



# #EVERYCHILD 2030

## PRIORITY SDG TARGETS AND INDICATORS FOR CHILDREN IN INDONESIA

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## PURPOSE OF THIS NOTE:

The Inter-Agency and Expert Group on Sustainable Development Goals Indicators has shared the final global list of proposed SDG indicators.<sup>1</sup> 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.

## WHY DO WE NEED INDICATORS FOR CHILDREN?

Indonesia's children now number approximately 83 million<sup>2</sup>, or one third of the population. The Government's vision to improve people's productivity and international competitiveness, as a means to ensure sustained economic growth, requires intensive investment in the survival and well-being of Indonesia's children. How children are faring – in terms of their health and nutrition, their welfare and education, the environment in which they grow up – is a direct predictor of what the future will look like, and whether that future is bright or bleak. It is therefore critical that the well-being of children is systematically tracked by indicators that give an accurate picture of the life of a child today as well as provide a window into the future for all of us.<sup>3</sup>

Investing in all children and young people is central to achieving all aspects of sustainable development – and monitoring progress for children is crucial to know which investments to make. As stated in the outcome document “Transforming our world: the 2030 Agenda for Sustainable Development,” children are both agents of change and torch bearers for sustainable development.

## KEY PRINCIPLES FOR MONITORING ALL GOALS, TARGETS AND INDICATORS

Addressing inequalities and committing to the reduction of equity gaps over time has been a major focus of the SDGs – as can be seen with the inclusion of Goal 10 ‘Reduce inequality within and among countries’ – but also throughout the final outcome document. The reduction of inequalities requires dedicated attention and follow-up through the SDG monitoring process. This includes the disaggregation of data for age (including children), sex and other dimensions as well as a recognition of the universality of the SDGs for all groups of the population in Indonesia and for all countries globally.

### Disaggregated data by age, sex and other dimensions of inequality

As indicated in Target 17.18 of the SDGs' Outcome Document, indicators must be disaggregated. Disaggregated data are critical to developing and implementing policies that can improve the lives and futures of the poorest, most marginalized and vulnerable children. Disaggregated data help us to see the children and communities that are being rendered invisible or left behind – so that programming and policy decisions can be deployed to improve the situation and help break down the vicious cycles that perpetuate intergenerational inequalities. For children in Indonesia, data disaggregated by income, gender, age, religion, and geographic location (provincial and district, rural/urban) are particularly important.

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<sup>1</sup> Report of the Inter-Agency and Expert Group on SDG Indicators (E/CN.3/2016/2/Rev.1), 19 February 2016

<sup>2</sup> Census population projections, 2015

<sup>3</sup> Statement by the Government of Luxembourg on Behalf of 15 Members States of the Group of Friends on Children and SDGs

## Universality

Unlike the MDGs, the SDGs are universal and are globally relevant for all children, no matter where a child is born. For example, the SDGs consider that no target has been met unless it is met by all groups of the population, regardless of their income, location or vulnerabilities they experience.

The Convention on the Rights of the Child (CRC) – the most widely ratified convention in existence – provides the normative framework for all children everywhere to get the best start in life, to survive and thrive, to receive a quality education and to live free from violence and abuse.

## Priority indicators to monitor progress for children with respect to the SDGs

All 17 global goals and 169 targets touch on lives of children in some way. A careful analysis shows that of these, 13 goals and 44 targets seem to be particularly relevant to children in Indonesia. Moreover, of the 231 final global indicators, UNICEF Indonesia proposes 59 indicators that could be prioritized to track progress against the most pressing issues facing children in Indonesia. The annex of this note includes a consolidated list of priority targets and indicators for children in Indonesia; some key recommendations related to monitoring these indicators in Indonesia; and the potential source of data.

The list below is a selection of 9 potential national SDG indicators, which are not captured in the global indicator list but which are strongly recommended for Indonesia's national SDG monitoring framework given their relevance to important issues facing Indonesia's children.

SDG TARGET	RECOMMENDED ADDITIONAL NATIONAL SDG INDICATORS
1.1	Proportion of children (aged 0-17) below twice the national poverty line (SUSENAS)
1.3	Proportion of children receiving a child or other social grant (MoSA)
1.5	Proportion of health and educational facilities affected by hazardous events
2.2	Proportion of infants under 6 months of age who are exclusively breastfed (SUSENAS) Prevalence of anaemia in women of reproductive age (RISKESDAS)
3.9	Population in urban areas exposed to outdoor air pollution levels above WHO guideline values
4.2	Percentage of children aged 36 months and above who attend an organized early learning/care and education programme
6.1	Percentage of health care facilities with basic water, sanitation and hygiene facilities (RIFASKES)
6.2	Percentage of population practicing open defecation (SUSENAS and RISKESDAS)

PRIORITY TARGETS REFLECTING THE MOST PRESSING ISSUES FACING CHILDREN IN INDONESIA	PRIORITY SDG INDICATORS <sup>4</sup>	ADDITIONAL RECOMMENDATIONS	
<b>SDG 1: END POVERTY IN ALL ITS FORMS EVERYWHERE</b>			
1.1	<p>By 2030, eradicate extreme poverty for all people everywhere, currently measured as people living on less than \$1.25 a day</p>	<p>Proportion of population below international poverty line disaggregated by sex and age group and employment status and geographical location (urban/rural) (SUSENAS) (1.1.1.)</p> <p>Proportion of children (aged 0-17) <u>below twice</u> the national poverty line (SUSENAS) (recommended as additional national indicator)</p>	<p>The SDGs bring an important shift towards an explicit recognition of child poverty and the need for child poverty reduction.</p> <p>Given that currently the national poverty line is lower than the international extreme poverty standard, it is recommended to use several poverty lines reflecting national development levels (e.g. extreme poverty, poverty, vulnerability to poverty) to better measure and address poverty.</p>
1.2	<p>By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions</p>	<p>Proportion of population living below national poverty line, by sex and age group (SUSENAS) (1.2.1)</p> <p>Proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions (SUSENAS) (1.2.2)</p>	<p>For the first time, the SDGs framework takes into account multi-dimensional poverty according to national definitions. UNICEF Indonesia is planning a pilot of the child well-being survey (ISCWeB) in 2016 in West Java, and stands ready to provide technical support to see whether this methodology can be relevant for Indonesia's multidimensional poverty definition.</p> <p>Important that data for both indicators is disaggregated by both gender and age.</p>
1.3	<p>Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable</p>	<p>Proportion of the population covered by social protection floors/systems disaggregated by sex, and distinguishing children, unemployed, old age, people with disabilities, pregnant women/new-borns, work injury victims, poor and vulnerable (MoSA/TNP2K) (1.3.1)</p>	<p>Important that data for these indicators is disaggregated, as possible, by child's poverty and wealth status, disability, gender and location.</p>

<sup>4</sup> Indicators come from the final list of global indicators of the Inter Agency and Expert Group (IAEG – SDG), 19 FEB 2016 and proposed modifications by UNICEF based on Indonesia's context for children. The numbers in brackets behind the indicators correspond with the numbering of the indicators in the global list.

1.3		Proportion of children receiving a child or other social grant (MoSA) (recommended as additional national indicator)	
1.4	By 2030, ensure that all men and women, in particular the poor and the vulnerable, have equal rights to economic resources, as well as access to basic services, ownership and control over land and other forms of property, inheritance, natural resources, appropriate new technology and financial services, including microfinance.	Proportion of the population living in households with access to basic services (villages, PODES by BPS) (1.4.1)	
1.5	By 2030, build the resilience of the poor and those in vulnerable situations and reduce their exposure and vulnerability to climate-related extreme events and other economic, social and environmental shocks and disasters	Number of deaths, missing and persons affected by disaster per 100,000 people (1.5.1)  Proportion of health and educational facilities affected by hazardous events (recommended as additional national indicator)	For the first indicator, which is also part of the Sendai Framework, it is important to disaggregate deaths/missing and persons affected.  It is recommended to add the additional national indicator given the high number of natural disasters in Indonesia.
1.a	Ensure significant mobilization of resources from a variety of sources, including through enhanced development cooperation, in order to provide adequate and predictable means for developing countries, in particular least developed countries, to implement programmes and policies to end poverty in all its dimensions.	Proportion of resources allocated by the government directly to poverty reduction programmes (1.a.1)  Proportion of total government spending on essential services (education, health and social) (1.a.2)	
1.b	1b. Create sound policy frameworks at the national, regional and international levels, based on pro-poor and gender sensitive development strategies, to support accelerated investment in poverty eradication actions.	Proportion of government recurrent and capital spending going to sectors that disproportionately benefit women, poor and vulnerable groups (1.b.1)	

## SDG 2: END HUNGER, ACHIEVE FOOD SECURITY AND IMPROVED NUTRITION AND PROMOTE SUSTAINABLE AGRICULTURE

<p>2.2</p>	<p>By 2030, end all forms of malnutrition, including achieving, by 2025, the internationally agreed targets on stunting and wasting in children under 5 years of age, and address the nutritional needs of adolescent girls, pregnant and lactating women and older persons</p>	<p>Prevalence of stunting (height for age <math>&lt;-2</math> SD from the median of the WHO Child Growth Standards) among children under five years of age (RISKESDAS) (2.2.1)</p> <p>Prevalence of wasting (<u>weight for height <math>&lt;-2</math> SD from the median of the WHO Child Growth Standards</u>) in children under 5 years of age (RISKESDAS) (2.2.2)</p> <p>Prevalence of overweight children (<u>weight for height <math>&lt;-2</math> SD from the median of the WHO Child Growth Standards</u>) under 5 years of age (RISKESDAS) (2.2.2)</p> <p>Proportion of infants under 6 months of age <u>who are exclusively breastfed</u> (also fits under Target 2.1) (SUSENAS) (recommended as additional national indicator)</p> <p>Prevalence of anaemia in women of reproductive age (RISKESDAS) (recommended as additional national indicator)</p>	<p>The definitions of several nutrition indicators in the RPJMN are slightly different to the proposed indicator definitions, which are consistent with WHO's global nutrition targets:</p> <ul style="list-style-type: none"> <li>• For stunting, the RPJMN indicator selects children under 2 years instead of children under 5 years of age.</li> <li>• For anaemia, the RPJMN indicator selects pregnant women instead of women of reproductive age</li> <li>• There is no RPJMN indicator on child overweight; adult overweight was selected instead.</li> </ul> <p>In order that Indonesia's progress can be tracked alongside other countries, it would be highly desirable to <u>maintain the WHO nutrition indicators</u>. As the weights, heights and ages of children under 5 years of age are collected by RISKESDAS, statistics on the WHO nutrition indicators and Indonesia's adapted indicators can both be derived with marginal additional effort. RISKESDAS 2013 also obtained data on anaemia in women of reproductive age; obtaining statistically representative data on pregnant women can be problematic because the proportion of pregnant women in a population is low; in addition, from a public health perspective, the control of anaemia in women of reproductive age is important because women should be free of anaemia before they become pregnant.</p>
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## SDG 3: ENSURE HEALTHY LIVES AND PROMOTE WELL-BEING FOR ALL AT ALL AGES

3.1	By 2030, reduce the global maternal mortality ratio to less than 70 per 100,000 live births	<p>Maternal deaths per 100,000 live births (IDHS/SUPAS) (3.1.1.)</p> <p>Proportion of births attended by skilled health personnel (SUSENAS) (3.1.2.)</p>	The indicators being used for international comparability is maternal mortality ratio. The sisterhood method being used in the DHS and multiple indicator surveys (MICS4) measures maternal mortality by asking respondents about the survival of sisters. It should be noted that the sisterhood method results in pregnancy-related mortality: regardless of the cause of death, all deaths occurring during pregnancy, birth or the six weeks following the termination of the pregnancy are included in the numerator of the maternal mortality ratio. Sample size needs to be larger to capture provincial level disaggregation.
3.2	By 2030, end preventable deaths of newborns and children under 5 years of age, with all countries aiming to reduce neonatal mortality to at least as low as 12 per 1,000 live births and under-5 mortality to at least as low as 25 per 1,000 live births	<p>Under-five mortality per 1,000 live births (SUSENAS/DHS) (3.2.1)</p> <p>Neonatal mortality rate (deaths per 1,000 live births) (SUSENAS/DHS) (3.2.2)</p>	Recommend disaggregation of data by district
3.3	By 2030, end the epidemics of AIDS, tuberculosis, malaria and neglected tropical diseases and combat hepatitis, water-borne diseases and other communicable diseases	<p>Number of new HIV infections per 1,000 uninfected population, by age, sex, and key populations (3.3.1)</p> <p>Tuberculosis incidence per 1,000 persons (RISKESDAS) (3.3.2)</p> <p>Malaria incidence per 1,000 population (RISKESDAS) (3.3.3)</p> <p>Hepatitis B incidence per 100,000 population (RISKESDAS) (3.3.4)</p> <p>Number of people requiring interventions against neglected tropical diseases (3.3.5)</p>	

3.4	By 2030, reduce by one third premature mortality from noncommunicable diseases through prevention and treatment and promote mental health and well being.	Mortality rate attributed to cardiovascular disease, cancer, diabetes, or chronic respiratory disease (3.4.1)	
3.7	By 2030, ensure universal access to sexual and reproductive health-care services, including for family planning, information and education, and the integration of reproductive health into national strategies and programmes	Proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods (SUSENAS) (3.7.1)  Adolescent birth rate (10-14; 15-19) per 1,000 women in that age group (SUSENAS) (3.7.2)	
3.8	3.8 Achieve universal health coverage, including financial risk protection, access to quality essential health-care services and access to safe, effective, quality and affordable essential medicines and vaccines for all	Coverage of essential health services (defined as the average coverage of essential services based on tracer interventions that include reproductive, maternal, newborn and child health, infectious diseases, noncommunicable diseases and service capacity and access, among the general and the most disadvantaged population) (3.8.1)  Number of people covered by health insurance or a public health system per 1,000 population (3.8.2)	Key tracers for 3.8.1 should include: <ul style="list-style-type: none"> <li>• Proportion of infants received post-natal visit within 48 hours after delivery (SUSENAS/DHS/RISKESDAS)</li> <li>• Coverage of DTP3 containing vaccine (SUSENAS/RISKESDAS)</li> <li>• Coverage of children with diarrhea receiving oral rehydration solution (ORS) (SUSENAS/DHS/RISKESDAS)</li> <li>• Antenatal care attendance (4 or more visits) (RISKESDAS)</li> <li>• Prevalence of hepatitis B surface antigen in children under 5 (RISKESDAS)</li> </ul>
3.9	Target 3.9 By 2030, substantially reduce the number of deaths and illnesses from hazardous chemicals and air, water and soil pollution and contamination.	Mortality rate attributed to household and ambient air pollution (3.9.1)  Mortality rate attributed to unsafe water, unsafe sanitation and lack of hygiene (exposure to unsafe WASH services) (3.9.2)	Recommend that these indicators are disaggregated by age and gender.  It is recommended to add a specific national indicator on outdoor air pollution, given that globally air pollution has been

3.9		Population in urban areas exposed to outdoor air pollution levels above WHO guideline values (recommended as additional national indicator)	shown to severely impact on children's health and well-being. This is an area where UNICEF is conducting a study to measure the impact of haze on children's health.
3.c	Substantially increase health financing and the recruitment, development, training and retention of the health workforce in developing countries, especially in least developed countries and small island developing States.	Health worker density and distribution (RIFASKES) (3.c.1)	Important that data is disaggregated by district.
3.d	Strengthen the capacity of all countries, in particular developing countries, for early warning, risk reduction and management of national and global health risks.	International Health Regulations capacity and health emergency preparedness (3.d.1)	UNICEF's country programme will focus on supporting capacity development of partners.

#### **SDG 4: ENSURE INCLUSIVE AND EQUITABLE QUALITY EDUCATION AND PROMOTE LIFELONG LEARNING OPPORTUNITIES FOR ALL**

4.1	4.1 By 2030, ensure that all girls and boys complete free, equitable and quality primary and secondary education leading to relevant and effective learning outcomes	Proportion of children and young people: (a) in grades 2/3; (b) at the end of primary; and (c) at the end of lower secondary achieving at least a minimum proficiency level in (i) reading and (ii) mathematics, by sex (4.1.1)	Disaggregation recommended by sex as well as location, wealth (and others where data are available)
4.2	By 2030, ensure that all girls and boys have access to quality early childhood development, care and pre-primary education so that they are ready for primary education	Proportion of children under 5 years of age who are developmentally on track in health, learning and psychosocial well-being, by sex (4.2.1)  Participation rate in organized learning (one year before the official primary entry age), by sex (4.2.2)	Recommended disaggregation: sex, location, wealth (and others where data are available)

4.2		Percentage of children aged 36 months and above who attend an organized early learning/care and education programme (recommended as additional national indicator)	
4.3	4.3 By 2030, ensure equal access for all women and men to affordable and quality technical, vocational and tertiary education, including university	Participation rate of youth and adults in formal and non-formal education and training in the previous 12 months, by sex (4.3.1)	
4.4	By 2030, substantially increase the number of youth and adults who have relevant skills, including technical and vocational skills, for employment, decent jobs and entrepreneurship	Proportion of youth and adults with information and communications technology (ICT) skills, by type of skill (4.4.1)	
4.5	4.5 By 2030, eliminate gender disparities in education and ensure equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities, indigenous peoples and children in vulnerable situations	Parity indices (female/male, rural/urban, bottom/top wealth quintile and others such as disability status, indigenous peoples and conflict affected as data become available) (SUSENAS) (4.5.1)	
4.6	4.6 By 2030, ensure that all youth and a substantial proportion of adults, both men and women, achieve literacy and numeracy	Percentage of the population in a given age group achieving at least a fixed level of proficiency in functional (a) literacy and (b) numeracy skills, by sex (4.6.1)	Recommended disaggregation: sex, location, wealth (and others where data are available)
4.7	By 2030, ensure that all learners acquire the knowledge and skills needed to promote sustainable development, including, among others, through education for	Extent to which (i) global citizenship education and (ii) education for sustainable development are mainstreamed in (a) national education policies (b) curricula (c) teacher education and (d) student assessment (4.7.1)	

4.7	sustainable development and sustainable lifestyles, human rights, gender equality, promotion of a culture of peace and non-violence, global citizenship and appreciation of cultural diversity and of culture's contribution to sustainable development		
4.a	Build and upgrade education facilities that are child, disability and gender sensitive and provide safe, non-violent, inclusive and effective learning environments for all	Proportion of schools with access to: (a) electricity; (b) the Internet for pedagogical purposes; (c) computers for pedagogical purposes; (d) adapted infrastructure and materials for students with disabilities; (e) basic drinking water; (f) single sex basic sanitation facilities; and (g) basic handwashing facilities (as per the Water, Sanitation and Hygiene for All (WASH) indicator definitions) (4.a.1)	This indicator does not measure the non-violent environment aspect of this target. This is a priority area for the Gol, and UNICEF works with the government on this issue (such as promoting positive discipline in schools program).

## SDG 5: ACHIEVE GENDER EQUALITY AND EMPOWER ALL WOMEN AND GIRLS

5.2	Eliminate all forms of violence against all women and girls in the public and private spheres, including trafficking and sexual and other types of exploitation	<p>Proportion of ever-partnered women and girls aged 15 years and older subjected to physical, sexual or psychological violence by a current or former intimate partner, in the previous 12 months, by form of violence and by age (5.2.1)</p> <p>Proportion of women and girls aged 15 years and older subjected to sexual violence by persons other than an intimate partner, in the previous 12 months, by age and place of occurrence (5.2.2)</p>	<p>These indicators cover key priorities for child marriage.</p> <p>The Government may wish to consider specifying target/indicators for child marriage in the RPJMN.</p> <p>UNICEF has collected data on these indicators through MICS in Papua and West Papua in 2011. This could be looked at to scale-up.</p>
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5.3	Eliminate all harmful practices, such as child, early and forced marriage and female genital mutilation	<p>Proportion of women aged 20-24 who were married or in a union before age 18 (SUSENAS/SDKI) (5.3.1)</p> <p>Proportion of girls and women aged 15-49 years who have undergone female genital mutilation/cutting, by age (RISKESDAS) (5.3.2)</p>	
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## SDG 6: ENSURE AVAILABILITY AND SUSTAINABLE MANAGEMENT OF WATER AND SANITATION FOR ALL

6.1	By 2030, achieve universal and equitable access to safe and affordable drinking water for all	<p>Proportion of population using safely managed drinking water services (2015 pilot in Yogyakarta, SUSENAS) (6.1.1)</p> <p>Percentage of health care facilities with basic water, sanitation and hygiene facilities (RIFASKES) (recommended as additional national indicator)</p>	<p>Important to stress and measure the “safe” drinking water as opposed to type of source, which was the focus of the MDG.</p> <p>Potential for strengthening data collection in MoH system, especially around access to sanitation and handwashing facilities</p>
6.2	By 2030, achieve access to adequate and equitable sanitation and hygiene for all and end open defecation, paying special attention to the needs of women and girls and those in vulnerable situations	<p>Percentage of population using safely managed sanitation services, including a hand-washing facility with soap and water (2015 pilot in Yogyakarta, SUSENAS and RISKEDAS) (6.2.1)</p> <p>Percentage of population practicing open defecation (SUSENAS and RISKESDAS) (recommended as additional national indicator)</p>	<p>Important to use the SDG focus definition of “safely managed” sanitation services, i.e. including faecal sludge management. Global discussions are still ongoing on final hygiene indicators, including menstrual hygiene management. Disaggregation by wealth quintile and gender are important.</p> <p>The proposed national indicator on open defecation is in line with the Government agenda 2015-2019 on universal access to water and sanitation.</p>

**SDG 8: PROMOTE SUSTAINED, INCLUSIVE AND SUSTAINABLE ECONOMIC GROWTH, FULL AND PRODUCTIVE EMPLOYMENT AND DECENT WORK FOR ALL**

8.7	Take immediate and effective measures to eradicate forced labour, end modern slavery and human trafficking and secure the prohibition and elimination of the worst forms of child labour, including recruitment and use of child soldiers, and by 2025 end child labour in all its forms	Proportion and number of children aged 5-17 years engaged in child labour, per sex and migrant status (8.7.1)	Recommend to also disaggregate by age, as well as by worst forms of child labour.
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**SDG 10: REDUCE INEQUALITY WITHIN AND AMONG COUNTRIES**

10.2	By 2030, empower and promote the social, economic and political inclusion of all, irrespective of age, sex, disability, race, ethnicity, origin, religion or economic or other status	Proportion of people living below 50 per cent of median income, by age, sex and persons with disabilities (SUSENAS) (10.2.1)	UNICEF believes that it is important that SDG monitoring has an explicit focus on the progressive reduction of inequality gaps (ratio of disadvantaged/ advantaged groups and/or the rate of change in this gap or ratio) disaggregated by age, sex, wealth, ethnicity, disability, geographic location and other characteristics relevant to national contexts.  UNICEF stands ready to support Gol to strengthen collection of income data.
10.4	Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality	Labour share of GDP, comprising wages and social protection transfers (10.4.1)	

**SDG 11: MAKE CITIES AND HUMAN SETTLEMENTS INCLUSIVE, SAFE, RESILIENT AND SUSTAINABLE**

11.b	By 2020, substantially increase the number of cities and human settlements adopting and implementing integrated policies and plans towards inclusion, resource efficiency, mitigation and adaptation to climate change,	Proportion of local governments that adopt and implement local disaster risk reduction strategies in line with the Sendai Framework for Disaster Risk Reduction 2015-2030 (11.b.1)	Recommend that this indicator is disaggregated by city rather than local government. This indicator is also part of the Sendai framework. UNICEF is supporting the intervention 'Making Child Friendly City Resilient' initiative with Ministry of Women Empowerment and Child Protection (KP3A),
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	resilience to disasters, and develop and implement, in line with the Sendai Framework for Disaster Risk Reduction 2015-2030, holistic disaster risk management at all levels		Ministry of Environment and Forestry (KLHK), and National Disaster Management Agency (BNPb).
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### SDG 13: TAKE URGENT ACTION TO COMBAT CLIMATE CHANGE AND ITS IMPACTS

13.1	Strengthen resilience and adaptive capacity to climate-related hazards and natural disasters in all countries	Number of deaths, missing and persons affected by disaster per 100,000 people (13.1.1)	This indicator is the same as 1.5.1, thus also part of the Sendai framework. It is important to disaggregate deaths/persons missing and persons affected.
13.2	Integrate climate change measures into national policies, strategies and planning	Number of countries that have communicated the establishment or operationalisation of an integrated policy/strategy/plan which increases their ability to adapt to the adverse impacts of climate change, and foster climate resilience and low greenhouse gas emissions development in a manner that does not threaten food production (including a national adaptation plan, nationally determined contribution, national communication, biennial update report or other) (13.2.1)	From Paris Declaration (COP 21)
13.3	Improve education, awareness-raising and human and institutional capacity on climate change mitigation, adaptation, impact reduction and early warning	Number of countries that have integrated mitigation, adaptation, impact reduction and early warning into primary, secondary and tertiary curricula (13.3.1)	Important that gender specification is included in this indicator. Namely, the education should equally target girls and boys.

### SDG 15: PROTECT, RESTORE AND PROMOTE SUSTAINABLE USE OF TERRESTRIAL ECOSYSTEMS, SUSTAINABLY MANAGE FORESTS, COMBAT DESERTIFICATION, AND HALT AND REVERSE LAND DEGRADATION AND HALT BIODIVERSITY LOSS

15.1	By 2020, ensure the conservation, restoration and sustainable use of terrestrial and inland freshwater ecosystems and their services, in particular forests, wetlands, mountains and drylands, in line with obligations under international agreements	Forest area as a proportion of total land area (15.1.1)	
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**SDG 16: PROMOTE PEACEFUL AND INCLUSIVE SOCIETIES FOR SUSTAINABLE DEVELOPMENT, PROVIDE ACCESS TO JUSTICE FOR ALL AND BUILD EFFECTIVE, ACCOUNTABLE AND INCLUSIVE INSTITUTIONS AT ALL LEVELS**

16.1	Significantly reduce all forms of violence and related death rates everywhere	Proportion of population subjected to physical, psychological or sexual violence within the last 12 months (SUSENAS) (16.1.3)	This indicator can be analysed by perpetrator so we can see who committed the violence (peer, teacher, other). This is commonly done in the DHS for 15-19 years and the Violence Against Children Survey does it for 13-17 years and 18-24 years.
16.2	End abuse, exploitation, trafficking and all forms of violence against and torture of children	Proportion of victims of violence in the previous 12 months who reported their victimization to competent authorities or other officially recognized conflict resolution mechanisms (16.3.1)	This is a good indicator to measure whether the system is really working for children (and great for the pilot social welfare work). However, this indicator does not seem to measure whether victims of violence receive services required.
16.9	By 2030, provide legal identity for all, including birth registration	Proportion of children under 5 years of age whose births have been registered with a civil authority, by age (SUSENAS) (16.9.1)	The Government of Indonesia is part of the regional Civil Registration and Vital Statistics (CRVS) body, and has submitted a national roadmap and action plan to accelerate progress on birth certification. This regional commitment by Indonesia requires that Indonesia consistently report progress against Target 16.9.
16.b	Promote and enforce non-discriminatory laws and policies for sustainable development	Proportion of population reporting having personally felt discriminated against or harassed in the previous 12 months on the basis of a ground of discrimination prohibited under international human rights law (16.b.1)	

**SDG 17: STRENGTHEN THE MEANS OF IMPLEMENTATION AND REVITALIZE THE GLOBAL PARTNERSHIP FOR SUSTAINABLE DEVELOPMENT**

17.8	Fully operationalize the technology bank and science, technology and innovation capacity- building mechanism for least developed countries by 2017 and enhance the use of enabling technology, in particular information and communications technology	Proportion of individuals using the Internet (SUSENAS) (17.8.1)	
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17.9	By 2030, build on existing initiatives to develop measurements of progress on sustainable development that complement gross domestic product, and support statistical capacity-building in developing countries	Dollar value of all resources made available to strengthen statistical capacity in developing countries (17.19.1)	
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