

A SNAPSHOT: SDGS AND CHILDREN IN INDONESIA

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SUSTAINABLE DEVELOPMENT BEGINS WITH CHILDREN

During the UN General Assembly in 2015, **leaders from 193 countries made a global promise:** Over the next 15 years they would strive to make the world a better place. The 17 Sustainable Development Goals (SDGs) they agreed on address the main challenges we are facing today, including poverty and inequity, hunger and disease, violence and climate change. Agenda 2030 shines a laser focus on children, and puts a strong emphasis on equity: the development goals are only reached if they are achieved for all children, everywhere. Investments in early interventions will take advantage of crucial phases of brain development and help to ensure that all children can develop to their full potential, and support the growth of a prosperous society.

The well-being of children is an important marker of progress towards the attainment of the SDGs. Since they are not always visible in data and policies, dedicated efforts are required to make sure that no child is left behind in the implementation, monitoring and reporting of the SDG agenda.

Indonesia has already seen impressive progress towards the SDGs. As a middle-income country and a frontrunner on the SDGs, the Government of Indonesia and UNICEF have worked together to identify those **SDG targets and indicators that are most important for children in Indonesia.** The majority of these priority targets are already captured in the Government's SDG planning and monitoring.

This publication provides a snapshot of the current status of SDGs for children in Indonesia.

Disclaimer:

UNICEF developed this booklet with data on priority SDG targets and indicators on children in Indonesia. The data comes from official national and international data sources. However, these data do not represent official Government of Indonesia data on SDGs

1
NO
POVERTY

NO CHILD SHOULD LIVE IN POVERTY

End poverty in all its forms everywhere



13% OF CHILDREN LIVE **BELOW THE NATIONAL POVERTY LINE** OF APPROXIMATELY IDR 10,000 PER DAY

57% OF CHILDREN LIVE **BELOW TWICE THE NATIONAL POVERTY LINE**

EQUITY MATTERS:

35%

OF CHILDREN LIVE BELOW THE NATIONAL POVERTY LINE IN **PAPUA**

WHAT NEEDS TO BE DONE?

Reduce **child poverty** and **vulnerability**

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 1?

- Ensure all children benefit from high quality social protection efforts
- Provide unconditional cash transfers for all children in Indonesia
- Generate quality data and analysis on monetary and multidimensional child poverty to inform policy and action
- Ensure access to quality health care, education and social services for children, including universal health care (UHC)

2
ZERO
HUNGER

NO CHILD SHOULD BE MALNOURISHED

End hunger, achieve food security and improved nutrition and promote sustainable agriculture

37%

OF CHILDREN ARE CHRONICALLY MALNOURISHED (**STUNTED**)

12% OF CHILDREN ARE ACUTELY MALNOURISHED (**WASTING**)

12% OF CHILDREN ARE **OVERWEIGHT**

18% OF GIRLS AND WOMEN AGED 15-24 YEARS HAVE **ANAEMIA**

ONLY **42%** OF INFANTS UNDER 6 MONTHS OF AGE ARE **EXCLUSIVELY BREASTFED**

EQUITY MATTERS:

IN **15 PROVINCES**, MORE THAN

40%

OF CHILDREN ARE STUNTED

WHAT NEEDS TO BE DONE?

- Reduce **child malnutrition**, especially stunting, wasting and overweight
- Promote **exclusive breastfeeding** of infants under 6 months of age
- **Feed the right foods** – in quantity and quality – to children from 6 to 24 months to ensure optimal growth and development
- Reduce prevalence of **anaemia** in women of reproductive age

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 2?

- Accelerate the roll-out of the Scaling Up Nutrition (SUN) Movement everywhere in Indonesia. The SUN movement focuses on nutrition during the first 1,000 days of life – starting from the moment a mother gets pregnant until the child turns two years old
- Scale-up successful models of Infant and Young Child Feeding and the Community-based Management of Acute Malnutrition (CMAM)
- Generate evidence to develop integrated approaches for WASH, early stimulation and learning, and nutrition programmes to reduce stunting and improve children's health
- Support the amendments to existing laws and regulations that are required to protect and promote breastfeeding by prohibiting all marketing of breastmilk substitutes (BMS) up to the age of three years
- Mainstream adolescent nutrition into relevant health sector plans, strategies and policies and develop programme guidance to support scale-up at sub-national level

3
GOOD
HEALTH

NO MOTHER OR CHILD SHOULD DIE OF PREVENTABLE CAUSES

Ensure healthy lives and promote well-being for all at all ages

13%

OF BIRTHS ARE **NOT ATTENDED** BY A **SKILLED HEALTH WORKER**

147,000 CHILDREN UNDER 5 YEARS **DIE EVERY YEAR**



1 OUT OF 4 INDONESIANS **DO NOT HAVE HEALTH INSURANCE**

MORE THAN 15,000 WOMEN **DIE EVERY YEAR** DUE TO COMPLICATIONS RELATED TO PREGNANCY AND CHILDBIRTH

15,000 ADOLESCENTS (15–19 YEARS) WERE **NEWLY INFECTED WITH HIV** IN 2014

EQUITY MATTERS:
AMONG THE POOREST POPULATION

32%

OF BIRTHS ARE **NOT ATTENDED** BY A **SKILLED HEALTH WORKER**



WHAT NEEDS TO BE DONE?

- Protect all children from **vaccine-preventable diseases**
- Reduce **maternal mortality** and end **preventable deaths of newborns and children under 5 years**
- Reduce impact of **air pollution** on children's health

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 3?

- Develop innovative strategies to monitor the delivery of essential interventions for vulnerable populations in real time, including in urban slums and remote rural areas
- Support families, especially in poor and rural areas, to access health insurance with the aim of achieving universal health coverage (UHC); and to advocate for increased spending on health to at least 3% of GDP
- Develop, evaluate and scale-up approaches to eliminate malaria, strengthen newborn care, and improve access to safe deliveries in remote areas. For example, in the cluster islands of the Maluku
- Study the impact of forest fires and related air pollution ('haze') on child health, to inform better support to affected communities by health service providers

4
QUALITY
EDUCATION

EVERY CHILD SHOULD BENEFIT FROM EFFECTIVE AND INCLUSIVE LEARNING ENVIRONMENTS

Ensure inclusive and equitable quality education and promote lifelong learning opportunities for all

30%

OF CHILDREN DO NOT BENEFIT FROM **EARLY CHILDHOOD EDUCATION**

55% OF CHILDREN AGED 15 YEARS ARE **LOW ACHIEVERS IN READING** AND **69%** ARE **LOW ACHIEVERS IN MATH**

4.5 MILLION CHILDREN AND ADOLESCENTS AGED 7-18 ARE **OUT OF SCHOOL**

1 OUT OF 3 SCHOOLS **DO NOT HAVE SEPARATED TOILETS** FOR GIRLS AND BOYS



EQUITY MATTERS:

67%

OF PRIMARY AND SECONDARY SCHOOL AGE **CHILDREN WITH DISABILITIES** ARE OUT OF SCHOOL

WHAT NEEDS TO BE DONE?

- Improve the **quality and learning outcomes** of education
- Improve access to quality **early childhood development, care and pre-primary education**
- **Reduce disparities** in access to education at all levels
- Ensure that **education facilities** are safe, non-violent and inclusive

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 4?

- Strengthen capacity of teachers and government officials to deliver and manage effective teaching and learning practice in the classroom for improved learning, especially in early grade literacy
- Develop and expand quality community-based early childhood development services to reach all children aged 0-6 years old
- Develop and implement effective strategies to address barriers to education for all girls and boys, particularly children and adolescents with disabilities, living in rural/remote areas, and from poor households
- Provide all schools with access to safe water; functional, well maintained and sex-segregated toilets; and handwashing facilities with water and soap
- Ensure all schools are healthy, safe and gender-responsive through programmes such as life skill education, menstrual health management, positive discipline and disaster risk reduction
- Implement the national policy of 12 years of free and compulsory education for all girls and boys

5
GENDER
EQUALITY



EVERY CHILD SHOULD HAVE EQUAL ACCESS TO OPPORTUNITIES, REGARDLESS OF GENDER

Achieve gender equality and empower all women and girls

AROUND

1 IN 4

WOMEN WERE MARRIED BEFORE AGE 18

321,752

CASES OF VIOLENCE AGAINST WOMEN AND GIRLS WERE REPORTED IN 2015

EQUITY MATTERS:

IN WEST SULAWESI,

1 OUT OF 3

WOMEN WERE MARRIED BEFORE THE AGE OF 18



MORE THAN **3,000 GIRLS** UNDER 18 ARE MARRIED EVERY DAY

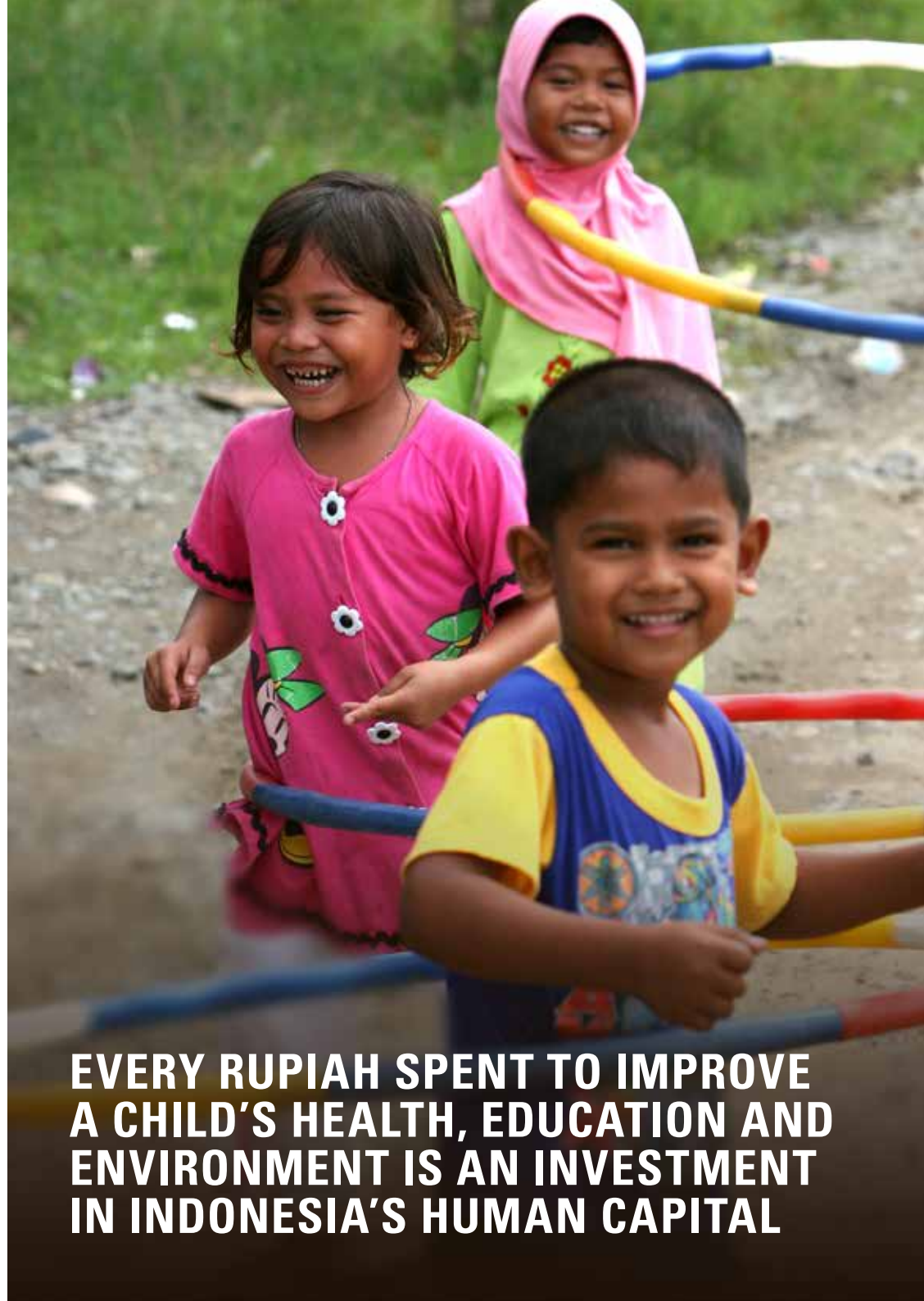


WHAT NEEDS TO BE DONE?

- Eliminate harmful practices, such as **child marriage**
- Eliminate all forms of **violence** against all women and girls
- End all forms of **discrimination** against all women and girls

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 5?

- Support girls to make informed and empowered decisions affecting their lives
- Invest in partnerships with religious leaders, communities, families, men and boys to promote positive gender norms and to end harmful practices, including child marriage
- Ensure 12 years free and compulsory education for all girls and boys. Evidence shows that education is girls' best protection from marriage
- Implement unconditional social protection programmes such as child grants to eliminate household poverty. Evidence shows that poverty is a key driver of child marriage



EVERY RUPIAH SPENT TO IMPROVE A CHILD'S HEALTH, EDUCATION AND ENVIRONMENT IS AN INVESTMENT IN INDONESIA'S HUMAN CAPITAL

6 CLEAN WATER AND SANITATION



EVERY CHILD SHOULD HAVE ACCESS TO CLEAN WATER AND SANITATION

Ensure availability and sustainable management of water and sanitation for all

1 IN 8 HOUSEHOLDS DO NOT HAVE ACCESS TO SAFE DRINKING WATER SOURCES

2 OUT OF 3 DRINKING WATER SAMPLES TESTED IN YOGYAKARTA PROVINCE SHOWED SIGNS OF **FAECAL CONTAMINATION** (detection of *E. Coli*)

20% OF INDONESIANS DEFECATE IN THE OPEN

EQUITY MATTERS:

IN RURAL AREAS,
29%

OF INDONESIANS DEFECATE IN THE OPEN, COMPARED TO **13% IN URBAN AREAS**



WHAT NEEDS TO BE DONE?

- Ensure universal and equitable access to safe drinking water and **adequate sanitation and hygiene for all**
- Improve **water quality** by addressing pollution through eliminating dumping and minimizing release of hazardous chemicals and materials, and reducing untreated wastewater
- Reduce percentage of population practicing **open defecation**

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 6?

- Accelerate the national sanitation programme on community-led total sanitation to prevent faecal oral disease transmission
- Invest in good sanitation and safe water to reduce stunting as children need a clean environment to grow and develop fully
- Strong intra-governmental collaboration and with communities to ensure safe water. Water safety plans developed by this type of collaboration can identify risks to water quality and then act on them
- Establish innovative partnerships, for example to leverage resources from Zakat and support from mosque volunteers to help communities strengthen WASH services

13 CLIMATE ACTION



NO CHILD SHOULD SUFFER FROM THE EFFECTS OF CLIMATE CHANGE AND ENVIRONMENTAL DEGRADATION

Take urgent action to combat climate change and its impacts

1 MILLION

INDONESIANS WERE AFFECTED BY **NATURAL DISASTERS** IN 2015



309 EDUCATIONAL FACILITIES WERE **DAMAGED** BY NATURAL DISASTERS IN 2015

EQUITY MATTERS:

IN ACEH,

1 OUT OF 25

PEOPLE WERE AFFECTED BY NATURAL DISASTERS IN 2015



WHAT NEEDS TO BE DONE?

- Strengthen children and their communities' **resilience** to climate-related hazards and natural disasters
- Promote **participatory approaches, involving girls and boys**, to climate change mitigation and prevention
- **Integrate child-sensitive climate change measures** into national policies, strategies and planning
- Improve **education and awareness-raising** on climate change mitigation, adaptation, impact reduction and early warning

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 13?

- Prioritize Climate Change Adaptation and Disaster Risk Reduction for children and women at national and sub-national levels, including capacity development for strengthening resilience, humanitarian preparedness, response and recovery through capacity development
- Identify and address different risks from natural hazards faced by girls and boys through participatory approaches to provide safer and more resilient environments
- Sensitize children and youth on the impact of climate change through education, awareness raising and training
- Put in place measures to protect children who have been displaced, have migrated or are refugees as a result of climate change or climate-related impacts

16

PEACE AND JUSTICE



NO CHILD SHOULD LIVE IN FEAR

Promote peaceful and inclusive societies for sustainable development, provide access to justice for all and build effective, accountable and inclusive institutions at all levels

21% OF CHILDREN AGED 13-17 REPORT THAT THEY HAVE BEEN **BULLIED IN SCHOOL**



2,224 CHILDREN WERE **IN DETENTION** AS OF JANUARY 2016

27% OF CHILDREN AGED 0-4 YEARS **DO NOT HAVE THEIR BIRTH REGISTERED**



EQUITY MATTERS:

IN PAPUA,

62%



OF CHILDREN AGED 0-4 YEARS DO NOT HAVE THEIR BIRTH REGISTERED

WHAT NEEDS TO BE DONE?

- Reduce **all forms of violence** against children and women everywhere, including in schools, at home and in public spaces
- **Promote detention as a last resort** and provide **access to justice** for all children in conflict with the law
- **Provide free birth registration** for all children

WHAT CAN BE DONE TO ACCELERATE PROGRESS TOWARDS THE ACHIEVEMENT OF SDG 16?

- Implement the National Strategy on the Elimination of Violence against Children (2016-2020) and document and disseminate good practices in preventing and responding to violence against children
- Collect reliable data and evidence related to violence against children, including through a nationally representative survey on this issue as well as other quality research
- Promote services for early detection, prevention and response to violence against children
- Invest in prevention programmes with the engagement of teachers, parents, and children to address bullying and corporal punishment in all schools
- Scale-up birth registration models composed of amended regulations to make birth registration more accessible particularly for remote and vulnerable communities
- Strengthen monitoring of the juvenile justice system to ensure that the due process of law is implemented and that all children in contact with the law are protected

INDONESIA'S 83 MILLION CHILDREN ARE CRITICAL CHANGE MAKERS IN THEIR COMMUNITIES, AND HAVE THE MOST TO GAIN – OR LOSE – IN MAKING THE SDGs A REALITY

References:

- SDG 1:** Statistics Indonesia (BPS), SUSENAS (2013 and 2016)
- SDG 2:** Ministry of Health (MOH), RISKESDAS (2013); BPS, Indonesia Demographic Health Survey (2012)
- SDG 3:** SUPAS (2015); BPS, Indonesia Demographic Health Survey (2012); UNAIDS, UNICEF, and WHO, Global AIDS Response Progress Reporting (2014); UNICEF, A Promise Renewed Report (2015)
- SDG 4:** Ministry of Education and Culture (MOEC), Indonesia Educational Statistics in Brief (2015/2016); MOEC, Data Pokok Pendidikan (2016); International Association for the Evaluation of Educational Achievement (IEA), Programme for International Student Assessment (PISA) (2015); BPS, SUSENAS (2015); and Towards Inclusive Education: The impact of disability on school attendance in developing countries, Innocenti Working Paper No.2016-03, UNICEF Office of Research, Florence.
- SDG 5:** BPS, SUSENAS (2012; 2015)*; National Commission on Violence against Women, Fact Sheet Annual Notes (2016); Note: the proportion of women married before age 18 was calculated from married women aged 20-24
- SDG 6:** WHO/UNICEF, Joint Monitoring Programme for Water Supply and Sanitation (2015); BPS, Yogyakarta Water Quality Survey (2015)
- SDG 13:** BNPB, Data and Disaster Information Indonesia (2015)
- SDG 16:** MOH, Global School-Based Student Health Survey (2015); note: the indicator on school bullying is from students who reported to be bullied in school on one or more days during the past 30 days

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