative for designing interventions which are based on improved understanding of their needs. Thus, this review of promising practice in adolescent programme is timely. A more detailed discussion of ‘promising practice’ with specific relevance to this review, is included at Section 4 of this report.

2.3 The structural context of Indonesia

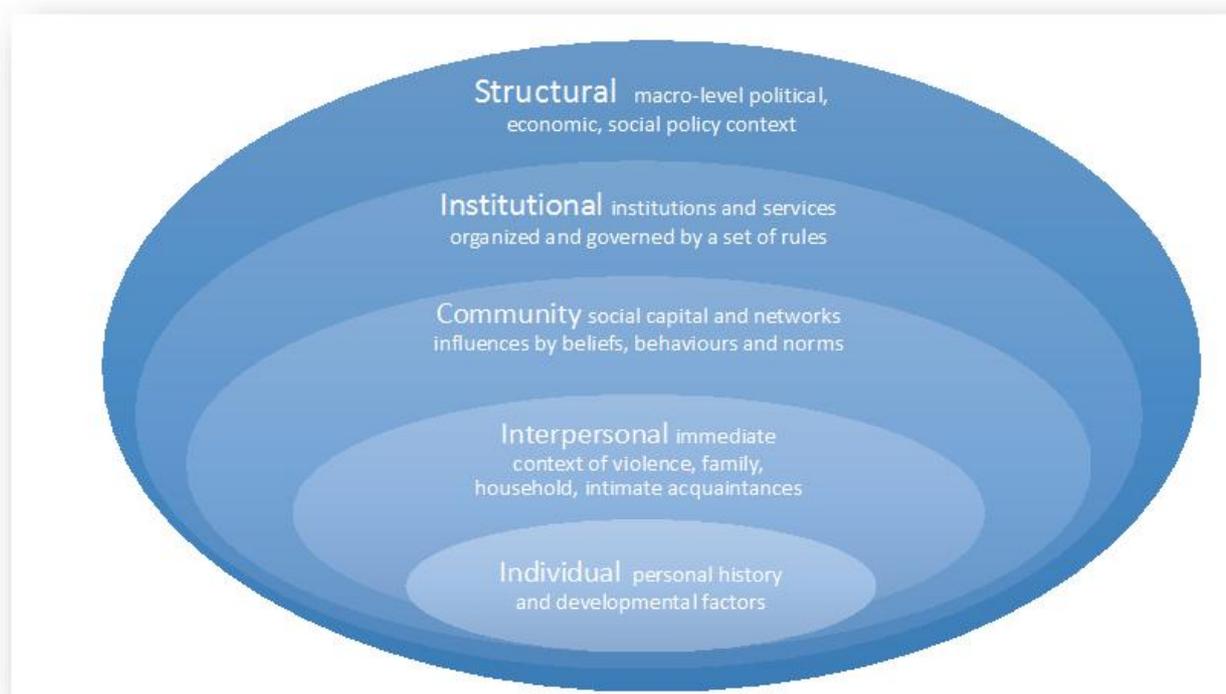
Structural interventions, are most often considered in the context of public health and can have a profound impact at macro-level as well as on individual level health behaviours as well (Latkin and others 2010). These system level interventions can also be considered within the context of the socio-ecological model, first proposed by Bronfenbrenner (1979) to go beyond public health for application to wider human development, Figure 2. Consequent iterations of the socio-ecological framework have been proposed for violence prevention and child protection, (Dahlberg and Krug 2002; CDC 2015).

The structural level, variously referred to as ‘policy level enabling environment’ (UNICEF 2013 a) and “macro-system constituting cultural values, customs and laws” (Bronfenbrenner 1979), is the policy and legislative environment which sets the scene for interactions across the system.

Understanding the structural level is critical for the design of scalable interventions for national implementation and requires an appreciation of the demographic, economic and policy environment.

UNICEF report the population of Indonesia as 247 million in 2012 almost 35 per cent of whom are aged under 18 and 46 million of whom are adolescents aged 10-19 (UNICEF 2013 and UNICEF Indonesia Adolescent County Tracker 2017). This huge population lives on a vast archipelago consisting more than 14,000 islands of which approximately half are inhabited and which straddles a territory of more than 5,000 kilometres west to east. The population is ethnically diverse and it is estimated that more than 580 languages are spoken (National Geographic 2010).

Figure 1: Socio-ecological framework for human development.



Source: Adapted from Bronfenbrenner 1979, Dahlberg and Krug 2002 and CDC 2015.

Economic growth at an annual rate of 5 per cent is anticipated up to 2030 driven by technology and the relatively young population (The Economist Intelligence Unit 2016 a). However, this optimistic outlook is balanced by a prediction that current inequalities, which see the richest 10 per cent owning 77 per cent of the country's wealth, will persist and grow (Ibid.).

Six major trends which will impact on child and adolescent development are predicted,

-) Growing economic inequality
-) Limited access to quality healthcare and education
-) Increasing youth unemployment
-) Rise in non-communicable diseases
-) Threat to health posed by pollution
-) Increasing vulnerability to climate change

The same report notes that this inequality will impact access to quality healthcare and education, two basic services considered critical to boost youth employment for both males and females and to maintain social stability. Similarly, a rise in non-communicable diseases related to child malnutrition (under and over nutrition) and tobacco use will likely impact negatively on the health of adolescents. Rising pollution and the impact of climate change on already vulnerable populations poses additional risks for children and young people. The overall outlook suggests that if these trends continue this will impact negatively on Indonesia's progress towards achievement of the SDGs (Ibid.).

An expansion of the trends to predict three basic scenarios by 2030 notes that even at baseline, with the current modest projected growth, the threat to a girls' life chances in rural regions because of child marriage remains a critical "inequality dynamic" and that in combination with higher dropout rates in rural secondary schools, this will significantly impact on the potential to achieve SDG 8 on decent work and economic growth (Economist Intelligence Unit 2016 b).

The Indonesian policy and legislative environment is structurally robust although gaps in implementation and enforcement remain (UNICEF 2015; Economist Intelligence Unit 2016 a; Economist Intelligence Unit 2016 b; Ramadhan 2013).

The National Medium-Term Development Plan 2015-2019 (RPJMN) aims to improve the quality of human life and address disparity and inequality, and specifies the green economy as the foundation of Indonesia's human development (LSE 2017). This resonates with the noted threats and risks of pollution and climate change and with the overall intended impact of the SDGs. Although adolescents are not targeted explicitly in the development plan, they are assumed to benefit implicitly (ILO 2015).

The 2015 case study, *Championing Child Rights and Child Protection in Indonesia*, identifies several action plans across thematic areas relative to children and adolescents, Table 1. Although this list is not exhaustive it reflects a policy and legislative environment which is robust in its planning for children and adolescents. However, it is not indicative of robust implementation, which often lacks resources and leadership (Ibid.).

Table 1: National action plans relative to children and adolescents

National action plans relative to children and adolescents		
Child Labour	National Action Plan on the Worst Forms of Child Labour 2002-2022	The plan is divided into three stages. The current and final Stage III (2013-2022) focuses on institutionalization and the mainstreaming of models, programmes and policies. Overall, the plan is focused on the prevention and elimination of four major issues: 1) forced labour, 2) child involvement in prostitution and pornography, 3) child involvement in illicit activities, including drug trafficking, and 4) child involvement in hazardous activities such as mining, diving or sale of explosives. In 2013, 4 provincial committees and 12 district and municipal action committees finalized action plans on the elimination of the worst forms of child labour.
Trafficking and sexual exploitation	National Plan of Action on the Eradication of the Criminal Act of Trafficking in Persons and Child Sexual Exploitation 2009-2014	The action plan integrated two earlier plans of action at the national level: on Trafficking of Women and Children and on Child Commercial Sexual Exploitation 2002-2007. The overall focus is to establish early warning mechanisms (including monitoring and evaluation systems) to address these two issues. Coordination remains a key objective, involving 19 ministries and the formation of six sub-task forces, including a sub-task force on the prevention of the trafficking of children, including commercial sexual exploitation of children.
Juvenile justice	Road Map for the 2012 Juvenile Justice Law 2014-2019	The government, through the Ministry of National Development Planning (Bappenas), has led the development of a costed (\$700 million) plan to roll out juvenile justice over six years. Since late 2014, when the new Juvenile Justice Law entered into force, the share of children in conflict with the law who have been diverted from the justice system has risen from 7 per cent in 2012 to more than 70 per cent in 2015. Though a good example of designing and costing a major child protection intervention, the plan has, arguably, an overly ambitious budget. Most costs are for training of professional staff – 21,000 officers in the police, prosecution, courts and social welfare sectors. Costs could be offset with more efficient learning and skills development measures such as e-learning modules or on-the-job mentoring and training. Indeed, the national development plan (RPJMN) only allocates \$50 million for training purposes over a five-year period (2015-2019). UNICEF is urging the government to prioritize social welfare and police officers for training, since they are

National action plans relative to children and adolescents		
		the frontline workers for children in conflict with the law. Other costs that could be reduced are those for the construction of child-friendly interview rooms in 500 districts across the country, with a greater focus on monitoring children returned to their communities after diversion.
Violence Against Children	National Strategy Elimination of Violence Against Children 2016-2020	The main objective of the Stranas PKTA is to contribute toward achievement of a national vision, namely, for children not to live in fear. It recognizes the need for cross-sector partnership in efforts to eliminate violence against children. It cross references itself against current government policy and legislation. Strategic objectives include legislation and application of policies protecting children from all forms of violence, change in social norms and cultural practices that accept, justify or disregard violence, child care that supports safe and loving relations between care giver (particularly parents) and child to prevent violence improving life skills and survival skills of the child in preventing violence and supporting child compulsory education program, providing accessible and quality supporting services for victim, actor, and child at risk, and improved quality of supporting data and evidence on violence against children.
Sexual and reproductive health	Yogyakarta Outcome Document of Adolescent Summit for Preventing Adolescent Pregnancy 2017	Recommendations from the summit include those related to aspects of legislation, policy, coordination and funding, adopting a more inclusive approach to reaching adolescents, outreach programmes for married and unmarried adolescents at risk of unwanted pregnancy, interventions for adolescents aged 10-19 who already have a child, and interventions for married adolescents to delay pregnancy. The process has been stalled due to a change in leadership, but Youth Networks have circulated this with their partners.

Source: UNICEF and Global Affairs Canada (2015) Championing child rights and child protection in Indonesia. UNICEF: Jakarta and written communication UNICEF Indonesia

Equally, current legislation supports key child and adolescent rights, although enforcement is lacking due to similar limitations as well as weak coordination mechanisms for vertical and horizontal collaboration and implementation (Carvalho and Koteng 2014)

Table 2: Current legislation and draft national action plans relative to children and adolescents

Current legislation and draft national action plans relative to children and adolescents			
	Main provisions	Implementation status	Relevance for adolescents
Law 35/2014 on child protection; amended from Law 23/2002	Contains definitions of a child and child protection; national and local government responsibilities; parental responsibilities; source of implementation funds; establishes child protection commission; includes sanctions	Enforcement is weak. For example, the Child Protection Commission recorded 5,419 cases in 2015, but there is limited information on follow up actions and how many cases have been resolved.	Applicable to all children under 18; KLA programme requires all districts to provide reproductive health services

Current legislation and draft national action plans relative to children and adolescents			
	Main provisions	Implementation status	Relevance for adolescents
		Based on this law, every district is now required to develop "Kota Layak Anak/KLA" (Child Friendly City/District). Implementation of KLA appears mostly in the form of dissemination.	
Draft National Health Action Plan School and Adolescent Health 2017	Provides guidelines for the Ministries and other non-government institutions to implement five strategies for Adolescent Health	Remains in draft	5 main strategies: (1) increase knowledge and skill for adolescent on 8 health issues; (2) strengthen access and quality of comprehensive health service; (3) strengthen institution and partnership; (4) provision of strategic information; and (5) meaningful involvement of the youth themselves
Law 40/2009 on youth	Youth are defined as those between the ages of 16 and 30; leadership development and entrepreneurship	For leadership development, the law requires the government to establish Youth Leadership Forum. For entrepreneurship, the law requires the government to provide training, internship, coaching, partnership and access to capital.	The focus on entrepreneurship will have impact on adolescents and youth employment opportunities
Draft of National Action Plan on Youth - 2017-2019	Currently draft	The action plan covers several sectors, including education and training for example skill training for job seeker, health for example to reduce non-communicable disease counselling for smokers, for alcohol/narcotic abuse, etc.	Potential for adolescent employment and health
Instruction of the President 1/2017 on community movement of healthy lives	This is a new instruction, released in February 2017 and still at early stage of its implementation. There are various indicators in the annex and relevant ministry/institution who is assigned as responsible party to manage that		
Law 52/2009 on population and family development	The law required changes to the government body (called BKKBN) to manage the work and there were some debates around the	This is a measure to regulate early marriage; equal rights between husband and wife; provision of access to information,	May duplicate the provisions of the Draft

Current legislation and draft national action plans relative to children and adolescents			
	Main provisions	Implementation status	Relevance for adolescents
	use of 'population' in this law due to possible conflict for example there is a clause on population data management, which is also a task of Population and Civil Registration Office)	education, counselling and services about family for youth. The law limits the use of contraception and family planning only for married adolescents.	National Action Plan on Youth
Ministry of Health Regulation No 43/2016 on minimum standard for health services	Minimum standards for health services	There are gaps in coverage, different levels of understanding and limited dissemination to stakeholders on how to implement the standard	

In addition, UNICEF, United Nations Global Compact and Save the Children Children's Rights and Business Principles (UN Global Compact 2012) are the first comprehensive set of principles to guide companies on the full range of actions they can take in the workplace, marketplace and community to respect and support children's rights.

The law on child protection, and its relationship to the Child Friendly City/District Initiative is significant since this is a major global initiative intended to promote the wellbeing of children through, "a healthy habitat, a democratic society and good governance" (Carvalho and Koteng 2014). However successful implementation is affected by limited resources, access to data and poor coordination (Ibid.). Participation of children, a key pillar of the initiative, was found to be less than optimal, involving adolescents age 14 and above who are attending junior high school, thus excluding younger age groups and those vulnerable young people who may not be in school. The review conducted in 2014 recommends establishing improved coordination mechanisms, increased focus on authentic participation of children and young people, improved data collection and data management, and streamlined monitoring and evaluation.

The 2017 SDG Baseline Report on Children in Indonesia recommends that for useful implementation to occur national action plans and draft national actions plans should be fully costed, with commitments in the national budget and with clear monitoring strategies (Indonesia Ministry of National Development Planning and the United Nations Children's Fund 2017).

3 Adolescent programming in Indonesia

The document review, intended to identify emerging practice in adolescent programming which can be considered for further review as a 'promising practice. The programmes were considered under the five domains of the UNICEF Adolescent Country Tracker. Whilst the domains provided a structural framework for the review is understood that many programmes are crosscutting and can be considered as having contributed to improved outcomes across more than one domain. For example, WASH in Schools can relate to protection - prevention of bullying, health – reduced infections and education – girls stay in school. For ease of reading a 'primary' domain has been selected for each programme intervention being discussed.

3.1 Health and wellbeing

Adolescents attain the highest physical health and mental wellbeing, indicated by,

- All-cause mortality rate
- Suicide mortality rate
- Adolescent birth rate
- Prevalence of underweight and overweight
- Substance use

Source: UNICEF 2017 Adolescent Country Tracker (ACT)

The WHO Global Accelerated Action for the Health of Adolescents Framework (Global AA-HA!), reports that the, "wide range of issues that need to be tackled - from obesity to violence and from adolescent pregnancy to depression - requires an integrated response that would address many health outcomes, as opposed to the many vertical 'disease-oriented' responses" (WHO 2012).

During a 2008 meeting of UN Member States of the South-East Asia Region the report on Indonesia noted that the main issues for the health and wellbeing of more than 40 million adolescents relate to HIV/AIDS, sexually transmitted infections (STIs), drug and substance abuse, unwanted pregnancy, risky abortions and iron-deficiency anaemia. Life-style changes, inadequate information on sexual and reproductive health along with insufficient quality health services for adolescents in Indonesia are making them more vulnerable to health risks (WHO 2008).

A follow-up study on maternal death based on 2010 Indonesian Population Census data reports an extremely high maternal death rate for girls aged 13-14 years (Afifah and others 2016). This reflects the global trend of high death risk in adolescent pregnancy (WHO and others 2012).

The review of documents suggests that since 2011 UNICEF Indonesia has focused its efforts on working with key partners on adolescent nutrition, prevention and response to HIV and AIDS and to some extent, sexual and reproductive health (SRH).

Nutrition

Adolescence is a critical time for interventions to prevent malnutrition, a double and growing burden of both undernutrition - insufficient food intake and repeated infectious diseases - and over nutrition - higher intake of refined carbohydrates, added sugars and fats (UNICEF 2015).

The rapid growth and development which adolescents experience puts them at risk of micronutrient deficiencies. Ensuring adequate micronutrient status in adolescent girls of reproductive age, improves the health of expectant mothers, and the growth, development and survival of their children (Ibid.).

A recent review of adolescent and maternal nutrition in Indonesia points to the importance of early intervention to ensure pre-conception health and wellbeing of girls to break the cycle of intergenerational transmission of undernutrition and its affects (GAIN 2014). The report notes that, “in Indonesia, many girls get married and give birth while their own bodies are still growing and maturing, causing increased nutritional demands and competition for nutrients between the foetus and it’s still developing young mother”, (Ibid.).

Over nutrition is also thought to be impacting negatively on the health and wellbeing of adolescents. During the last 20 years, overweight/obesity has doubled in the Indonesian population, (Rachmi and others 2017). The prevalence amongst children is higher in boys than girls, in those living in urban areas and attending private school and is increasing; whilst prevalence in adolescence is higher in girls than boys (Ibid.).

Adolescence is also a time when life-time habits are formed, thus an optimal period for nutritional and hygiene education.

Current government programmes focusing on adolescent girls include **adolescent friendly health services (PKPR) and provision of dietary supplements such as iron and other micronutrients**. In terms of fortified foods, the GAIN (2014) report highlights that while fortified products for adolescents could be a solution for micronutrient deficiencies, these products are very scarce and do not always reach adolescents; and that fortified power meals targeted at youth (15-24 years old) are being sold, however full coverage has not yet been achieved.

A regional study for adolescents across selected countries in South-Asia, identified innovative nutrition interventions programs being implemented in Indonesia, however did not fully discuss outcomes, (WHO 2006). These included a programme for iron deficiency anaemia in women of reproductive age, general nutrition education through school media, advice from Ministry of Health for schools to distribute iron supplementation tablets, and a Ministry of Health Mother Care Project which showed a decrease in anaemia prevalence of 10 per cent over 3-4 months. WHO notes that while this last programme did not specifically targeted adolescents, the strategy could be successfully replicated for this cohort, (WHO 2006).

In 2011 WHO recommended that for iron folic acid (IFA) supplementation to be a useful strategy to prevent anaemia among adolescent girls, programmes should be complemented by a well-informed and effective Behavioural Change and Communication (BCC) Strategy. Universitas Indonesia and the Micronutrient Initiative undertook a baseline study for the ‘Improved Iron Folic Acid (IFA) Supplementation Programmes for School Going Adolescent Girls in selected districts of West Java province’, also noted that a BCC strategy is required to promote dosing, adherence and benefits of IFA to improve coverage (Agustina and Prafiantini 2016 a & b).

The findings of the baseline survey provide information regarding prevalence of anaemia, habitual intake, availability and coverage of IFA supplementation. Significantly, the results in the intervention area were consistently worse than in the comparison area, although no analysis or discussion on this disparity is provided. The study found that the prevalence of anaemia among the adolescent girls aged 12-19 in the intervention area was 52 per cent, which was significantly higher than the prevalence in the comparison area at 38 per cent. This is a severe public health problem. Similarly, less than 6 per cent of adolescent girls received and consumed IFA in the previous 12 months, with the proportion in the intervention areas smaller at 1.2 per cent than in the comparison site at 5.3 per cent (Ibid.). Follow-up is required to understand the anomalous data.

The government PKPR programme is intended to address not only malnutrition but other adolescent health concerns. These services are intended to be easily accessible, adequate, and affordable or free for adolescents. Provided through health centres (Puskesmas) they aim to increase the knowledge and skills of adolescents in different health and wellbeing areas specifically related to reproductive health and healthy lifestyles. Data on the current operationalisation of the PKPR programme is limited, however a 2017 study in South Sumatra suggests that the service is primarily related to adolescent maternal and child health (Pratiwi 2017).

As noted above, the **Child Friendly City/District initiative** should also offer sexual and reproductive health services to adolescents, however the 2014 report on the implementation of the initiative does not explicitly address access issues (Carvalho and Koteng 2014). Thus, no conclusions can be drawn. This warrants consideration of a follow-up evaluation of the local action plan indicators to identify progress and outcomes for children. It is noted that cross district comparison of impact will be difficult since local changes have crept into the local action plans and the overall quality of these new indicators cannot be verified (Ibid.).

HIV and AIDS

“Between 2011 and 2015, [the number of] new reported HIV infections in Indonesia increased annually by 13.1 per cent among adolescent aged 15 to 19 and by 11.8 per cent among young people aged 20 to 24”, (Ministry of Health and UNICEF undated). There are significant geographical disparities with some provinces experiencing higher prevalence rates of HIV, for example Papua where according to the Indonesian Demography and Health Survey 2008, prevalence among general population is 20 times higher than the national average, and particularly affecting young people (15-49), for which the rate of infection is above 2.4 per cent.

Indonesia is experiencing a “concentrated” epidemic with the prevalence of HIV infection higher than 5 per cent in four young key affected population groups (YKAP),

-) people who inject drugs (PWID) with a prevalence of 41 per cent
-) men who have sex with men (MSM) with a prevalence of 8 per cent
-) direct and indirect female sex workers (FSW) with a prevalence of 10 per cent and 3 per cent respectively, and
-) men who have assumed a female identity, also called “waria” with 22 per cent prevalence of HIV infection

(Ministry of Health 2011; UNICEF undated issue brief).

The main channels of transmission amongst these populations are noted to be unprotected sex and the practice of unsafe injecting habits. (UNICEF undated issue brief).

Research indicates that although YKAP are at the heart of the HIV epidemic, their knowledge of HIV channels of transmission and prevention are low, especially in the 15-19 age group. This group also has the lowest access to information and services such as access to free condoms, outreach/field workers’ services and access to STI services (Ibid.)

UNICEF Indonesia has been supporting the government to implement the National Strategy and Action Plan on HIV and AIDS Response 2015-2019 through support to the National HIV Commission, the Ministry of Health, local health and education agencies, as well as community and youth networks to ensuring universal access to prevention and treatment services and to mitigate the impact of HIV and AIDS by increasing knowledge and understanding of the risk from HIV and how people can better protect themselves, strengthening and maintaining high-quality integrated services, and creating an environment that is free from stigma and discrimination.

UNICEF’s commitment to affected key populations and specifically to YKAP is manifested inter alia through support to the 1) life-skills programme based HIV-related education in junior high schools in Papua and West Papua, and 2) integrated sensitive programming in Bandung through the comprehensive LOLIPOP program.

UNICEF supported the education sector’s response to **averting new HIV infections among young people in Papua and West Papua** from January 2010 to August 2014. The programme was implemented in seven target districts, with a focus on adolescents and youth age 10-24 years, through formal and informal education settings.

The programme adopted a system strengthening approach that built capacity of the education sector using curriculum-embedded education methods and participatory teaching styles. The five programme strategies included, education for all,

-) policy and management systems strengthening
-) development of curriculum and teaching/learning materials
-) education training and support, and
-) partnership and advocacy

The program was implemented with a focus on formal education settings which included schools (SD, SMP and SMA levels), principals, teachers, parents and school committees, provincial and district education officers, as well as informal education settings in partnership with FBOs, NGOS, the AIDS Commission, health agencies and other relevant government programmes at both provincial and district/city levels.

The final report of UNICEF (2015) noted programme success in promoting a sector-wide approach, capacity strengthening and skills provision, curriculum development, and reaching children out of school, but that despite these achievements, significant challenges remain. Although the programme approach to build the understanding, knowledge and capacity of the education system to deliver HIV and life-skills training was identified as relevant and comprehensive, the programme did not manage to produce significant and sustained changes in the lives of young people and the HIV epidemic among the targeted population group remained unchanged (Ibid.). Insufficient allocation and duration of resources, as well as the weakness of the education sector in Papua and West Papua contributed to the challenges faced by the program.

UNICEF report that,

“The evaluation shows that the programme has variety of results; some were highly positive, including that 91% of intervention schools have provided HIV educations to students, but the end-line evaluation suggested that the programme "was minimally effective in contributing to the needed behaviour changes among its target populations". The main challenge is that a system-wide strengthening of education sector is needed before any specific intervention could run effectively in Tanah Papua. This led UNICEF to discontinue Tanah Papua’s HIV programme as a standalone, but to integrate it within the broader Education Sector System Strengthening programme”. (UNICEF 2017, written communication)

The final report recommends that to empower adolescents and young people, teachers need to take a more active role in the education process. Reaching more out-of-school adolescents as well as the changing of attitudes and behaviours among both teachers and young people remain priorities (UNICEF 2015).

Consequently, a life-skills education curriculum (LSE) has been introduced to the teacher training institute in West Papua Province. This curriculum has been officially integrated as part of the local curriculum content for elementary and junior high schools in Papua and West Papua provinces and has been calculated as an eligible deliverable for calculating teachers’ hours (UNICEF 2016 c.). Outcomes for adolescents are not yet reported.

UNICEF in collaboration with the Ministry of Health (MoH), the National AIDS Commission (NAC) and Young Key Populations (YKP) organizations, implemented a pilot model learning site for YKP HIV sensitive programming in Bandung from August 2015 to June 2017. This programme named ‘LOLIPOP’ (Linkages of Quality Care for Young Key Populations) is integrated within the continuum of care framework introduced by the MoH⁵, (Indonesia Ministry of National Development Planning and the United Nations Children’s Fund 2017)). It is intended to provide **support for closing the HIV prevention and treatments gaps for Young Key Populations in Indonesia**. The pre-2015

⁵ *The continuum of care framework is an integrated decentralised service delivery model that has been introduced to accelerate and expand access to ARVS for treatments and improve prevention activities in selected priority district starting on 2012. (UNICEF, 2017)*

planning for the project included inception workshops with local young key populations and local health staff, trainings, as well as a baseline research (Burnet Institute, 2016).

The progress report delivered by UNICEF in January 2017, noted the main achievements of the project,

-) Strategic information was generated
-) Demand increased
-) Supply side improved
-) Enabling environment created.

The project integrates gender specific components and social change initiatives to empower girls and boys living with and affected by HIV and key populations to change behaviours and to contribute to the elimination of harmful social norms, attitudes and practices such as sexual and gender based violence and discrimination. However, it does not appear to have any explicit component promoting the inclusion of adolescents with disabilities.

The available documents indicate there is a solid project design anchored in an extensive participatory process involving several project partners, including YKP groups. The project has also generated sufficient data to provide a baseline measure from which to assess impact and has other necessary documentation to be evaluated including a midterm review conducted by the Burnet Institute in January 2016 and a progress report produced by UNICEF in January 2017. It has developed a comprehensive framework ensuring meaningful participation of young people as well as key partners and authorities (health facilities, outreach teams etc.) and has started scaling up to other three big cities in Indonesia. Additionally, the development of capacity building and IEC materials for YKPs that focus on modelling positive behaviour and fighting stigma and discrimination and providing an interactive platform where young people can express and seek counselling and advice are features that make this project a unique and interesting model.

Access to sexual and reproductive health (SRH)

Research conducted by the International Planned Parenthood Federation (2016) found that adolescents must, “navigate conflicting norms and values around sexuality”. The same research also notes that although adolescents are sexually active before they are married, unmarried young people [adolescents] are frequently denied SRH services because of specific laws and regulations and dominant cultural and religious norms.

The Indonesian Planned Parenthood Association (PKBI), notes that children and young people should receive sexual and reproductive health education at an early enough age to help them making choices regarding their sexual life (Indonesian Planned Parenthood Foundation 2015). Through partnership with public health centres (puskesmas), clinics, doctors and midwives in Bali, Yogyakarta and Central Java the organisation is supporting establishment of Youth Health Care Service[s]. Although the programme, **Synergy in Building Youth Friendly Sexual and Reproductive Health Service** in Central Java has been awarded a certificate of appreciation by PKBI, challenges remain in other regions including, “human resources, method, funding and supporting facilities and infrastructures” (Ibid.).

Through the programme **Utilizing Information Technology to Broaden Youth’s Access to Reproductive Health** PKBI has, “together with the young people...develop[ed] several online media that can be easily accessed by those seeking information about sexual and reproductive health. IPPA and IPPA youth have successfully maximized the use of websites, Facebook, Twitter, Mobile Apps and YouTube to distribute information regarding sexual and reproductive health” (Ibid.). Detailed documentation on investment versus results including programme design for potential replicability is required.

3.2 Education and learning

Adolescents are actively engaged in learning through formal or non-formal education opportunities, indicated by,

Proficiency in reading and mathematics

Youth literacy rate

Completion rate for primary education

Completion rate for lower and upper secondary education

Out-of-school rate

Source: UNICEF 2017 Adolescent Country Tracker (ACT)

Adolescents have a fundamental right to an education. The Education for all Global (EFA) Monitoring Report 2010-2015 states that although great achievements have been made in universal access to education globally, in 2012 there were still 121 million children and adolescents out of school. The second goal of the Education for all (EFA) initiative envisaged all children completing a full cycle of primary education, however, in 2015 in low and middle income countries, one in six children did not completed primary school and one in three adolescents did not completed secondary school (UNESCO 2015).

In 2015, UNESCO estimated that Asia and Pacific is home to 53 per cent of out-of-school lower secondary-age adolescents and that girls, rural children and those from poor households are more likely to be out of school (UNESCO 2015b). This prompted UNICEF and UNSECO through its Institute for Statistics (UIS) to launch the Global Out-of-School Children Initiative (OOSCI) to reduce the number of out-of-school children and adolescents, in which 26 countries participated including Indonesia.

The SDG baseline data in combination with the EIU 2016 megatrends data suggests that education will be critical to economic growth and stability and thus to meeting the SDG targets (Indonesia Ministry of National Development Planning and the United Nations Children's Fund 2017; and Economist Intelligence Unit 2016 a.).

Access to secondary education

Indonesia has made significant progress in primary school enrolment, 99 per cent of children aged between 7 and 12-year-old are enrolled in school. National data estimates suggest that less than 1 per cent of children of primary school age were out of school (UNICEF 2017). Most out-of-school children are those who drop out during the transition to higher levels of education (Ibid.). As noted above this has significance for the youth employment rate and the economic growth forecasts for the country (Economist Intelligence Unit 2016 a. and 2016 b.)

There are major geographic disparities in secondary enrolment and adolescents and youth from the poorest households and those living in rural areas are much less likely to complete primary and secondary education (Indonesia Ministry of National Development Planning and the United Nations Children's Fund 2017).

UNICEF Indonesia works with key partners on adolescent development through education by supporting the transition between primary and secondary education, to maintain enrolment and grade progression. The initiatives include promotion of life-skills education and the development of adolescent responsive curriculum, including improvement of the capacities of those working with adolescents to deliver quality education. Key partners include Ministry of Education and Culture, STKIP Sorong and Yayasan Noken Papua.

UNICEF has supported the government “**One Roof School Programme**” or Sekolah Satu Atap (SATAP) since 2005. The One Roof schools are those combining primary education (grades 1-6) and junior secondary education (grades 7-9) in one compound, aiming at making the transition to secondary education both physically easier and financially more feasible, at least for poor students living in remote and isolated areas. A case study in Sukabumi district noted that the largest falls in student participation rate are at the transitions from primary to junior secondary schools and from junior to senior secondary schools (ILO 2011). The One Roof Schools Program (ORSP) is intended to provide a strategy to address this challenge in achieving universal education.

The 2011 case study, which specifically looked at the impact of the programme on child labour suggested the programme was reaching the most vulnerable in remote poor rural locations and targeting an age in which the risk of dropping out is high. It noted the positive perceptions of adolescents and their parents regarding education, but noted that the reasons for school drop-out primarily related to quality of education and household poverty, had not changed because of the programme. Much of this case study evidence is qualitative and not supported by quantitative data relative to continuation rates and grade progression.

A follow-up study by Pillay and Haribowo (2013) noted that the enrolment numbers in remote rural areas are not high, and are in fact falling, but that in the absence of any tracking system it was impossible to know if the students were attending other educational facilities or had in fact dropped-out of school. This review also noted that the schools suffer from, “an image problem where parents perceive it as a comprised JSS option and not relevant to their local context”. It was also noted that in 2013 that the schools concept had become confused and that many of the schools did not meet the ‘remote and rural’ definition of the Ministerial Decree #35 under which they were established. The model was also reported as compromised due to supply and teacher quality issues, relevance of curriculum, limitations on management and governance as well as the ‘image problem’ noted above and household poverty as an external pull factor (Ibid.).

Information on the 2016/2017 status of the One Roof School programme, and whether it contributes to keeping adolescents in secondary school, is limited. UNICEF have advised they intend to conduct an evaluation during 2018.

Indicators for education show that Papua and West Papua provinces are lagging the national average, with high illiteracy rates especially in rural areas and among girls, high number of drop-outs and out of school children, gender imbalances in access to education and high rates of teachers’ absenteeism, especially in hard to reach rural schools (Indonesia Ministry of National Development Planning and the United Nations Children’s Fund 2017).

UNICEF, in partnership with DFAT, is implementing the Rural and Remote Education Initiative for Papuan Provinces agreement signed in 2014. In contributing to the program, UNICEF programme documents show that it has entered in a contract agreement with STKIP Muh Sorong to implement the “**strengthening quality of early literacy learning in rural and remote schools and improving institutional capacity and environment in Sarong district**” (January 2016 to December 2016). The program focuses on 20 target schools and communities. The main components are: 1) piloting of alternative strategies to improve quality of early grade literacy learning in rural and remote schools and 2) creating institutional capacity and an enabling environment. Thus, this initiative targets rural school principals, teachers, students and communities as well as staff at the District Education Offices and other relevant stakeholders.

The programme promotes early grade literacy. Whilst this can be considered a necessary precursor to continuing education, and to enable adolescents to make the transition to secondary school, this intention is implicit rather than explicit.

UNESCO (2014) report that the Ministry of Education and Culture launched a new curriculum in the 2013/2014 school year in 60,000 schools. However, no indication of the target age/grade of this initiative is provided. During that same year, UNESCO proposed to support the government in the education sector 2014-2017 through two programme (1) in strengthening Education for Sustainable

Development (ESD), and (2) in improving access to Quality Education for All. However, no detail was provided on the proposed activities linked to these ambitious goals.

The Community Based Development Information System (CBDIS) is reported to be a programme operating by government with UNICEF support, to track out of school children and encourage a return to education. No documents related to this programme were available for review.

The **Opportunities for Vulnerable Children programme** implemented by Helen Keller International in Indonesia 2003-2013 programme represents a unique effort to bring children with disabilities into Indonesia's mainstream education settings in a substantive manner. Whilst the programme did not specifically target adolescents, as a school-based programme it included adolescents with disabilities in the age range 10-14. An independent evaluation conducted in 2013 noted that programme's success in enhancing education opportunities for children and in embedding inclusive policy and methodologies in some school districts. This included increased enrolment of children with severe to low vision and blindness in education programmes by 300 per cent. However, it also notes that the evaluation was limited due to the lack of baseline data and targets for programme indicators.

The **Sabang Education Grant** in Aceh, is an annual cash transfer provided to all students aged 7-18 years in enrolled in primary to junior and senior high schools. The programme has reported benefits in (i) increased school participation and reduced drop out, (ii) increased motivation and learning interest, (iii) reduced gap between low and middle-income students. These positive results, in turn, are essential elements of equitable access and quality improvement. The programme extends to 46 schools covering 7,461 students in the 2015/2016 school year, 40 per cent of whom are in secondary education. Data from the same year suggests there are zero out of school children in this district. The data is extracted from the forthcoming final report of the evaluation of the Sabang Education Grant, commissioned by UNICEF.

Menstrual hygiene management (MHM)

Menstrual hygiene is important for the wellbeing and development of adolescent girls. Ensuring that everyday life is not interrupted by menstruation ensures that adolescent girls can continue going to school or work and engage in their usual social activities. It can help maintain their confidence by preventing situations of potential embarrassment. Good MHM can also address socio-cultural perceptions and restrictions which have potential to exclude adolescent girls and contribute to gender inequality (UNICEF 2016 a.).

UNICEF Indonesia have identified the importance of menstruation education for both boys and girls. In partnership with the Ministry of Education and Culture, they established a **WASH in Schools in Indonesia** programme which conducted formative research to understand the, "MHM practices, determinants, and impacts among school-going adolescent girls" and engaged in a participative design process to develop appropriate interventions including an interactive communications strategy (Ibid.).

Actions also included,

-) Up-date of the national school health program guidelines to include menstrual hygiene management,
-) Creation of resources to promote respectful relationships and address bullying and harassment of girls during menstruation
-) Partnership with Council of Islamic Scholars of Indonesia to produce guidance on menstruation from an Islamic perspective
-) Scale up from pilot stage to a large national school health program to reach all 34 provinces

The reported results include⁶,

-) Adequate knowledge of menstruation increased by 16 per cent amongst girls and by 28 per cent amongst boys
-) 34 per cent increase in boys who felt it was wrong to bully menstruating girls.

The programme results as reported, in combination with the reported design suggest warrants further review and consideration.

3.3 Protection

Adolescents feel safe and supported in their families, among their peers, and in their schools and social/virtual environments, indicated by,

Child marriage
Homicide mortality rate
Intimate partner violence
Violent discipline
Experience of bullying

Source: UNICEF 2017 Adolescent Country Tracker (ACT)

Article 19 of the UNCRC explicitly references children's fundamental right to protection from violence, abuse, exploitation and neglect, which is reiterated at paragraph 49 of General Comment No. 20 (UNCRC 2016).

The baseline data for Sustainable Development Goal 5 on gender equality indicates that one-third of women and girls in Indonesia have experienced violence in their lifetime (Indonesia Ministry of National Development Planning and the United Nations Children's Fund 2017). The same report notes that 12 per cent of women aged 20-25 were married before their 18th birthday and that child marriage rates are disproportionately high for girls living in poor families and in rural compared to urban areas (Ibid). Girls who marry are six time less likely to complete senior secondary school. Recent research notes that 55 per cent of female subjects involved in the process of marriage dispensation (whereby religious and civil courts can be petitioned to lower the age of marriage), were aged 14-15 years whilst for boys more than three-quarters were aged 17-18 (UNICEF and 18+ Coalition un-dated).

Recent data indicates that 20 per cent of students aged 13-15 also report experiencing bullying at school. In the same age group, almost 25 percent report having been in a physical fight in the previous 12 months and 30 per cent say they were seriously injured on more than one occasion in the previous 12 months (WHO 2015 Global student school-bases health survey 2015). Whilst disaggregated rates indicate that reports are higher for males than females, they are significantly high in both sexes to cause alarm.

The 2014 Juvenile Justice Law, introduced the, "main principle of divert[ing] children in conflict with the law away from the formal criminal justice system". Consequently, through implementation of diversion programmes UNICEF (2016 b.) reports that the number of children in prison has reduced by more than half, from 5,000 per month pre-2014 to 2,000 per month in 2016.

UNICEF Indonesia report on adolescent programming to reduce school bullying and child marriage, and in the juvenile justice sector, to support diversion and reintegration of children from prison.

⁶ Indonesia WASH Gender Promising Practice Flyer - undated

The pilot programme to **prevent peer violence and bullying** in Junior High Schools, using a student-driven action research approach is based on an adapted programme called Roots which has been implemented globally, and which has demonstrated results in reducing school-violence at low-cost (Paluck, Shepherd and Aronow 2015). Although identified as a promising practice internationally implementation in Indonesia is in the earliest stages and the documentation on design and intended results is limited. Anecdotal evidence provided to this team suggests that in at least one site the school bullying intervention is supplemented by a 'positive discipline' intervention.

A UNICEF (2016) study on diversion and other **alternative measures for children in conflict with the law** in East Asia and the Pacific noted significant activity in the sector related to diversionary measures and restorative justice. This report notes that community service as an alternative to post-trial detention is a feature of the Indonesian Juvenile Justice Law, but that it was not yet implemented in practice. Challenges include limited awareness amongst justice sector professionals, generic rather than specialist training and capacity building initiatives, and inadequate mechanisms for monitoring and evaluation. This law, introduced in 2014, "prohibits detention for anyone under 14 years of age and those above 14 whose crime is punishable with less than seven years, or obtain guarantee from parents/caregivers. In practice, however, police and parents of the offenders often agree to 'put the children in detention' to avoid revenge of the victim or victim's family, even though the children are in the criteria above", (UNICEF 2016). However, a 2016 donor report notes that the number of children in prison monthly has more than halved since the adoption of the law, from 5,000 to 2,000. Documentation regarding specific programmatic interventions by UNICEF and other stakeholder were not available to this review.

Child marriage is noted to have significant regional features with a national figure of 25 per cent of ever married women aged 20-24 being married before age 18, reaching 34 per cent in West Sulawesi (UNICEF and 18+ Coalition undated). Marriage dispensation, whereby the age of marriage can be reduced through application to civil and religious courts, is noted to be a common practice with upwards of 97 per cent of applications granted (Ibid.). Anecdotal evidence suggests programming interventions are occurring to reduce the incidence of child marriage in Indonesia, however documentation regarding specific programmatic interventions by UNICEF and other stakeholder were not available to this review.

3.4 Transition to work

Adolescents participate in non-exploitative and sustainable livelihoods and/or entrepreneurship, indicated by,

Time spent on economic activities

Time spent on unpaid household services

Information and communication technology (ICT) skills

Adolescents not in education, employment or training

Unemployment rate

Source: UNICEF 2017 Adolescent Country Tracker (ACT)

The smooth transition from education to employment will be a key predictor of Indonesia's future economic prosperity (Economist Intelligence Unit 2016 a.). Ensuring that 'education' is fit for purpose will require an examination of the intersection between future employers needs and current education sector goals, so that adolescents have a realistic expectation of future employment.

UNICEF does not report any current programmes in the transition to work domain and documentation regarding specific programmatic interventions by UNICEF and other stakeholder were not available to this review.

3.5 Participation and engagement

Adolescent girls and boys engage with opportunities to form and express their views and influence matters that concern them,

indicators in this domain are under development

Source: UNICEF 2017 Adolescent Tracker (ACT)

Adolescence is a time of un-paralleled development when young people begin to develop abstract thinking and reasoning and develop their skills and competencies for independent living. These are the same features of effective adult civic engagement. Working with adolescents to develop the skills required to transition safely to engaged adulthood requires a realistic participative approach which is intentionally designed to achieve outcomes, rather than 'participation' being viewed as a specific standalone outcome. A key feature of the good practice in adolescent programming, no matter what the thematic area, is that, "Programmes [are] developed with the active involvement of adolescents and youth, and [have] responded to the needs in the community" and that adolescent engagement means, "meaningful and sustainable participation of adolescents and young people in local and national governance processes", (UNICEF MENARO 2015).

UNICEF report that,

"Adolescent participation is seen both as an approach and an outcome. In the form of decision-making at different government levels it is viewed as an outcome and so is the result of adolescents having knowledge and skills to inform/influence decisions. This is an emerging area in UNICEF". (UNICEF2017, written communication)

This document review identified a range of tools and instruments being applied to encourage participation and engagement including,

-) community digital storytelling for social change,
-) Reality Check Approach to social research,
-) Adolescent Development and Participation Module (ADAP)
-) U-report, and
-) Adolescent kit.

The links to programmatic interventions which had clear intended outcomes for adolescent development were not evident in this document review; some of the programmes had just started in 2016-2017 and limited documentation was available.

Community digital story telling is used to engage young people, "in research and [to] create photo videos to spark conversations on topics they care about" (Youth Voices from the Frontline 2016). The tool is being used to support Indonesian youth voice on climate change and disaster risk reduction through the Children in a Changing Climate Coalition. In August 2016, members of ten organisations learned how to use this photo-based, participatory development process. Anecdotal evidence suggests the mechanism has now been successfully introduced to advocate for local community change however documents detailing these programme interventions and outcomes for adolescent development were not available to this review.

The Reality Check Approach to social research uses retrospective and longitudinal immersion and listening studies to improve the connection between pro-poor policy and the people these policies are supposed to serve (Reality Check Approach 2017). Anecdotal evidence suggests the mechanism has been successfully applied to research with adolescents in Indonesia on nutrition, haze (forest fires) and social protection, however documents detailing this research were not available to this review.

U-report is a social media platform which can act as a polling mechanism and which is currently reaching upwards of 100,000 children and young people in Indonesia⁷. The intention is to empower youth by engaging with them and enabling their voices to be heard. Anecdotal evidence suggests that the National Action Plan on Violence against Children was informed by U-reporters but that the plan is not yet implemented. Documents detailing the strategic application of this important tool to adolescent development programmes were not available to this review.

“The Adolescent Kit for Expression and Innovation is a package of guidance, tools, activities and supplies that support adolescents to develop key competencies that can help them to cope with stressful circumstances, build healthy relationships, learn new skills and engage positively with their communities” (UNICEF NYHQ un-dated). The UNICEF and Child Fund **Adolescents in Emergency Project** has, “mainstreamed the [disaster risk reduction] DRR approach Adolescent Kit Module to strengthen adolescents’ resilience against disaster risks, build their skills and empower them to solve the issues they face before, during, and after emergencies”, (Children in a Changing Climate 2017). UNICEF notes that they are, “currently piloting the Adolescents in Emergency project in four locations to document the good practice/model and seeking for further scale up/ institutionalization under government institutions. An M&E framework, including Pre/Post surveys, was developed to monitor the impact of the project”, (Ibid.). Further documentation to explore the potential promising practice was not available to this review.

Anecdotal reports suggest that the Kit is being adapted in Indonesia to support child marriage interventions however documents detailing the application of this instrument in programming for adolescent development were not available to this review.

⁷ <https://indonesia.ureport.in/story/399/>

4 Defining promising practices

4.1 What is a promising practice

Promising practices are understood as the mid-point on a continuum from emerging practice to good and best practice. They are defined both **positively** against emerging practice– as making progress or demonstrating greater potential than a practice that is undocumented or does not represent good practice; as well as **negatively** – against good or best practices that meet all or most of the criteria of ideal practice. Most importantly in comparison with good/best practice **a promising practice describes a programme for which robust evidence of programmatic effectiveness its ability to be sustained and/or replicated is emerging or not available.**

Figure 2: Conceptual Framework for promising/ best practice



Source: Spencer, Schooley et. al 2013

For the purpose of this assessment the following definitions from Center for Disease Control and Prevention (CDC) is adopted - where promising practice belongs to a continuum of practices that, “represents the ongoing application of knowledge about what is working to improve desired outcomes in a given context” (CDC, 2010).⁸ This is in line with the Promising Practices Network which provided, “evidence-based information about what works to improve the lives of children,

⁸ Centers for Disease Control (CDC) Best Practice Work Group 2010

youth, and families”⁹ and the UNICEF MENARO (2015) report on Good Practices in Adolescent and Youth Programming that defines good practice as a programme that, “preferably meets all [assessment] criteria; no programme qualifies for this category unless evidence of effectiveness and sustainability/replication is provided.” Promising practice is defined as “meets most criteria, mainly those for evidence-based, equity, values orientation, innovativeness and youth involvement, but no evaluation of outcomes has been conducted and thus there is no evidence of effectiveness.”¹⁰ (UNICEF, 2015)

4.2 Criteria for promising practice

A review of the literature related to promising practice in human development revealed several practices that are selected as good or promising practices in adolescent programming. The review also included one promising practice review of child, adolescent and community programming as well as one review of public health programming as its findings were generalizable and appropriate to the objective of the current research, Table 3.

The list of practices identified are as follows

1. Delivered through partnerships
2. Sustainable
 - a. Delivered through existing structures
 - b. Utilizing community human resources
 - c. Diversified funding
 - d. Focus on Policy
3. Evidenced based
4. Evidence of effectiveness
5. Replicable
6. Innovative
7. Involved and empowered adolescents and youth
8. Individual specific delivery
9. Gender
10. Multi Sectoral Approach
11. Reach
12. Feasibility

⁹ www.promisingpractices.net (currently archived)

¹⁰ Analytical Report on the Good Practices in Adolescent and Youth Programming, UNICEF MENARO, on behalf of the UNIATTTYP, rUNDG Arab States/ MENA, 2015

Table 3: Documents reviewed to develop criteria of promising practices

No	Name	Scope	Objectives	Promising Practices Identified
1	Analytical Report on the Good Practices in Adolescent and Youth Programming (UNICEF MENARO, 2015)	Assessment of good practices in civic engagement, skills development, health and other sectors.	<p>Document and rate practices that positively impact youth and adolescents specifically in the MENA/Arab States region.</p> <p>Identify factors that result in successful programming and requirements for scaling-up</p> <p>Review selected practices against the United Nations system and support implementation of good practices.</p>	<p>Partnerships with governmental and non-governmental actors, the private sector, the community, parents and adolescents' themselves – to ensure sustainability and the development.</p> <p>Programme delivered through existing structures to minimise duplication and ensure sustainability, institutionalization and replicability.</p> <p>Utilizing community human resources to promote sustainability make cost savings.</p> <p>Evidenced based and clear objectives Based on a documented need using robust research methods. This resulted in identifying clear objectives and in turn improved monitoring and evaluation.</p> <p>Innovative and clear programming flexible when needed with clear intervention plans, with a pilot to identify challenges early on.</p> <p>Involved and empowered youth Created safe spaces for youth, youth participated and had a voice. Which in turn impacts sustainability of the programme.</p> <p>Diversified funding To be sustainable, reduce financial risk</p>
2	Exemplary practices in adolescent development (Birtwhistle, A Lefkovitz, B et al 2004)	Assessment of programmes focussing on teen pregnancy prevention, violence and bullying, mental health and	Research to enable Sierra Health Foundation's Board of Directors to make more informed decisions about	<p>Partnership Design and implementation conducted in partnership with youth participants and their families.</p>

No	Name	Scope	Objectives	Promising Practices Identified
		depression, alcohol and other drug use, Obesity and eating disorders, and Academic success.	investing in school-aged youth	<p>Involved and empowered youth Programme participants determined how programme funds were spent, co-implemented programs and trained peers.</p> <p>Individual specific delivery Identified and addressed individual specific needs of the adolescent with a multidisciplinary team and approach.</p>
3	WASH Gender Promising Practices Flyer (UNICEF, undated)	Flyer to inform effective WASH gender mainstreaming practices	Flyer on challenges, action and results of UNICEF programming. <i>Note: subsequent reviews to be based on more detailed review documents</i>	<p>Involve adolescents Involve adolescents to design the programme</p> <p>Innovate Innovate to address difficult problems</p> <p>Gender Balanced Advocacy messages need to address both girls and boys</p>
4	Innocenti Research Briefs Methodologies to Capture the Multidimensional Effects of Economic Strengthening Interventions (UNICEF, 2017)	Seven research methodologies designed to expand and improve the conduct and interpretation of research on adolescent health and well-being in low- and middle-income countries	<p>Briefs on key themes and methodological issues in research on adolescent health and well-being to provide practical suggestions for conducting research.</p> <p><i>Note: Even though these briefs were intended for research, several good practices for programmes were identified and research recommendations were found to be relevant to programme delivery.</i></p>	<p>Multi Sectoral Approach inter-sectoral and multicomponent and require requires the active involvement of the different sectors and ministries that influence adolescent well-being tailored to local needs and capacities.</p> <p>Focus on policy Interventions should address legislation and implementation of policies that impact families, communities, schools and health services are essential for promoting adolescent well-being.</p> <p>Other practices identified are:</p> <p>Evidence based to match action to need and monitor progress.</p>

No	Name	Scope	Objectives	Promising Practices Identified
				<p>Delivered through existing structures by building on available community structures.</p> <p>Gender focus.</p>
5	Preventing Adolescent Pregnancy: A Review of Programs and Practices (Franklin, C., & Corcoran, J. 2000)	Best practices discussed include efficacy of clinics, knowledge-building and skills training, and sex education curricula based on social learning theory and skills training.	Review of programs and practices to prevent of adolescent pregnancy to guide practitioners to better select and design interventions to address adolescents, parents and communities' needs. Note: practices specific to pregnancy prevention have been generalised where possible or not included.	<p>Empowered youth Knowledge building with adolescents is an important addition to make the programme's effects sustainable in addition to service provision.</p> <p>Individual specific delivery Use of comprehensive, age-phased, and developmental approaches in programmes that are designed appropriately for the target group.</p>
6	Promising Practice Profiles, Final report. (Soriano, G., Clark, H., & Wise, S. 2008)	The review identifies what works and how it works and for whom in community development, early childhood development and early intervention service provision for three organisations Communities for Children, Invest to Grow and Local Answers.	Identify, validate and disseminate information about practices that are likely to influence positive outcomes and creating a knowledge database to contribute to peer learning, improvement of services for children, their families and the community.	<p>Evidence of effectiveness Evidence of effectiveness of the programme including for whom the practice worked. Under what circumstances, were results variable. Review of the evidence and ability to contribute to further decisions of scale and replicability.</p> <p>Evidence based The practice draws on the evidence base. Including practice evidence or empirical research and there is a link between the evidence base and our project logic</p> <p>Replicability Is there potential for this practice to be replicated in other contexts, or by other organisations and what elements of the project/practice make it replicable.</p>

No	Name	Scope	Objectives	Promising Practices Identified
				<p>Innovative Use of elements of another innovative project or first time implementation of said innovation. Potential for applicability of this innovation in the future.</p> <p>Sustainable Ability of the programme to be continued</p>
7	Seeking Best Practices: A Conceptual Framework for Planning and Improving Evidence-Based Practices (Spencer, L. M., Schooley, M. W., et al 2013)	Literature review of evidence on public health practice	Review of documents to develop a conceptual framework that brings together important aspects of impact and quality to provide a common lexicon and criteria for assessing and strengthening public health practice.	<p>Evidence of effectiveness Extent to which the practice achieves the desired outcomes and addresses adverse outcomes and the magnitude of the effect.</p> <p>Reach Extent that the practice affects the intended participants. Representativeness of participants impacted by the programme</p> <p>Feasibility Extent to which the practice can be implemented and challenges addressed successfully during implementation. Cost-effectiveness and use of available resources to implement the practice</p> <p>Sustainability Extent to which the practice can continue to exist and deliver outcomes over time. This would include the programme's ability to integrate with existing programs and partnerships and has the resources to be sustainable.</p> <p>Replicability Extent to which the programme can be applied to or adapted for various contexts.</p>

4.3 Revision to the matrix

From the outset, the tentatively proposed criteria for inclusion of a programme as a 'promising practice' included those that:

-) have a solid evidence-based design,
-) have developed a theory of change on how outcomes will be achieved,
-) have sufficient and necessary documentation to be evaluated,
-) are considered by stakeholders as appropriate for adolescents,
-) have a monitoring and evaluation system in place,
-) address cultural and gender specific issues,
-) have developed mechanisms to identify and reach the most vulnerable populations
-) that have generated evidence of positive impact for beneficiaries, and,
-) have the potential for replication and scaling up.

Each of these was to be considered in the context of:

1. Reach: the number of direct and indirect recipients of the Program intervention
2. Impact and/or outcome: the finite and measurable change and it's longer-term effect
3. Efficiency: the extent to which the Program has converted its resources into results
4. Cost-effectiveness: the extent to which the program has achieved or is expected to achieve its results at a lower cost compared with alternatives
5. Replicability and scalability: the potential for the Program to be replicated at another location or in a different time and to grow.

The promising practice criteria that occurred most often through the document review included those which were,

-) Sustainable
-) Evidenced based
-) Innovative, and,
-) Involved and empowered adolescents and youth

Followed by those which had,

-) Emphasis on partnerships
-) Evidence of effectiveness
-) Replicable
-) Individual specific delivery, and,
-) Gender focus

Based on this review changes have been effected to the draft matrix (Table 4). This matrix was presented at a stakeholder workshop in Jakarta and finalised with essential criteria that a project *must* fulfil to be considered for in-depth case study review as a promising practice.

The four essential criteria agreed with stakeholders are,

#1. Evidence based programme design: How does programme design comply with international and national obligations and commitments on human rights and gender equality; how is the programme design evidence based?

#5. Monitoring and evaluation: Is there a monitoring and evaluation plan and evidence of its execution?

#9. Sustainable and replicable: Did the programme put in place plans for the project to be sustainable after the initial phase was complete: this includes finance, policy and delivery structures?

#10. Involved and empowered adolescents and youth: Did the programme create a safe space for adolescents to actively and meaningfully participate and contribute to the programme's plan and delivery?

An initial screening following the document review applies a score of 1 for YES meets criterion, and 0 for NO does not meet criterion. Programmes are required to achieve a score of 6 to move to further review. Where documentary evidence has not been provided in response to follow-up requests, or is not available a zero score has been applied. The initial screening is provided at Annex B.

Table 4: Promising Practice Criteria Matrix

Revised Promising Practice Criteria - Adolescent Programming - Analysis Matrix							
UNICEF five pillars for adolescent programming: taken from draft conceptual framework ToR for this assignment							
No.	Promising Practice Criteria	Area of Inquiry	1	2	3	4	5
			Well-being	Safety and protection	Education	Civic engagement	Livelihood
			Source: programme documents; KII; FGD; other				
1	Evidence-based programme design	How does programme design comply with international and national obligations and commitments on human rights and gender equality; how is the programme design evidence based?					
2	A theory of change	How does the programme specify intended outcomes and describe the activities that are related to those outcomes?					
3	Documentation	Is there a book, manual, or other available writings and training materials that specify the components of the programme and describe how to administer it?					
4	Accepted practice	How do stakeholders demonstrate general acceptance of the programme as appropriate for use with children?					
5	Monitoring and evaluation	Is there a monitoring and evaluation plan and evidence of it's execution?					
6	Cultural competency and partnerships	How does the programme consider the specific requirements of and involve adolescent boys and girls, of adolescents of different religions or ethnic groups, adolescents with disabilities including intellectual disabilities?					
7	Reaches most vulnerable and marginalized	How does the programme identify and reach the poorest, girls, adolescents with disabilities, adolescents affected by HIV; adolescents affected by violence; other marginalized populations?					
8	Evidence of positive outcomes and/or impact	Has the programme been subject to an external independent study demonstrating positive outcomes? how do programme participants perceive the benefits of the programme?					
9	Sustainable and replicable	Did the programme put in place plans for the project to be sustainable after the initial phase was complete: this includes finance, policy and delivery structures					
10	Involved and empowered youth	Did the programme create a safe space for adolescents to actively participate and contribute to the programme's plan and delivery?					
11	Innovative	Was the programme design flexible when required to change and adapt to new information and challenges?					

5 Discussion

The context for adolescent programming in Indonesia is heterogeneous and complex. Regional disparities related to demographics, topography and poverty indicators as well as traditional and cultural mores impact on intervention design.

Whilst economic growth is predicted to remain stable, inequalities persist and the underlying trends are predicted to continue. This will likely exacerbate the poor outlook for youth employment which may contribute to rising tensions. The links between education and consequent employment for economic growth stand-out as critical contextual factors for adolescent programming. This includes both ensuring that adolescents stay in school or other educational systems and that the quality of the learning programmes offered meets their needs. Similarly, data on child marriage, adolescent nutrition, non-communicable diseases etc. continues to point to significant pervasive risk factors for adolescents.

UNICEF and other stakeholders' adolescent programming is designed against this background of inequality, high need and limited resources.

Adolescent programming is a critical intervention area for UNICEF Indonesia. Embedded in the Education team, the adolescent development specialists have a cross-cutting role and responsibility for ensuring effective interventions are in place. Although significant key interventions are underway these appear to operate in programmatic silos and the links/integration across programme areas is not well-defined through a strategic plan which details intended outcomes. Consideration of the return on investment for the described interventions versus the huge size of the adolescent population and in the context of the macro-level environment, suggests that small-scale pilot or tests whilst valuable for the individuals who directly benefit, may not have the scalability and replicability required to be considered as a promising practice.

Tools for participation and engagement appear to be misunderstood as standalone programming interventions rather than as instruments and mechanisms which may prompt and support effective programming to achieve results for young people. These very practical and innovative instruments are a key feature of some programme interventions and have the potential to be applied systematically to all programmes to meet the criterion for participation and engagement.

Much of the available evidence is anecdotal rather than evidence-based, which is a critical criterion for measurement of irrefutable best practice. Although a significant number of documents were provided, these did not provide corroboration of the programme interventions subsequently described during key informant interviews. Monitoring and evaluation frameworks describing intended outcomes and which included indicators and targets for each programme, are key criteria for interventions to be considered promising practice, and were missing from the provided documentation

Consequently, when programmes were reviewed against the 'promising practice' criteria for inclusion as in-depth case studies, there is a high exclusion rate.

Equally, the inclusion of the 10-14 age group is not strategically defined or evident in the described programmes. Marginalised and excluded adolescents are indiscernible in programme interventions. There is limited supporting documentation to suggest that the needs of adolescents with disabilities have been considered across all programmes.

The selection of programme sites and the decision-making processes regarding which programmes where is not well documented. The interviews with programme staff suggest that in most cases sites were selected for convenience. Noting that adolescents are not a homogenous cohort, that their needs change over time and depending on their developmental stage, further consideration of the potential benefits of purposeful convergence, that is delivering all programmatic interventions across all sites, may present an opportunity to demonstrate impact.

6 Emerging programmes for case study review

Please see Annex B.

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Annex A Documents provided by UNICEF to the review

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
Landscape Report on Adolescent and Maternal Nutrition in Indonesia	2014	Global alliance for Improved Nutrition	English	Health: nutrition	Improving nutrition outcomes in adolescent girls to contribute to improved maternal and child mortality and reduced stunting among under-5s
Contract: Yayasan Panna	2016-2017	Yayasan Panna	English	Youth forums using visual story telling methods	Contract between UNICEF and NGO for capacity building with youth forums using visual story telling methods
The Global AA-HA! Framework; Accelerated Action for the Health of Adolescents	2016-2030	WHO	English	Health	Brochure; describes global strategy women's, children's and adolescent's health
Advocacy Toolkit: a guide to influencing decisions that affect children's lives	2010	UNICEF	English	Participation	Advocacy toolkit - a guide to influencing decisions that affect children's lives
Programme document; describing the purpose of agreement with NGO Yayasan Sinergi Muda Indonesia to conduct work	2016-2018	UNICEF	English	U-report	Youth and adolescent engagement in digital and offline information platforms used by UNICEF U-Report
Law on Child Protection	2014	Government of Indonesia	Bahasa	Child protection	Guidelines for child protection; definition of child and child protection; national and local government responsibility; parental responsibility; source of fund for child protection; establishment of child protection commission; restriction and sanction
Programme document; describing the purpose of agreement with NGO ChildFund Indonesia to conduct work	2016-2017	UNICEF	English	Adolescent life-skills, wellbeing, participation	Life skills, psycho-social wellbeing and participation of adolescents
I like being asked: children's recommendations for childhood violence research in Indonesia	Undated	Not known	English	Child protection; participation	Unpublished journal; Children are rarely consulted in planning violence research limiting safe and active participation and suitability of research to Indonesia's diverse context
Draft National Health Action Plan School and Adolescent Health	2017	Government of Indonesia	Bahasa	Health	Draft National Action Plan; includes specific focus on adolescent health; 5 main strategies in the action plan: (1) increase knowledge and skill for adolescent on 8 health

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
					issues; (2) strengthen access and quality of comprehensive health service; (3) strengthen institution and partnership; (4) provision of strategic information; and (5) meaningful involvement of the youth themselves
Draft National Action Plan Youth	2017	Government of Indonesia	Bahasa	Youth	Draft National Action Plan on Youth; The action plan covers several sectors, including education/training for youth empowerment (e.g. skill trainings for job seeker), health (e.g. counseling for smokers), social (e.g. for alcohol/narcotic abuse), etc.
Education for Adolescents	2010	UNICEF	English	Education	UNICEF East Asia Pacific Strategic Framework
Example of MoU with Enumerators	2009	See Citation	English	Research	Appendix 1. Sample MoU for Young Lives Researchers
Averting new HIV infections among young people in Papua and West Papua: An education sector response	2010-2015	UNICEF	English	HIV	Final donor report to government of Netherlands report describes the achievements of the comprehensive education sector response to averting new HIV infections among adolescents and young people in Papua and West Papua provinces.
Final evaluation report on above	2015	Burnett Institute and Survey Meter	English	HIV	Final evaluation report
Annexes to above report	2015	Burnett Institute and Survey Meter		HIV	ToRs; methodologies etc.
Baseline survey report on folic acid supplements for adolescent girls	2016	Department of Nutrition Human Nutrition Research Cluster Faculty of Medicine Directorate Research and Community Services Universitas Indonesia	English	Health; nutrition	Baseline survey report; combatting high prevalence of anemia in teenage girls
Final formative research report on folic acid supplements for adolescent girls	2016	As above	English	Health; nutrition	Includes recommendations for Micronutrient Initiative (MI) and Indonesian Government in designing the behavior change communication strategy for anemia prevention.
Student led bullying prevention: designing a child-centered pilot	2017	Prof. Lucy Bowes	English	Child protection: School bullying	PowerPoint presentation delivered to UNICEF

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
Analytical Report on the Good Practices in Adolescent and Youth Programming, UNICEF MENARO, on behalf of the UNIATTTYP, UNDG Arab States/MENA, 2015	2015	American University of Beirut and UNICEF	English	Adolescents general	Good Practice in the Middle East and North Africa Region
Factsheet: HIV amongst adolescent population	2016	Sub Directorate of AIDS and STI Director General of Diseases Control and Prevention Ministry of Health Indonesia & UNICEF	English	HIV	Factsheet with detailed data on HIV among adolescents
WASH in schools in Indonesia; Incredible Opportunities: An overview of the current situation with recommendations for Progress	2016	UNICEF	English	WASH in schools	infrastructure and knowledge and behaviors of school children including adolescents; includes experience of what a good wins programme looks like
WASH Gender Promising Practices Flyer	Undated	UNICEF	English	WASH in schools	two versions of the flyer are provided; both un-dated; relates to open defecation and menstrual awareness
Instructions Of The President Of The Republic Of Indonesia Republic Of Year 2017 Community Of The Healthy Life Of The Republic Of Indonesia,	2017	Government of Indonesia	Bahasa	Health	In order to accelerate and synergize the actions of promotive and preventive efforts to improve healthy life of the productivity of the population and reduce the burden of health care costs due to illness, hereby instruct:
Innocenti Research Brief Improving the Methodological Quality of Researching Adolescent Well-being	2017	UNICEF	English	Research	#1 in a series of briefs on research methods is intended to share contemporary research practice, methods, designs, and recommendations from renowned researchers and evaluators
Innocenti Research Brief Data and indicators to measure adolescent health, social development and well-being	2017	UNICEF	English	Research	#2

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
Innocenti Research Brief Inclusion with Protection: Obtaining informed consent when conducting research with adolescents	2017	UNICEF	English	Research	#3
Innocenti Research Brief Research with Disadvantaged, Vulnerable and/or Marginalized Adolescents	2017	UNICEF	English	Research	#4
Innocenti Research Briefs Adolescent Participation in Research: Innovation, rationale and next steps	2017	UNICEF	English	Research	#5
Innocenti Research Briefs How to Measure Enabling and Protective Systems for Adolescent Health	2017	UNICEF	English	Research	#6
Innocenti Research Briefs Methodologies to Capture the Multidimensional Effects of Economic Strengthening Interventions	2017	UNICEF	English	Research	#7
Issue Brief: Young Key Affected Populations: Access to HIV Services in Indonesia	Undated	UNICEF	English	HIV	current validity of data unknown
Programme document; describing the purpose of agreement with NGO Gerakan Pramuka Indonesia to conduct work	2016-2017	UNICEF	English	Child Protection; WASH; nutrition	Programme document describing agreed activity; U-report across child protection, nutrition and WASH; and training for scouts
Law on Population and Family Planning	2009	Government of Indonesia	Bahasa	Population and family planning	This is another measure used by the government to control early marriage; equal rights between husband and wife; provision of access to information, education, counseling and services about family for youth
Support for closing the HIV prevention and treatment gaps for Young	2017	UNICEF	English	HIV	UNICEF Report to MAC AIDS Foundation Submitted by UNICEF Indonesia Country Office January 2017

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
Key Populations in Indonesia; Bandung - Lollipop					
Research Brief on Marriage Dispensation in Indonesia	Undated	UNICEF	English	Child protection: Child marriage	Briefing with data taken for the report Revealing the Truth of Marriage Dispensation: An Analysis of Child Marriage Practice in Tuban, Bogor, and Mamuju Districts, highlights that the implementation of marriage dispensation is fraught with challenges and in its current state is incompatible with international and national child rights frameworks
Children's Guides to Menstruation	Undated	UNICEF	Bahasa	Health; menstruation	Pamphlets for girls and boys about menstruation
As above, slightly different format	Undated	UNICEF	Bahasa	Health; menstruation	Pamphlets for girls and boys about menstruation
Menstruation and Health According to Islamic Teachings	2016	Graduate School of National University	Bahasa	Health; menstruation	Menstruation according to Islamic teaching; dos and don'ts during menstruation; hygiene aspect; Q&A on myth and fact about menstruation
Posters about menstruation	Undated	UNICEF	Bahasa	Health; menstruation	Posters about menstruation
One Roof School Program and Its Impact On Child Labor: A Case Study in Sukabumi District	2011	ILO	English	Education	The report recommends expansion of the program which established secondary school next to primary in rural areas
Working Paper: the participation of Adolescents	2001	UNICEF	English	Participation	A Strategic Approach - guidelines issued by NYHQ in 2001
Draft Concept Note: Partners in Peer Violence Prevention- South Sulawesi & Central Java Pilot	2016	UNICEF	English	Child protection: violence	A concept note for a school bullying intervention: he intervention will seek to address peer violence and bullying, by targeting all actors in the school ecology
Programme document; describing the purpose of agreement with NGO STKIP Indonesia to conduct work	2017	UNICEF	English	Life-skills education	Programme document for activity related to mainstreaming life-skills education into pre-service teacher training
"permenkes no 25 tahun 2014"	2014				document in un-readable format
Regulation of the Ministry of Health of the republic of	2016	Government of Indonesia	Bahasa	Health	It covers 12 minimum service standards for pregnant mother, maternity, newborn baby, under 5, primary school age

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
Indonesia: Number 43/Year 2016.					children, people in their productive age, elderly, people with high blood pressure, people with diabetes, severe mental health, tuberculosis, and HIV infected
Zip file related to the Independent Youth Alliance partnership with UNICEF	2016-2017	UNICEF and partner	English	Awareness Raising Programme to Prevent and Respond to Violence against Children	zip file with more than 50 documents
Innocenti Research Briefs Infographic	2017	UNICEF	English	Adolescent Research	
U-Report Infographic	2017	Adolescent Summit held by BKKBN and Johns Hopkins	English	data on pregnancy, access to contraception, child marriage	Data Report from U-report findings
Mid-term review report Demonstration site of Friendly HIV Services: LOLIPOP	2016	Burnett Institute	English	HIV	Report outlining mid-term review findings of the LOLIPOP program
Programme document STKIP; strengthening early grade literacy in rural schools	2016	UNICEF	English	Education	Contributes to UNICEF objective increased and equitable access to quality education for the most marginalized children 3-18
Strategic Guidance Note on Institutionalizing Ethical Practice for UNICEF Research	2013	UNICEF	English	Research	Relates specifically to ethical research with children
CV Tamara Plush					CV of Communications Expert
Technical Proposal Capacity Building of Youth Forums with Visual Storytelling Methods	2016	PannaFoto	English	Participation	Technical Proposal; purpose of the project is to build the capacity of existing forums to ensure youth (age 10-24 years) have been enabled to raise their voice on climate change, disaster risk and related issues of child rights, health and wellbeing
Terms of Reference for Institutional Contract Capacity Building of Youth Forums with Visual Storytelling Methods	2016	UNICEF	English	Participation; data collection; evidence building	Relates to above technical proposal
Terms of Reference Individual Consultant:	2016	UNICEF	English	Participation	ToR as above

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
Develop innovative approaches to strengthen participation of children and young people in DRR/CC					
Research Brief Child Marriage Progress on Pause	2016	UNICEF	English	Child protection: child marriage	Data from two reports analysing data on child marriage in Indonesia. Progress on Pause: An Analysis of Child Marriage Data in Indonesia, analyzes child marriage prevalence trends between 2008 and 2012. Child Marriage in Indonesia (2013 and 2015), presents child marriage prevalence data for 2013 and 2015, as well as information on health and social protection.
Learning from the Roots Program: Reducing Bullying in Schools through Peer Influence	Undated	UNICEF	English	Child protection: school bullying	Proposal for Roots Programme to reduce school-bullying
Adolescent and Youth Engagement Strategic Framework	2017	UNICEF	English	Adolescent and youth	UNICEF Global Framework
Law on Youth	2009	Government of Indonesia	Bahasa	Youth	Objective of youth services: awareness, empowerment, development of leadership, entrepreneurship, and youth pioneer
Children in a Changing Climate Youth Voices from the Frontline; guide for facilitators 2016 workshops	2016	Children in a Changing Climate Coalition	English	Participation; climate change disaster risk reduction	Community digital storytelling for social change
Children in a Changing Climate Youth Voices from the Frontline; 2016 workshop report	2016	Children in a Changing Climate Coalition	English	Participation; climate change disaster risk reduction	Workshop Report
The Sexual and Reproductive Health Needs of Very Young Adolescents Aged 10–14 in Developing Countries: What Does the Evidence Show?	2017	Gutmacher Institute	English	Sexual and reproductive health	Global Report; overview from literature; up-dated analyses; and recommendations summarizing the most urgent needs.
Documents received w/b 19.06.2017					

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
Student-led bullying prevention: Designing a child-centered pilot	2017	UNICEF	English	School bullying	PowerPoint presentation about school bullying programme
Megatrends to 2030 A document for UNICEF Indonesia	2016	The Economist Intelligence Unit	English	Statistics	Examines the 6 major trends in Indonesia's development landscape in the period to 2030 which will impact development goals and as a result child well-being in the country.
Partners in Peer Violence Prevention- South Sulawesi & Central Java Pilot	2016	UNICEF	English	Peer violence and bullying	Draft concept note programme framework
# Everychild 2030 Priority SDG Targets and indicators for children in Indonesia.	2016	UNICEF	English	SDG	This information note aims to provide the Government of Indonesia with an overview of the priority Global SDG targets and indicators from the perspective of children in Indonesia, and recommendations for 9 additional national SDG indicators. This information may be of use as a resource in developing the national SDG indicator framework for Indonesia.
Learning from the <i>Roots</i> Program: Reducing Bullying in Indonesian Schools through Student-Driven Change	2017	UNICEF	English	School bullying	Summary of <i>Roots</i> Programme
DRAFT Learning from the <i>Roots</i> Program: Reducing Bullying in Indonesian Schools through Student-Driven Change	Undated	UNICEF	English	School bullying	Like above with UNICEF comments included
Scenarios to 2030 A report for UNICEF Indonesia	2016	The Economist Intelligence Unit	English	SDG	presents three scenarios and their potential effect on achievement of SDGS for children; 1) slow but steady progress, 2) aspirational -vibrant well governed economy 3) challenging - fragmented, fractious nation
Revealing The Truth Of Marriage Dispensation An Analysis Of Child Marriage Practice In Tuban, Bogor, And Mamuju Districts	2016	UNICEF	English	Child marriage	A research report by 18+ Coalition ¹ , Revealing the Truth of Marriage Dispensation: An Analysis of Child Marriage Practice in Tuban, Bogor, and Mamuju Districts (2016)
ACT Country Tracker Brief	2017	UNICEF	English	Adolescence general	Briefing document on measuring progress
ACT Country Tracker Postcard	2017	UNICEF	English	Adolescence general	Briefing document on measuring progress

Name of document	Date	Author / Published by	Language	Thematic Area	Comments / Main provisions
UNICEF 2-page Adolescent Brief	2017	UNICEF	English	Adolescence general	Briefing document on adolescence or Indonesia country office
Documents received post 19.06.2017-07.07.2017					
ADAP for Child Forum	2013	UNICEF and University of Melbourne	English	Adolescents general	Four days training module for adolescents and adult counterparts
Children in a changing climate. Good practice note template	Undated	Children in a changing climate	English	Adolescents in emergencies	A note capturing good approaches and lessons learned on delivering adolescents in emergency program in Indonesia.
Power for Youth Annual Results Report	2016	UNICEF and ING	English	Adolescents general	Report presenting results for adolescents (2016) in 6 counties, including Indonesia.
Power for Youth: Empowering adolescents for emergency situations in Indonesia	2016	UNICEF and ING	English	Adolescents in emergencies	Report featuring the “empower adolescents before, during and after emergencies and ensure structural participation in governance”
The adolescents Kit: for experiences and innovation	Undated	UNICEF HQ/Indonesia and South Sudan	English	Participation, empowerment	Adolescents Kit/Activity card/Facilitator guide
Justice for children report in Indonesia	2016	UNICEF	English	Child Protection	Project report for the Government of Norway (November 2015 to April 2016)
Diversion not detention	2017	UNICEF EAPRO	English	Child Protection	A study on diversion and other alternative measures for children in conflict with the law in East Asia and the Pacific
National Action Plan on Business and Human Rights	2017	National Commission on Human Rights and Lembaga Studi & Advokasi Masyarakat	English	Human Rights	Policy document that can be used as policy instrument to articulate actions on Business and Rights.
Yogyakarta Outcome Document of Adolescent Summit for Preventing Adolescent pregnancy	Undated	Temu Remaja	English	Adolescents pregnancy	Recommendations from the Adolescents Summit in Indonesia in reducing adolescent pregnancy
Rekomendasi Remaja Temu Remaja Nasional.	Undated	Temu Remaja	Bahasa	Adolescents pregnancy	Same as above but in Bahasa.

Annex B Initial Screening of Programmes

Name of Impl Org	Name of Programme	Primary Domain	Promising Practices Criteria (* denotes essential criteria)											Total	Comments	
			Evidence-based design	Theory of Change	Documentation	Accepted practice	Monitoring and evaluation	Cultural competency and partnerships	Reaches most vulnerable and most marginalized	Evidence or positive outcomes and/or impact	Sustainable and replicable	Involved and empowered adolescents	Innovative			
			1*	2	3	4	5*	6	7	8	9*	10*	11			
UNICEF	Adolescent Nutrition	Health and wellbeing	1	1	0	0	0	0	0	0	0	0	0	0	2	This program is too new to be considered a promising practice for this review.
UNICEF	Wash in Schools (including MHM)	Health and wellbeing	1	1	1	1	1	1	1	0	1	1	1	1	10	Based on literature review and in-country interviews, this program meets most of the criteria for Promising Practice. Limitation: the program does not include children living with disabilities.
UNICEF	Child Marriage	Protection	0	1	0	0	0	0	0	0	0	0	0	0	1	The program is too new to be considered as promising practice.
UNICEF	HIV YKAP (Lollipop) support for closing the HIV prevention and treatments gaps for Young Key Populations in Indonesia	Health and wellbeing	1	0	1	1	1	1	1	1	0	0	1	1	8	Based on conversations with the UNICEF team and literature review this program meets most of the criteria for Promising Practice.
UNICEF	Alternative Measures for Children in Conflict with the Law	Protection	0	0	0	0	0	0	0	0	0	0	0	0	0	At the time of analysis OPM didn't have adequate information to consider this program as promising practice for this review
PLAN	Community Based Child Protection	Protection	0	0	0	0	0	0	0	0	0	0	0	0	0	This programme was included during the workshop by workshop participants. OPM will seek to collect further information for this review.
UNICEF	Youth Voices DRR/Climate Change	Participation and engagement	0	0	0	0	0	0	0	0	0	0	0	0	0	At the time of analysis OPM didn't have adequate

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Name of Impl Org	Name of Programme	Primary Domain	Promising Practices Criteria (* denotes essential criteria)											Total	Comments	
			Evidence-based design	Theory of Change	Documentation	Accepted practice	Monitoring and evaluation	Cultural competency and partnerships	Reaches most vulnerable and most marginalized	Evidence or positive outcomes and/or impact	Sustainable and replicable	Involved and empowered adolescents	Innovative			
			1*	2	3	4	5*	6	7	8	9*	10*	11			
																information to consider this program as promising practice
UNICEF - Gol	"One-Roof School Programme"	Education and learning	0	0	1	0	0	1	1	0	0	0	1	4	At the time of analysis, the documents provided inconclusive evidence for this program to be considered as promising practice	
UNICEF	Life Skills Education	Education and learning	1	1	1	1	0	0	0	0	0	0	1	5	The program is too new to be considered as promising practice.	
UNICEF and Child Fund	Adolescents in Emergency Project	Participation and engagement	1	0	1	0	1	1	1	0	0	1	1	7	At the time of the review OPM didn't have adequate information. OPM will seek to collect further information to consider this for review	
Sabang District Government	SABANG District Government Education Grants	Education and learning	1	0	1	0	1	1	1	1	1	1	1	9	Based on conversations with the UNICEF team and the review of literature this program seems to meet most of the criteria for Promising Practice	
Gol	Adolescent Friendly Health Services PKPR	Health and wellbeing	1	0	0	0	0	1	0	0	0	0	1	3	This program is implemented at scale by the Gol, therefore it will not be considered for this review.	
Gol and UNICEF	Child Friendly City/District Initiative	Cross-cutting	0	0	0	0	0	0	0	0	0	0	0	0	0	Based on the literature review this program does not seem to meet the necessary criteria to be considered for this review
UNICEF	Averting new HIV infections among young people in Papua and West Papua	Health and wellbeing	1	0	0	0	1	0	1	0	0	0	0	3	Based on the literature review, this program doesn't seem to have produced sustained changes in the HIV epidemic among the targeted population group. Therefore, it will not be considered for this review.	

Name of Impl Org	Name of Programme	Primary Domain	Promising Practices Criteria (* denotes essential criteria)											Total	Comments	
			Evidence-based design	Theory of Change	Documentation	Accepted practice	Monitoring and evaluation	Cultural competency and partnerships	Reaches most vulnerable and most marginalized	Evidence or positive outcomes and/or impact	Sustainable and replicable	Involved and empowered adolescents	Innovative			
			1*	2	3	4	5*	6	7	8	9*	10*	11			
Indonesian Planned Parenthood Foundation	Synergy in Building Youth Friendly Sexual and Reproductive Health Service	Health and wellbeing	0	0	0	0	0	0	0	0	0	0	0	0	0	Based on unavailability of information during the literature review and workshop, this program will not be considered for this review.
Indonesian Planned Parenthood Foundation	Utilizing Information Technology to Broaden Youth's Access to Reproductive Health	Health and wellbeing	0	0	0	0	0	0	0	0	0	0	0	0	0	Based on unavailability of information during the literature review and workshop, this program will not be considered for this review.
UNICEF	Strengthening quality of early literacy learning in rural and remote schools and improving institutional capacity and environment in Sarong district	Education and learning	0	0	0	0	0	0	0	0	0	0	0	0	0	The targeted population of this program is too young to be considered within the scope of this review
Helen Keller International	Opportunities for Vulnerable Children programme	Education and learning	0	1	1	1	1	1	1	1	1	0	0	0	7	This programme was included during OPM's mission to Indonesia. OPM would need to collect further information before reviewing it as promising practice.
UNICEF	Prevent peer violence and bullying	Protection	1	0	0	0	0	0	0	1	0	0	1	1	4	This program is too new to be considered a promising practice.

*Zero does not mean that the project does not match the criteria. It means the relevant information was not found in the literature review