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.

East Nusa Tenggara, referred to as NTT, is a youthful province. Its 2.2 million children represent 42 per cent of the entire population. Eight in 10 children live in rural areas. Increased strategic investments in children are required to fast-track achievement of the SDGs for the province.

GOAL 1  NO POVERTY

Close to 600,000 children (27 per cent) were living below the official poverty line in 2015 (Rp 9,793 per person per day). Many more families are insecure and live on incomes that are only marginally higher. In addition, nearly nine in 10 children experienced deprivations in two or more non-income dimensions of poverty, with higher levels of deprivations in rural areas.1

<table>
<thead>
<tr>
<th>Per cent</th>
<th>Number (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population below national poverty line</td>
<td>22.6</td>
</tr>
<tr>
<td>Children &lt; 18 below national poverty line</td>
<td>27.1</td>
</tr>
<tr>
<td>Children &lt; 18 below twice the poverty line</td>
<td>73.9</td>
</tr>
</tbody>
</table>

GOAL 2  ZERO HUNGER

Adopting optimal feeding practices is fundamental to a child’s survival, growth and development. With an exclusive breastfeeding rate of 57 per cent, NTT is the third best performing province in the country.

Yet child malnutrition is widespread, even among those in more affluent households. Around 17 per cent of newborns have a low birthweight, and more than half of children under 5 were stunted (low height for their age) in 2013. Stunting is prevalent in both wealth quintiles.

Wealth disparities in child feeding and nutrition

<table>
<thead>
<tr>
<th>Wealth indicator</th>
<th>Richest quintile</th>
<th>Poorest quintile</th>
<th>National average</th>
<th>East Nusa Tenggara</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low birthweight</td>
<td>17</td>
<td>57</td>
<td>52</td>
<td>8</td>
</tr>
</tbody>
</table>
Despite progress, child mortality remains high. For every 1,000 live births, 26 newborn babies died in their first month of life and 58 before their fifth birthday. Improving women’s access to sexual and reproductive health services is critical. Only half of women and adolescents aged 15–49 years had their need for family planning satisfied with modern methods in 2015, and three in 10 births occurred without assistance from a skilled attendant. Except for family planning methods, access to health services for mother and children is lower in rural areas. NTT’s coverage of health insurance and routine immunisation is higher than or on par with the national average.

**Geographic disparities in maternal and child health**

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

**GOAL 4 QUALITY EDUCATION**

Children’s school readiness, cognitive development and growth can be improved through early childhood development programmes. The participation rate in organised learning among 6-year-olds was 93 per cent in 2015, though many pre-school children are already in primary school. NTT has achieved near-universal access to primary education. However, children from the poorest households are much less likely to attend and complete secondary school compared with their more affluent peers. Quality of education remains a key concern. Only half of primary school children achieved the minimum national benchmark in reading and a quarter in mathematics.
The practice of child marriage is declining, although the practice persists. Some 9 per cent of women aged 20–24 years were married or in union before the age of 18 in 2015, below the national average of 12 per cent. Levels of child marriage are highest among girls from the poorest 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.

Improving levels of birth registration is critical: only one in three children under 5 years of age had a birth certificate in 2015. There are large differences between urban and rural areas and based on households’ wealth status, due to financial and supply-side barriers.

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 NTT, however, only 1 per cent of all children in detention were unsentenced, making it the second best performing province on this measure. Little or no data is available on other child protection issues, such as violence against children and trafficking.

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.

Wealth disparities in child marriage

Wealth disparities in WASH

Wealth disparities in birth registration
The scorecard summarises NTT’s performance for a selection of SDG indicators compared to other provinces in the country. For each indicator, the graph shows NTT’s score as well as the best and the least performing province.

On the right side of the scorecard the province’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:** All data is taken from national household surveys (SUSENAS, RISKESDAS, IDHS) and administrative data (Ministry of Education and Culture, Ministry of Health). Further indicator definitions and data source information are available online at: [https://sdg4children.or.id](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.

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