United Nations Children’s Fund
Executive Board
Second regular session 2015
8-10 September 2015
Item 4 (a) of the provisional agenda*

Country programme document

Indonesia

Summary

The country programme document (CPD) for Indonesia is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of $26,275,000 from regular resources, subject to the availability of funds, and $119,747,000 in other resources, subject to the availability of specific-purpose contributions, for the period 2016 to 2020.

In accordance with Executive Board decision 2014/1, the present document reflects comments made by Executive Board members on the draft CPD that was shared 12 weeks before the second regular session of 2015.
Programme rationale

1. This country programme is being developed at an opportune moment. The timely confluence of many factors in the external environment allows UNICEF to further its engagement as the strategic partner of choice for the children of Indonesia to reach their full potential. The Government’s vision to improve people productivity and international competitiveness as a means to sustained economic growth requires intensive investment in the survival and well-being of the country’s 81 million children (Census, 2010).

2. The recent launch of the Medium Term National Development Plan (RPJMN 2015-2019) has coincided with greater regional integration through the Association of Southeast Asian Nations (ASEAN) Economic Community, and a bolder global development agenda elaborated through the Sustainable Development Goals. Coupled with growing economic clout and strategic geopolitical positioning, this is now the country’s moment. UNICEF cooperation will help the children of Indonesia to thrive in this environment.

3. Aside from the Asian financial crisis in the late-1990s, Indonesia has enjoyed sustained economic growth of 4 per cent to 10 per cent per year for several decades. However, these gains mask considerable disparities. Rising inequality reflects rapid urbanization. Half of the population now lives in urban areas (National Socio-Economic Survey, SUSENAS, 2013). This has given rise to new risks and challenges, especially urban child poverty and children left behind. A narrow income distribution and high level of informal labour suggest there are many children at risk of falling into poverty; current social protection measures are inadequate.

4. Indonesia is a vast and diverse archipelago with challenges in transportation and access that have led the Government to prioritize “development from the periphery.” A decentralized government structure, with a large share of public resources directly allocated to districts, each with its own planning, budgeting and governance structures, adds to the complexity. A 2014 evaluation concluded that the current programme has not yet taken full advantage of the potential that decentralization offers for children.

5. Indonesia is one of the world’s most disaster-prone countries. Around 90 per cent of disasters result from hydro-meteorological hazards. These risks are multiplied by the potential impacts of climate change. An increasing number of small- and medium-sized disasters continue to pose threats to children. Notwithstanding growing commitment by the Government to disaster risk reduction (DRR) in the RPJMN, there is minimal attention paid to reducing vulnerability and increasing participation of children and adolescents to be more resilient to shocks.

6. Inequities persist despite rapid economic gains and progress in key health indicators for children has slowed. Under-five mortality shows gradual improvement at 40 deaths per 1,000 live births, yet some eastern provinces show much higher rates (Demographic and Health Survey (DHS) 2012). National stunting rates remain high at 37 per cent (Basic Health Research Survey (RISKESDAS) 2013). Approximately 55 million people nationwide (22 per cent) practise open defecation (World Health

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1 World Bank, World Development Indicators.
3 Also estimated as 32 million, using a different definition (RISKESDAS, 2013).
Organization (WHO)/UNICEF Joint Monitoring Programme (JMP) 2014), which contributes to the high stunting burden. Maternal mortality has increased to 359 deaths per 100,000 live births (DHS, 2012), sparking national debate.

7. There has been a rapid increase in the number of HIV/AIDS cases since 2000, with an estimated prevalence among 15-49-year-olds at 0.5 per cent (Joint United Nations Programme on HIV/AIDS, 2013). Efforts to prevent and respond to HIV/AIDS are accelerating, but Indonesia continues to experience a concentrated epidemic composed of multiple parallel and intertwined epidemics in different subpopulations.

8. Unequal economic development has contributed to the “double burden” of malnutrition, which is characterized by a high prevalence of both overnutrition and undernutrition. Further, non-communicable diseases now contribute to 58 per cent of all-cause mortality and morbidity (Institute for Health Metrics and Evaluation, 2013).

9. Challenges in the enabling environment for children include national policies and strategies that are not aligned with global standards, and not uniformly implemented countrywide. Increased government investment in universal health care (UHC) is encouraging, but should prioritize those with the greatest need.

10. In education, while Indonesia has made impressive gains, about 6.8 million school-age children are still out of school (SUSENAS, 2012). Furthermore, about 7 million children aged 3-6 years do not have access to any form of organized early care and education services (Ministry of Education and Culture, 2013).

11. The RPJMN 2015-2019 has set goals to improve equity and the quality of education at all levels. The key government priority is to scale up compulsory education from the current provision of 9 years to 12 years. The Government has allocated a substantial budget for education and enacted relevant regulations. Still, children aged 5-6 years from the poorest quintile are 40 per cent more likely not to have access to education services than children in the richest quintile. By age 18, 78 per cent of students from the poorest quintile have dropped out of school (SUSENAS, 2012). Improving school readiness through early childhood education programmes is crucial for improving quality and equity in education. Secondary education needs to focus on social inclusion, tolerance and adolescent empowerment.

12. Violence against children is pervasive: Forty per cent of students aged 13-15 years report having been physically attacked at school in the past 12 months. Few children who have experienced violence seek help. Reliable and updated data on emotional violence, sexual violence and neglect are unavailable. Gender inequality and practices that discriminate against girls have resulted in high levels of child marriage (17 per cent for girls, DHS, 2012) and other harmful practices. Some studies indicate that both children and adults find violent forms of punishment acceptable. Forty-eight per cent of girls and young women aged 15-19 years believe domestic violence is justifiable (DHS, 2012).

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5 Knowledge, Attitudes and Behaviours on Violence against Children: South Sulawesi Research Study, University of Indonesia, 2013.
13. The 2002 Child Protection Law, amended in 2014, and the RPJMN articulate an ambitious agenda for child protection. Despite these efforts, there are still significant legislative and policy gaps. Laws can be contradictory and policies tend to reinforce gender inequalities and discrimination.6

14. Complex public administration procedures and the lack of a mandated authority for child protection impede coordination and effective delivery of services for marginalized children.7 Budgets are fragmented and laws protecting children are seldom enforced. Social work practice is limited to ad hoc remedial interventions, rather than comprehensive approaches.8 It is estimated that more than 500,000 children are living in institutional care.9

15. Active involvement by Indonesia in the global Post-2015 Development Agenda discussions indicates strong recognition for the role of data in monitoring progress. A complex and decentralized environment contributes to data gaps that need innovative approaches to strengthen quality and timeliness. Numerous studies indicate harmful sociocultural norms that lead to poor behaviours and practices that influence child rights.

16. Despite these challenges, there are opportunities. The media environment continues to be vibrant and open. While television is still dominant, high rates of Internet and social media use, together with universal ownership of cell phones (1.2 subscriptions per person; United Nations, 2014), offer possibilities for communicating directly with communities and service providers in remote areas. Meanwhile, vigilance is required on potential cybercrime against children.

17. A nascent philanthropic sector is emerging in Indonesia, which is home to 74 million “middle class and affluent” consumers. That demographic is set to rise to 141 million by 2030 (Boston Consulting Group, 2013), and points to significant opportunities for mobilizing private sector resources in the new country programme.

Programme priorities and partnerships

18. Equity is at the core of the country programme, which aims to support Indonesia in the realization of rights for all children, as enshrined in the Convention on the Rights of the Child and articulated in the RPJMN. The programme will support Indonesia to monitor and measure progress against these rights via the child-focused Sustainable Development Goals, with an emphasis on the most excluded children. Through a combination of national and subnational engagement that employs catalytic funding, the programme will facilitate knowledge-generation and sharing, and provide capacity development and policy advice in line with the United Nations Partnership for Development Framework (UNPDF). In particular, support will focus on upstream modelling and replication through capacity-development at national and local levels in planning, evidence generation,

7 Governance Indicator Framework Assessment for Indonesia, UNICEF EAPRO, 2014.
8 Griffiths University, Australia for UNICEF Indonesia, 2014.
9 A study on situations that affect family separation and the lives of children in and out of family care, University of Indonesia, UNICEF, Ministry of National Development Planning, and Department of Foreign Affairs and Trade, Australia, 2014.
operations research, evaluation and knowledge management, reflecting the use of limited resources for maximum impact.

19. As the new country programme coincides with the initiation of the Sustainable Development Goals, UNICEF will prioritize support to monitoring systems. Given the core equity agenda of UNICEF and the call of the United Nations for a “data revolution” to monitor the Goals for all population groups, UNICEF will support the systematic collection and use of disaggregated data. In doing so, the programme will build on advances made in monitoring the Millennium Development Goals.

20. Foremost as an implementation strategy is catalysing support for strategic alliances and social movements for the realization of child rights, to coalesce into a national coalition for the children of Indonesia (“the Coalition”). The Coalition will be built on existing national and subnational partnership frameworks to support a National Agenda for Children that will articulate the government’s commitment to child rights. It is an aspirational approach, yet one that is achievable given current momentum.

21. As Indonesia grows and develops, new and evolving partnerships for children remain critical. The country’s leading role in ASEAN and its position as a growing global player present increased opportunities for South-South cooperation. In order to leverage additional financial resources for UNICEF programmes in Indonesia and globally, UNICEF will strengthen partnerships with the private sector, including individual donors and corporate partners. Media will play a critical role in the Coalition to support programme advocacy. Social media and innovative platforms such as U-Report will provide children with opportunities to express their concerns and ideas.

22. The Government of Indonesia will remain the primary partner in the Coalition. Existing and new partnerships with United Nations agencies, bilateral and multilateral donors, international financial institutions, private sector and civil society will all be pursued. Strategies for evidence generation, knowledge partnerships and data collection will be key to supporting the Coalition as the normative mandate of UNICEF is bolstered through an active research agenda.

23. UNICEF cooperation in Indonesia will focus on developing national capacities to fulfil and claim rights for children. Efforts in evidence-based communication for development, social mobilization, advocacy, policy advice and strengthening of data systems will be central to this approach.

24. UNICEF will embrace opportunities to contribute to the transformation of gender roles in support of gender equality and in line with the Gender Action Plan 2014-2017. Systematically addressing the gender dimensions of child rights violations (such as child marriage) will be a key theme.

25. Recent Concluding Observations of the United Nations Committee on the Rights of the Child\textsuperscript{10} provide important reminders of the child rights violations that deserve special attention, and are fully integrated in the programme.

26. The programme will maintain effective child-centred DRR through multisectoral links with policy, social protection and other risk management approaches aimed to

\textsuperscript{10} Committee on the Rights of the Child, Concluding Observations on the combined third and fourth periodic reports of Indonesia, \textit{CRC/C/IDN/CO/3-4}, 2014.
strengthen resilience. UNICEF will support policies and regulations that consider the vulnerability of children living in risk-prone areas.

**Child survival and development**

27. The **Child Survival and Development (CSD) Programme** will explore innovative ways of addressing the lack of progress in key health, nutrition, water, sanitation and hygiene (WASH) and HIV/AIDS indicators. Engagement will be expanded incrementally into emerging areas like non-communicable diseases, adolescent health and urban health.

28. UNICEF cooperation provides high-level technical advice for policy formulation and resource mobilization, develops capacity in evidence generation and scale up of innovations, and supports strengthened monitoring systems. Because of its field presence, UNICEF is well placed to support context-specific analysis, risk assessment and planning for locally driven solutions, using both government and community resources. The theory of change therefore involves the use of data-driven evidence and innovative models to influence local policies, planning and resource allocations for accelerating results for the most disadvantaged children. Monitoring equity and programme quality provides a feedback loop and enhances local accountability for results.

29. The programme will continue to support systems to deliver quality maternal, neonatal and child health services along the continuum of care from pregnancy to adolescence. This will be complemented by support to behaviour change and demand-side activities to enhance service utilization. For communicable diseases, there will be continued engagement in improving immunization systems, building capacity for the introduction of new vaccines, and supporting the scale up of HIV/AIDS, syphilis and malaria prevention and treatment services. UNICEF will focus on maternal nutrition, infant and young child feeding practices and behaviours, severe acute malnutrition, and micronutrient and food fortification, and will expand focus to address overnutrition and adolescent nutrition. Support for community-led sanitation, WASH in Schools and hygiene promotion will continue, along with support to national programmes and coordination mechanisms for WASH in rural and urban areas. Addressing social norms related to open defecation will support national efforts to achieve universal sanitation coverage. Through policy advocacy and socialization, the programme will support an enabling environment for drinking water and sanitation.

30. Programme integration will be strengthened through deliberate cross-sectoral linkages. Capacity development at province, district and health centre level, and strong engagement with the roll-out of UHC will improve planning, resource allocation and monitoring for equitable health, nutrition and WASH services.

31. UNICEF will leverage its strong partnerships and convening role to continue to support an integrated approach to address broader health system bottlenecks. For example, as the recently appointed donor convener for the Scaling Up Nutrition (SUN) Movement, the organization will promote a multi-stakeholder and multisectoral approach to address malnutrition.
Education for early childhood and adolescent development

32. While the Government is addressing cost barriers to schooling by scaling up compulsory education to 12 years and providing cash transfers to an estimated 20 million school-age children through the Indonesia Smart Card, the Education for Early Childhood and Adolescent Development Programme will support this agenda by addressing barriers to access and quality of early learning and school-based education. Key programme priorities will be quality community-based early learning services, improved learning outcomes in early primary grades, development of models for the transition of adolescents to secondary education, and relevant education for adolescents to face challenges, including violence, child marriage and early pregnancy.

33. Culturally and developmentally appropriate learning materials will help to empower children as learners, while on-the-job training, networking and supportive communities will empower teachers as professionals. Improved accountability of schools will empower parents as key stakeholders, and appropriate policies and tools for quality assurance will empower educators to fulfil their duties towards children’s right to an education. Key strategies include evidence generation, knowledge-sharing, capacity building and innovation. One lesson learned from past cooperation has been that, in the highly decentralized context of Indonesia, the promulgation of national policies and programmes is insufficient to bring about local level changes. The programme will therefore focus on developing an enabling environment and supporting implementation capacity at the local level.

34. The geographic focus for modelling will be the remote and rural districts of eastern Indonesia for early childhood and primary education programmes, as well as selected districts from other parts of the country with low enrolment rates in lower secondary education. Findings will inform scale up in other parts of Indonesia.

Child protection

35. The Child Protection Programme will continue to focus on building the national child protection system to prevent and respond to violence, abuse, neglect and exploitation. Taking note of a recent evaluation, UNICEF will aim for change at three levels. First, increasing institutional governance by implementing a comprehensive framework for measuring accountability to children. Second, modelling secondary and tertiary approaches that strengthen the integration of social protection to social welfare service delivery that can be replicated across the country. Finally, modelling primary prevention partnerships at family and community levels that foster a change in social norms that perpetuate violence against children, particularly girls.

36. Technical assistance to the Government will be maintained in four areas: generating reliable evidence to inform advocacy; promoting legislative and policy reform for alignment with the Convention on the Rights of the Child the Convention on the Elimination of All Forms of Discrimination against Women and other global commitments; developing a robust government-led capacity development agenda for child protection professionals; and screening and tracking budgets for enhanced public financial management for children.
37. A range of ministries will be engaged to strengthen the institutions responsible for service delivery to the most at-risk and vulnerable children. Collaboration with academic institutions will generate evidence on child protection. UNICEF will work with children and adolescents to disseminate laws and policies, promote service accountability and engage innovative platforms for participation in policy reform.

38. Persistent attitudes and behaviours that perpetuate violence against girls and boys will be tackled by modelling selected approaches to social norms. In addition, noting the particular gender dimensions of child protection, UNICEF will coordinate a child marriage prevention initiative by building on determinant analysis.

39. The programme will work closely with the UNICEF Office of Research and academics to bring cutting-edge global expertise to Indonesia. Key strategies are innovation, public-private partnerships, communication for development and working with children and adolescents as champions of their right to protection. This will give prominence to largely ‘invisible’ child rights violations in the national development agenda and prompt open public debate on key issues, including migrant and refugee children, child labour, institutionalization of children, child marriage and birth registration.

Social policy

40. The Social Policy Programme will strengthen the social protection system to reduce child poverty. Conditional cash transfers are now channelled towards the poorest families for the alleviation, rather than the reduction, of poverty. Evidence shows that providing more broad-based child grants from birth can mitigate poverty-related impacts on child development.

41. Child grants are only one element in a child poverty reduction strategy that will have to address access to and quality of services, especially for excluded children. By 2020, UNICEF will support the adoption of a reformed cash transfer system and a related implementation strategy.

42. This programme will focus on building the evidence base for policy dialogue, including research on child poverty and social protection, and modelling alternative policies and funding scenarios. The programme will support costing of child-sensitive social protection models, identification of fiscal space/budget sources, formulation of an integrated child-sensitive social protection policy and legislative reform. Strategic partnerships will be bolstered with civil society, including academia, for evidence generation and policy advice. The programme will develop a proof of concept for district-level scale up.

43. Additional focus will be placed on the generation of disaggregated data and knowledge for enhanced public transparency, accountability and financial management for children. This will promote public awareness of gaps in the equitable fulfilment of child rights, stimulate demand for the Government to address these challenges and increase demand for improved services and accountability.

44. UNICEF will support knowledge hubs on child well-being for monitoring national and international commitments, as well as modelling and scale up of innovative tools to generate data, address data gaps such as intra-urban child poverty and disabilities, capacity development for improved data collection and
analysis from national surveys, and strengthened capacity at village and district levels to identify key bottlenecks and support improved service delivery.

45. Other programme components will benefit from integration with social policy through both the child grant-based poverty approach and strengthened data for equity monitoring.

**Communication and public advocacy**

46. The Communication and Public Advocacy Programme will lead on public advocacy in support of the other programme components. It will be aligned with and complement technical and policy advice to advance expected outcomes, using a mix of strategic communication and social engagement approaches. The advocacy strategy will build on evidence and data generated throughout the country programme. This component will disseminate knowledge on the status of child rights and lessons learned from programme models in order to raise public awareness and understanding of inequities for children.

47. Capitalizing on the Coalition and the country’s vibrant media landscape, in line with the UNICEF global Communication and Public Advocacy Strategy, the programme will expand its outreach through print, broadcast, digital and mobile communication platforms. These channels will be used to engage the target audiences that are most influential for pursuing policy change, as well as for addressing social norms, behaviours and practices.

48. Communication for development support will continue as a cross-sectoral function to address key harmful social norms. Approaches will include focusing on behaviour change, social mobilization at the community level, risk-informed communication to strengthen resilience, and advocacy for prioritizing these programmes in national planning and budgeting processes.

49. UNICEF, in support of the Coalition, will drive the public advocacy agenda for child rights. The programme will influence a broad cross-section of Government, faith-based and other civil society organizations (CSOs), adolescents, academia, research institutions, the media, influential individuals and the private sector (through the Children’s Rights and Business Principles, CRBP).

50. The UNICEF Innovation Lab will continue to enhance effectiveness across the country programme by helping to facilitate innovative solutions to programmatic challenges.

**Emergency preparedness and disaster risk reduction**

51. The Emergency Preparedness and DRR Programme supports national commitment on the Sendai Framework for Disaster Risk Reduction 2015-2030, and the Government’s work to promote strong intersectoral emergency preparedness and response in line with the UNICEF Core Commitments for Children in Humanitarian Action (CCCs), and to strengthen resilience of children, communities and systems to disasters, climate change and other shocks. The programme will strengthen existing capacity of national and subnational disaster management systems, CSOs and coordination mechanisms, employing sector line agency coordination to develop and implement DRR preparedness and response plans through the Government’s sectoral
programmes. It will also highlight child vulnerabilities to be included in national and subnational risk assessments through evidence-based policy dialogue and advocacy.

52. During emergencies, the programme will oversee UNICEF humanitarian action and cluster coordination and will continue to support and strengthen the national cluster system.

53. The programme effectiveness component will support coordination and management of the country programme, including the planning, monitoring and evaluation functions, field coordination, private sector fundraising and programme-funded operations costs.

54. The country programme aligns with the priorities of the UNICEF East Asia and the Pacific Regional Office (EAPRO), to be partially implemented through the Framework Agreement for Cooperation with ASEAN, which was signed in 2014 to support the regional child rights agenda.

Summary budget table

<table>
<thead>
<tr>
<th>Programme component</th>
<th>Regular resources</th>
<th>Other resources</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child survival and development</td>
<td>3 354</td>
<td>42 275</td>
<td>45 629</td>
</tr>
<tr>
<td>Education for early childhood and adolescent development</td>
<td>2 766</td>
<td>26 520</td>
<td>29 286</td>
</tr>
<tr>
<td>Child protection</td>
<td>4 473</td>
<td>10 753</td>
<td>15 226</td>
</tr>
<tr>
<td>Social policy</td>
<td>5 061</td>
<td>10 166</td>
<td>15 227</td>
</tr>
<tr>
<td>Communication and public advocacy</td>
<td>3 379</td>
<td>5 229</td>
<td>8 608</td>
</tr>
<tr>
<td>Emergency preparedness and disaster risk reduction</td>
<td>1 011</td>
<td>2 461</td>
<td>3 472</td>
</tr>
<tr>
<td>Programme effectiveness</td>
<td>6 231</td>
<td>22 343</td>
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</tr>
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<td><strong>Total</strong></td>
<td><strong>26 275</strong></td>
<td><strong>119 747</strong></td>
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Programme and risk management

55. The country programme is governed by a steering committee chaired by the Ministry of National Development Planning, and thereby has a high level of national ownership. A regular forum provides strategic direction to Government cooperation with the United Nations, as framed in the UNPDF.

56. UNICEF will continue to operate with a country office in Jakarta and several field offices, which contribute to the ability to achieve results for children at subnational level by influencing local planning and resource allocation. In the country’s highly decentralized context, field presence is essential to ensure maximum effectiveness. In line with evaluation recommendations, field presence will be more systematically linked to evidence generation and other upstream strategies.

57. The new programme differs from previous cooperation in its increased attention to cross-sectorality and partnerships. The power of UNICEF to bring together partners for children is central to building the Coalition. Furthermore, at subnational
level, UNICEF is shifting to an issue-based, rather than area-based approach, which allows a flexible response without the restrictions of a “geographic focus”.

58. Key programme risks relate to natural disasters, partners’ fund channelling modalities and resource mobilization. To mitigate these risks, UNICEF and partners will regularly assess and monitor disaster risk. Fund transfers and activity implementation will be monitored through the principles of the harmonized approach to cash transfers. The programme will also have increased cooperation with CSOs, in support of the Coalition.

59. Resource mobilization trends for the country programme are expected to show an increase in private sector funds. Net private sector funds are projected to provide as much as 50 per cent of the annual programme budget ceiling by 2020, up from less than 20 per cent in 2014. This changing funding landscape presents significant implications for equity programming.

60. This CPD outlines UNICEF contributions to national results and serves as the primary unit of accountability to the Executive Board for results alignment and resources assigned to the programme at country level. Accountabilities of managers at the country, regional and headquarter levels with respect to country programmes are prescribed in the organization’s programme and operations policies and procedures.

**Monitoring and evaluation**

61. In monitoring progress, the country programme will focus on addressing barriers and bottlenecks to the achievement of results. This reflects mainstreamed principles of the UNICEF Monitoring Results for Equity System. Monitoring initiatives will benefit from contributions from the Innovation Lab to develop systematic, real-time approaches for key indicators. The programme will also build on partnerships with United Nations agencies, civil society and Government to strengthen national monitoring and evaluation systems.

62. To reduce the data collection and reporting burden, country programme outcome indicators will be monitored through national data systems, wherever possible. UNICEF will support the integration of international best practice into these systems, through alignment with the indicators and methodology of the global Multiple Indicator Cluster Survey programme. Progress against results will be systematically tracked through biannual joint reviews. An agile management approach will facilitate real-time strategic shifts that keep pace with the evolving programme environment.

63. Major evaluation activities are planned to support learning and accountability for results, as well as ongoing alignment with the national development agenda. Two major evaluations will be conducted each year, based on criteria established in the 2013 Revised Evaluation Policy. They will be conducted jointly with the Government in order to develop national capacity for evaluation. Evaluation results will inform future programme design. Key evaluations are planned on early grade learning, community sanitation and social norms.
# Results and resources framework

**Indonesia — UNICEF country programme of cooperation, 2016-2020**

**Convention on the Rights of the Child:** Articles 6-7, 12, 19, 23-24, 26-30, 34, 37, 39-40, 42.

**National priorities:** RPJMN 2015-2019

**UNPDF outcomes involving UNICEF:** Poverty reduction, equitable sustainable development, livelihoods and decent work; equitable access to social services and social protection; environmental sustainability and enhanced resilience to shocks; improved governance and equitable access to justice for all.

## Related UNICEF Strategic Plan outcome(s): All

<table>
<thead>
<tr>
<th>UNICEF outcomes</th>
<th>Key progress indicators, baselines and targets</th>
<th>Means of verification</th>
<th>Indicative country programme outputs</th>
<th>Major partners, partnership frameworks</th>
<th>Indicative resources by country programme outcome (in thousands of US dollars)</th>
</tr>
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<tbody>
<tr>
<td><strong>Child Survival and Development Programme</strong></td>
<td></td>
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</tr>
</tbody>
</table>
| **Outcome 1:** Women and children have more equitable access to evidence-based health, nutrition, WASH and HIV services and adopt appropriate care practices from pregnancy to adolescence. | 1: Percentage of children aged 6-23 months who consume a minimum acceptable diet  
Baseline: 37% (2012)  
Target: 45%  
2: Percentage of households practising open defecation  
Baseline: 22% (2014)  
Target: 0%  
3: Percentage of fully immunized children aged 1 year  
Baseline: 66% (2012)  
Target: 80% | 1: DHS  
2: WHO/UNICEF JMP; RPJMN target  
3: DHS, RISKESDAS | Governments and partner institutions have enhanced capacity and commitment to deliver quality services at scale to protect children from undernutrition and overnutrition.  
Governments and partner institutions have enhanced capacity and commitment to deliver quality services at scale around community approaches to eliminate open defecation, provision of safe water and the promotion of hygiene practices.  
Government and partner institutions have enhanced capacity and commitment to deliver quality basic and comprehensive maternal, neonatal and child health services, including prevention of mother-to-child transmission of HIV, at scale. | Ministry of Health; United Nations agencies; United States Agency for International Development; civil society; private sector; media; academia’ SUN movement. | 3 354  
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<tr>
<td><strong>Outcome 2:</strong> Increased and equitable access to quality education for the most marginalized children aged 3-18 years.</td>
</tr>
</tbody>
</table>
| **1:** Number of out-of-school children aged 7-18 years  
**Baseline:** TBD (2015)  
**Target:** 50% reduction in selected districts |
| **1:** Ministry of Education and Culture  
**2:** Learning assessment reports |
| Education authorities at different levels provide access to quality education from early childhood to secondary level for the most disadvantaged children.  
A model for improved early grade learning for remote and rural areas ready for replication. |
| **Ministry of Education and Culture; Ministry of Religious Affairs; civil society; academia; United Nations agencies; World Bank; Department of Foreign Affairs and Trade — Australia; Ministry of Foreign Affairs and Trade — New Zealand; United Nations Girls’ Education Initiative (UNGEI).** |
| **Baseline:** TBD (2015)  
**Target:** 50% reduction in selected districts |

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| **1:** Percentage of women aged 20-24 years who were first married by age 18  
**Baseline:** 17% (2012)  
**Target:** 5% reduction in selected sites |
| **1:** DHS; SUSENAS  
**2:** SUSENAS |
| Strengthened political commitment, accountability and national capacity to legislate, plan and budget for child protection, including in emergencies.  
Increased knowledge and awareness among children and their caregivers about children’s right to protection from violence in all its forms and where and how to report violations. |
| **Ministry of Law and Human Rights; Ministry of Social Affairs; Ministry of Women’s Empowerment and Child Protection; Ministry of Home Affairs; UNGEI; United Nations agencies.** |
| **Baseline:** TBD (2015)  
**Target:** 5% reduction in selected sites |

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**Government and partner institutions have the capacity and commitment to deliver quality services at scale to control vaccine preventable diseases, malaria and HIV, including elimination of neonatal tetanus, measles, HIV, syphilis and malaria.**

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| **1:** Percentage of women aged 20-24 years who were first married by age 18  
**Baseline:** 17% (2012)  
**Target:** 5% reduction in selected sites |
| **1:** DHS; SUSENAS  
**2:** SUSENAS |
| Strengthened political commitment, accountability and national capacity to legislate, plan and budget for child protection, including in emergencies.  
Increased knowledge and awareness among children and their caregivers about children’s right to protection from violence in all its forms and where and how to report violations. |
| **Ministry of Law and Human Rights; Ministry of Social Affairs; Ministry of Women’s Empowerment and Child Protection; Ministry of Home Affairs; UNGEI; United Nations agencies.** |
| **Baseline:** TBD (2015)  
**Target:** 5% reduction in selected sites |

<table>
<thead>
<tr>
<th><strong>Child Protection Programme</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Outcome 3:</strong> Girls and boys, especially the most disadvantaged, are progressively protected from violence, exploitation, abuse and neglect by the child protection system.</td>
</tr>
</tbody>
</table>
| **1:** Percentage of women aged 20-24 years who were first married by age 18  
**Baseline:** 17% (2012)  
**Target:** 5% reduction in selected sites |
| **1:** DHS; SUSENAS  
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| **Ministry of Law and Human Rights; Ministry of Social Affairs; Ministry of Women’s Empowerment and Child Protection; Ministry of Home Affairs; UNGEI; United Nations agencies.** |
| **Baseline:** TBD (2015)  
**Target:** 5% reduction in selected sites |
### Social Policy Programme

**Outcome 4:** Key ministries have adopted an evidence-informed implementation strategy for providing child grants to reduce child poverty.

<table>
<thead>
<tr>
<th>1: Evidence-informed implementation strategy for child poverty reduction in place</th>
<th>1: RPJMN 2020-2024</th>
<th>Improved evidence-informed policy dialogue for child poverty reduction, based on the effectiveness of the current social protection system and the cost, affordability and impacts of alternative policy options.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Target: Yes</td>
<td></td>
<td>Ministry of Finance; Ministry of Social Affairs; Ministry of Villages Disadvantaged Regions and Transmigration; National Team for the Acceleration of Poverty Reduction; academia; civil society; World Bank.</td>
</tr>
</tbody>
</table>

**Outcome 5:** Increased use of disaggregated evidence by national and selected subnational stakeholders for child-sensitive policy prioritization, delivery of quality services, and monitoring progress towards the implementation of the RPJMN, Sustainable Development Goals and Convention on the Rights of the Child.

<table>
<thead>
<tr>
<th>1: Number of key children’s issues reflected in the RPJMN</th>
<th>1: RPJMN 2020-2024</th>
<th>Improved skills on child-centred development planning, budgeting and monitoring for selected subnational authorities, including villages.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline: 0 (2015)</td>
<td>2: National sources</td>
<td>Increased generation of quality data and implementation of child-centred analyses of major data sources by national government and other stakeholders.</td>
</tr>
<tr>
<td>Target: TBD</td>
<td></td>
<td>Ministry of National Development Planning; Statistics Indonesia; United Nations agencies; subnational authorities.</td>
</tr>
</tbody>
</table>

### Communication and Public Advocacy Programme

**Outcome 6:** Government and non-governmental stakeholders increasingly prioritize the evidence-based realization of child rights.

<table>
<thead>
<tr>
<th>1: Number of new government policies and policy changes to strengthen the realization of child rights that were promoted by UNICEF</th>
<th>1: UNICEF monitoring</th>
<th>Increased use of evidence-based communication approaches to address selected social norms and behaviours.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline: 0 (2015)</td>
<td>2: UNICEF monitoring</td>
<td>Business sector is increasingly aware of responsibility to respect child rights, and can access quality technical support and capacity-building to take</td>
</tr>
<tr>
<td>Target: 3</td>
<td></td>
<td>Ministry of Health; academia; civil society; private sector; United Nations agencies; media.</td>
</tr>
<tr>
<td>Programme Effectiveness Component</td>
<td>Programme Effectiveness Component</td>
<td>Programme Effectiveness Component</td>
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<tr>
<td>----------------------------------</td>
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</tr>
<tr>
<td>Country programmes are designed, coordinated, managed and supported to meet programming standards in achieving results for children</td>
<td>1: Number of participatory annual reviews conducted during the programme cycle Baseline: 5 (2015) Target: 5</td>
<td>1: UNICEF monitoring</td>
</tr>
<tr>
<td>1: Number of policies, guidance, and regulations that incorporate child-centred DRR and CCA Baseline: 0 (2015) Target: National and sectoral plans</td>
<td>2: Number of provincial/district disaster management plans that are child-centred Baseline: 0 (2015) Target: TBD</td>
<td>1: UNICEF monitoring</td>
</tr>
<tr>
<td>Emergency Preparedness and Disaster Risk Reduction Programme</td>
<td>Outcome 7: Children in most at-risk areas increasingly benefit from coordinated emergency preparedness, response, DRR and climate change adaptation (CCA) efforts to build resilience to shocks and disasters.</td>
<td>1: UNICEF monitoring</td>
</tr>
</tbody>
</table>

| Total resources | 26 275 | 119 747 | 146 022 |