

Country Programme Performance Summary: INDONESIA

A. Country Information		
Country name: Indonesia		
Category per decision 2013/31:	Current programme period: 2011-2015	Cycle of assistance: 8

B. Country Programme Outputs Achievement *(please complete for all your CP outputs)*

Output 1: Strengthened national capacity to incorporate population dynamics and its interlinkages with the needs of young people (including adolescents), SRH (including family planning), gender equality and poverty reduction in NDPs, PRSs and other relevant national plans and programmes

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> Population data analysis papers incorporating population dynamics linkages are developed for integration into national plans and programmes. 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Strengthened capacity of LDFEUI/PSKK-UGM to access, use and analyze 2010 population census, 2012 IDHS and other socioeconomic micro-data sets on population dynamics and its inter-linkages, relevant to sub-national government development planning. 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Follow-up action plans and recommendations from policy briefs from Policy Dialogue Roundtable on Population and Development 	<i>No</i>	<i>Yes</i>	

Key Achievements *(input also from the last CP evaluation)*

- Population projection 2010-2035; inclusion of population issues and demographic dividend incorporated into 2015-2019 National Medium Term Development Plan; SPECTRUM-RAPID system used by BKKBN to use population data for advocacy; a policy brief on taking advantage of the demographic dividend will be the starting point for multi-sector integrated efforts through policy dialogue.*
- BKKBN will be able to use 10% of population micro data for evidence-based advocacy and policy making.*
- A policy dialogue roundtable on family planning will pave the way for a multi-sector integrated approach to improve the family planning programme in Indonesia*
- LDFEUI and PSKK UGM have submitted will have the capacity to develop research papers for international events, particularly on family planning, using population data.*

Output 2: Strengthened national capacity to advocate ICPD principles and MDGs including South-South Cooperation

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> Official statement committing the Government of Indonesia (GOI) to address the unfinished ICPD issues and advocate for the inclusion of those into the post 2015 Development Agenda. 	<i>No</i>	<i>Yes</i>	

<ul style="list-style-type: none"> • Policy briefs on ICPD issues and advocacy strategy developed. 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> • Number of advocacy initiatives on selected unfinished ICPD issues completed each year. 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> • Lessons learned in SSC are documented and disseminated. 	<i>No</i>	<i>Yes</i>	
<p>Key Achievements <i>(input also from the last CP evaluation)</i></p> <ul style="list-style-type: none"> • <i>Policy briefs have helped government to have follow up actions on the unfinished ICPD Agenda, Post-2015 Development Agenda, and on advocacy for ICPD by relevant stakeholders .</i> • <i>Preparations for CPD, UNGASS, advocacy through SWOP and WPD</i> • <i>SSC initiatives in the bilateral and international training programme resulted in good practice and lessons for future SSC programmes</i> • <i>Work with religious leaders and religion-based organizations will enable policy dialogue on male involvement in reproductive health, family planning, and gender, and good practices shared through South-South Cooperation.</i> • <i>Lesson learned and good practices identified through the implementation of South-South Cooperation international training programmes on role of religious leader in family planning, and comprehensive family planning training.</i> • 			

Output 3: Strengthened national capacity in establishing policies for improving universal access to reproductive health

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> Guideline for monitoring Universal Access to RH (UAtRH) is finalized. 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Evidence based reproductive health information and strategies are made available for future planning, programming and advocacy in support of UAtRH 	<i>No</i>	<i>Yes</i>	

Key Achievements (input also from the last CP evaluation)

- Field-tested guideline to be completed in 2015 and used for monitoring UATRHS indicators by Ministry of Health.*
- Opportunities to influence the Five-year National Action Plan on Maternal Health to be rights-based and comprehensive will use the entry point of a costing exercise for the action plan.*
- Manual for EMOC referral system to be available in 2015 that will improve referral system to reduce maternal mortality*
- An assessment on the status of midwifery workforce in Indonesia are the foundations for efforts to regulate and improve standards related to midwifery*
- Policy reviews on maternity insurance will aid Government in perfecting the Universal Health Coverage scheme for maternal health.*

Output 4: Increased capacity to implement the Minimum Initial Service Package (MISP) in humanitarian settings

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> MISP is integrated into the existing national health emergency preparedness and response system 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Concept note developed on youth as beneficiaries as well as implementers of MISP 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> MISP is implemented during major disasters 	<i>Yes</i>	<i>No</i>	

Key Achievements (input also from the last CP evaluation)

- An MISP guideline, adapted from international technical guidelines, is now available for use by Ministry of Health for deployment of RH teams during disasters and humanitarian settings.*
- The international guideline on ASRH in humanitarian settings will have been adapted by Government.*
- No major disasters in this country programme cycle*

Output 5: Strengthened national capacity for a comprehensive national family planning programme that addresses unmet needs

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> Framework for accelerating access to rights-based FP to achieve MDG goals and global commitments developed and approved with well-defined products related to contraceptive commodity security, capacity building and financing is developed 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Lessons learned from the implementation of the KKB Kencana 	<i>No</i>	<i>Yes</i>	

Key Achievements (input also from the last CP evaluation)

- A rights-based family planning strategy has been developed as a foundation for the incorporation of rights-based and gender-sensitive elements into the new BKKBN strategy and annual work plans.*
- The FP 2020 Country Coordination Committee has continued as a functional mechanism for coordination of family planning efforts among Government, CSOs, academics, development partners, and private sector.*
- The assessment on the quality of condom production will help BKKBN in ensuring quality assurance of contraceptives, especially condoms.*
- A guideline for monitoring family planning in the universal health coverage scheme will be developed in order to keep track of progress of implementation. This will be the evidence for policy review that will be the future work of UNFPA and the Government of Indonesia in improving the FP component of the UHC scheme.*
- Lessons learned will be drawn on the piloting of the KKB Kencana (family planning) model in 4 provinces, that will be used to further perfect the BKKBN national strategy and work plans.*

Output 6: Enhanced national capacity for planning, implementation and monitoring of prevention programmes to reduce sexual transmission of HIV

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> National plans and guidelines for HIV Prevention Through Sexual Transmission (PMTS) including sexual and reproductive health (SRH) – HIV Linkages and Comprehensive Condom Programming (CCP) are developed 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> District Action Plans for Jayapura and Merauke integrating SRH – HIV Linkages and CCP are developed 	<i>No</i>	<i>Yes</i>	

Key Achievements (input also from the last CP evaluation)

- An evidence-based national guideline and action plan for the prevention of HIV through sexual transmission was developed to advance the National AIDS Commission's work on PMTS*
- A module for male involvement in the PMTS will be developed to advance PMTS work by NAC.*

Output 7: Strengthened national and subnational capacity for addressing gender-based violence (GBV) and provision of quality services, including in humanitarian settings

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> Guidelines for comprehensive GBV programming are developed 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> National coordination mechanism on GBV established and operationalized 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Concept note on health sector response to GBV (MOH) 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> SGBV sub cluster under protection cluster is re-activated and functioning 	<i>No</i>	<i>Yes</i>	

Key Achievements (*input also from the last CP evaluation*)

- A coordination mechanism is developed based on mapping of different integrated service centres and for health response, the proposal will be used as a basis for the development of a regulated protocol for Government, in this case with the Ministry of Women's Empowerment as the lead agency*
- The groundwork for engaging men and boys will be a basis to map how best to integrate the gender transformative approach across different thematic areas from the country programme together with Government.*
- Evidence and advocacy on GBV has resulted in the inclusion of GBV in the National Medium Term Development Plan 2015-2019.*

Output 8: Improved programming for essential sexual and reproductive health services to adolescents and young people

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> National Reference material for teachers reflect International Technical Guidance on Sexuality Education and National Strategy on Adolescent Health 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Private sector ASRH service model in Yogyakarta completed and report finalized 	<i>No</i>	<i>Yes</i>	
<ul style="list-style-type: none"> Opportunities given to YAP to participate in UNFPA programme and policy documents 	<i>Yes</i>	<i>Yes</i>	
<ul style="list-style-type: none"> National youth strategy and other youth development related papers developed 	<i>No</i>	<i>Yes</i>	

Key Achievements (input also from the last CP evaluation)

- National reference materials for teachers that have elements of CSE will be finalized and socialized nation-wide. Advocacy efforts have succeeded in obtaining support from the Ministry of National Education to incorporate this module into national teaching curricula.*
- Background paper on youth developed and used for the development of the National Medium Term Development Plan 2015-2019—of which the issue of youths and demographic dividend were salient throughout the document. These papers will also be the groundwork for drafting a comprehensive and integrated National Youth Strategy for the next CP.*
- Support to help government finalize the action plan influenced opportunities to incorporate elements of youth-friendly ASRH elements within The National Action Plan for School Aged Children and Adolescent Health .*
- The private sector social franchising ASRH services model has been implemented and will be scaled for replication by private sector.*
- Issues briefs on youth issues by youths will be used as discussion points for the policy dialogue on the developing a comprehensive and integrated youth strategy.*

Output 9: Enhanced national and subnational capacity for the production, utilization and dissemination of quality statistical data on population dynamics, youth, gender equality and SRH, including in humanitarian settings

Indicators	Baseline	Target	End-line data
<ul style="list-style-type: none"> • VAW Survey Methodology that complies with international ethics and safety code is developed and implemented by BPS 	No	Yes	
<ul style="list-style-type: none"> • Capacity development at BPS to produce, disseminate, and utilize census, survey and other data 	Yes	Yes	
<ul style="list-style-type: none"> • Disaggregated data on population before, during and after a humanitarian situation is compiled and used for emergency preparedness and response 	No	Yes	

Key Achievements (input also from the last CP evaluation)

- *The work on the VAW Survey methodology and advocacy for resource mobilization has successfully obtained funding from the government budget to carry out the survey in 2016. This will be the first VAW Survey for Indonesia. It will activate national coordination involving the Statistics Agency, the National Development Planning Ministry, and the Ministry of Women's Empowerment.*
- *Lessons from the piloting of a Census-based District Information System (CBDIS) will enable improvement in district information systems nation-wide. A sound CBDIS will enable subnational governments to create policies and programmes that take into account population data.*
- *The first MOU between the National Statistics Agency and the National Disaster Management Agency has enabled stronger coordination on the use of population data for humanitarian planning and response purposes by establishing a mechanism to use population data for contingency planning, and for data collection and sharing during emergency response.*

C. National Progress on Strategic Plan Outcomes ¹	Start value	Year	End value	Year	Comments
Outcome 1: Increased availability and use of integrated sexual and reproductive health services (including family planning, maternal health and HIV) that are gender-responsive and meet human rights standards for quality of care and equity in access					
Percentage in which at least 95% of service delivery points in the country have seven life-saving maternal/reproductive health medicines from the WHO priority list					No data available
Contraceptive prevalence rate (total)			62%		
Proportion of demand for contraception satisfied (total)					No data available
Percentage in which at least 60% of service delivery points in the country have no stock-out of contraceptives in the last six months			SDPs at national level with stock-out of contraceptives at 23%.		

¹ The format is aligned to the UNFPA Strategic Plan outcomes, 2014-2017.

Percentage in which at least 80% of live births in the country are attended by skilled health personnel			Above 70%		
Number of adapted and implemented protocols for family planning services in the country that meet human rights standards including freedom from discrimination, coercion and violence			No		
Percentage of women and men aged 15-49 who had more than one sexual partner in the past 12 months who reported use of a condom during their last intercourse (female/male)					No data available
Has the country increased the national budget for sexual and reproductive health by at least 5 per cent?			No		Only less than 3 % increase.

Summary of National Progress

UNFPA's Contributions

BKKBN is still in the process of trying out different models to further feed into the development of a national strategy for family planning. The UNFPA Country Office is supporting BKKBN in this effort by developing a draft comprehensive, rights-based national FP strategy, testing out SCM models in a number of provinces/districts, and in improving multi-stakeholder coordination through the FP2020 Country Committee

Outcome 2: Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and reproductive health

Percentage of young women and men aged 15-24 who correctly identify ways of preventing the sexual transmission of HIV and who reject major misconceptions about HIV transmission (female/male)					No data available
Does the country have laws and policies that allow adolescents (regardless of marital status) access to sexual and reproductive health services?			No		

Summary of National Progress

UNFPA's Contributions

Current efforts to change the policies that do not allow public sector to provide ASRH services is by testing out a model that uses a private sector social franchising approach. Through monitoring and coordination meetings the importance of investing in ASRH services is continuously conveyed

Outcome 3: Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth

Does the country have the gender equality national action plans that integrate reproductive rights with specific targets and national public budget allocations?			No		
Proportion of taken actions by the country on all of the Universal Periodical Review (UPR) accepted recommendations on reproductive rights from the previous reporting cycle					No data available
Percentage of women aged 15-49 who think that a husband/partner is justified in hitting or beating his wife/partner under certain circumstances					No data available

Summary of National Progress					
UNFPA's Contributions					
Outcome 4: Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality					
Has the country had at least one census of good quality that was processed, analyzed and disseminated following internationally agreed recommendations (during the last 10 years)?			Yes		
Has the country collected, analyzed and disseminated a national household survey that allows for the estimation of key population and reproductive health indicators (in the last 5 years)?			Yes		
Has the country completed evaluations on strategic interventions around sexual and reproductive health and adolescent and youth?			No		
Proportion of new national development plans that address population dynamics by accounting for population trends and projections in setting development targets					No data available
Summary of National Progress					
UNFPA's Contributions					

D. Country Programme Resources (in USD)						
SP Outcome	Regular Resource		Others		Total	
	(Planned and Final Expenditure)		(Planned and Final Expenditure)		(Planned and Final Expenditure)	
Increased availability and use of integrated sexual and reproductive health services (U207, U309, U224, U410)	10,337,365	9,541,618	400,195	339,152	10,737,561	9,880,771
Youth policies and programmes, and increased availability of comprehensive sexuality education (U615)	1,918,484	1,771,848			1,918,484	1,771,848
Advanced gender equality, women's and girls' empowerment, and reproductive rights (U513)	3,812,830	3,514,543	1,201,923	1,170,966	5,014,754	4,685,509
Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics (U101, U123, U717)	10,475,582	9,988,160			10,475,582	9,988,160

Programme coordination and assistance (A100)	960,000	911,292			960,000	911,292
Total	27,504,262	25,727,461	1,602,119	1,510,119	29,106,381	27,237,579