Introduction

This provincial snapshot highlights priority child-related Sustainable Development Goals (SDG) indicators, based on national household surveys and other data sources. It complements the national SDG Baseline Report on Children in Indonesia produced by BAPPENAS and UNICEF, to support monitoring and evidence-informed policy making.

The Special Region of Yogyakarta (DI Yogyakarta) is a youthful province. Its 1 million children represent 26 per cent of the total population. Two in three children live in urban areas. Increased strategic investments in children are required to fast-track achievement of the SDGs for the province.

GOAL 1 NO POVERTY

Around 169,000 children (17.7 per cent) were living below the official poverty line in 2015 (Rp 11,043 per person per day). Many more families are insecure and live on incomes that are only marginally higher. In addition, 47 per cent of children experienced deprivations in two or more non-income dimensions of poverty, with persistent disparities between urban and rural areas.1

<table>
<thead>
<tr>
<th>Per cent</th>
<th>Number</th>
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<tbody>
<tr>
<td>Population below national poverty line</td>
<td>14.9</td>
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<tr>
<td>Children &lt; 18 below national poverty line</td>
<td>17.7</td>
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<tr>
<td>Children &lt; 18 below twice the poverty line</td>
<td>58.4</td>
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Multidimensional child poverty in DI Yogyakarta

GOAL 2 ZERO HUNGER

Adopting optimal feeding practices is fundamental to a child’s survival, growth and development. Some 70 per cent of infants are exclusively breastfed for the first six months of life, which is one of the highest rates in the country.

Yet, the prevalence of malnutrition is still relatively high, both in urban and rural areas. One in 10 newborns has a low birthweight, and 27 per cent of children under five were stunted (low height for their age) in 2013.

Geographic disparities in child feeding and nutrition outcomes
Despite progress, child mortality remains a challenge. For every 1,000 live births, 18 newborn babies died in their first month of life and 30 before their fifth birthday.

Nearly all women have access to delivery care, with 99 per cent of births occurring with assistance from a skilled attendant. However, there is scope to improve the coverage of modern family planning methods, which fell short of the national average in 2015.

Well over 90 per cent of infants were vaccinated against measles and received the recommended three doses of DTP vaccines. Continued efforts are needed to sustain high immunisation coverage, including among children from the poorest households.

**Wealth disparities in maternal and child health**

**GOAL 3 GOOD HEALTH AND WELL-BEING**

**GOAL 4 QUALITY EDUCATION**

Children's school readiness can be improved through early childhood development programmes. The participation rate in organised learning among 6-year-olds was 98 per cent in 2015, with most pre-school children enrolling early in primary school.

The Special Region of Yogyakarta has achieved near-universal access to primary education. However, children from the poorest households are much less likely to complete secondary school compared with their most affluent peers.

Quality of education remains a key concern. The province is one of the best performing in the country, but only three in four primary school children achieved the minimum national benchmark in reading and a third in mathematics.

**Wealth disparities in school completion rates**

**Percentage of children attending school, by age**
**GOAL 5 GENDER EQUALITY**

In the Special Region of Yogyakarta, some 5 per cent of women aged 20–24 years were married or in union before the age of 18 in 2015, which is below the national average. The practice of child marriage predominantly affects girls in poorer households.

No representative data are available on violence against girls and women at provincial level. Evidence from a national survey indicates, however, that such violence is widespread: 28 per cent of ever-partnered women and girls experienced physical, sexual and/or psychological violence by a current or former intimate partner.

**GOAL 6 CLEAN WATER AND SANITATION**

Achieving universal access to drinking water, sanitation and hygiene is crucial to further progress in health, education and poverty eradication. Three-quarters of the population used a basic sanitation facility at home in 2015, while 2 per cent practised open defecation. The coverage of improved drinking water sources is somewhat higher, both in households and schools. However, a 2015 survey found that 67 per cent of households were consuming water contaminated with *Escherichia coli* (E.

Disparities based on wealth and place of residence are pronounced, pointing to the importance of integrating equity considerations into policy and practice. Progress is being made through the implementation of the community-based total sanitation programme.

**GOAL 16 PEACE, JUSTICE AND STRONG INSTITUTIONS**

The province has achieved high levels of birth registration. In 2015, 93 per cent of children under 5 years of age had a birth certificate. Differences based on households’ wealth status or place of residence are relatively small.

Deprivation of liberty remains a common form of punishment for juvenile offenders, in violation of the principle that this should be a measure of last resort. In the Special Region of Yogyakarta, 11 per cent of all children in detention were unsentenced, which is lower than in most other provinces.

Little or no data is available on other child protection issues, such as violence against children and trafficking.
The scorecard summarises the Special Region of Yogyakarta’s performance for a selection of SDG indicators compared to other provinces in the country. For each indicator, the graph shows the Special Region of Yogyakarta’s average value as well as the provinces with the highest and the lowest data value.

On the right side of the scorecard the Special Region of Yogyakarta’s rank for each indicator is shown, ranging from 1 for the highest performer to 34 for the lowest. Provinces are divided into four quartiles (blue for the highest ranking and red/orange for the lowest ranking provinces).

**Notes**

**Sources:** National household surveys (SUSENAS, RISKESDAS, IDHS); administrative data (Ministry of Education and Culture, Ministry of Health); and Water Quality Survey in the Special Region of Yogyakarta (Government of Indonesia/UNICEF). Detailed information on data sources and indicator definitions is available online at: https://sdg4children.or.id

1. Multidimensional child poverty is defined as children who experience deprivations in at least two of the following dimensions: food and nutrition; health; education; housing; water and sanitation; and protection.

2. Indonesia does not yet have nationally representative data on water quality that can be used to calculate the SDG indicator on the use of safely managed drinking water services. Instead, a nationally-defined proxy measure is used to set a baseline for SDG 6.

For more information please email jakarta@unicef.org