



UNFPA

INDONESIA

### POS PELAYANAN TERPADU KESEHATAN REPRODUKSI

- Program :
- 1. Kesehatan Ibu dan Bayi Baru Lahir
  - 2. Keluarga Berencana
  - 3. Kesehatan Reproduksi Remaja
  - 4. Pencegahan dan Penanganan Tindak Kekerasan
  - 5. Pencegahan dan Penanganan Infeksi Menular Seksual termasuk HIV AIDS

PKBI

**GAWA BAJANG BECERITA**  
Dalam Rangka Peringatan Hari Anti Kekerasan pada Perempuan  
**Berak-Bersama Akhiri Perkawinan Anak**  
Sabtu, 10 Desember 2018  
10 Desember 2018

# ANNUAL REPORT

2018

GOVERNMENT OF INDONESIA - UNFPA  
STRATEGIC PARTNERSHIP  
NINTH COUNTRY PROGRAMME 2016-2020







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# Foreword by the Representative

## *“Accelerating Action to Achieve Results through Mainstreaming Humanitarian Response”*



In 2018, UNFPA focused its work on supporting the Government of Indonesia to prepare the National Mid-Term Development Plan (RPJMN) 2020-2024. Several background papers, among others, on reproductive health/family planning, youth and adolescent sexual and reproductive health (ASRH), gender equality, and population-related issues, were produced as input for drafting the RPJMN.

At the same time, two big natural disasters happened in Indonesia. Two earthquakes struck Lombok Utara, West Nusa Tenggara, and a big earthquake, followed by a tsunami, struck Palu, Central Sulawesi. In addition, a tsunami occurred in the Sunda Strait and other small disasters hit Indonesia. The Government of Indonesia, with support from UNFPA undertook humanitarian interventions, implementing minimum preparedness and response for the affected people in Lombok and Palu. Humanitarian guidelines, minimum initial service package – MISP, were adopted and implemented by both central and local governments, and Reproductive Health Sub-cluster and Protection of Women’s Rights Sub-cluster were activated. Our collective humanitarian work adopted several innovations, including involving young people, and reached more than 100,000 women and girls with services and information.

In the middle of humanitarian interventions throughout the year, in collaboration with Government and Non-Government Partners, UNFPA was also able to deliver its results: advancing evidence-based advocacy and policy interventions in sexual, reproductive health and rights including for the most vulnerable, youth and adolescent reproductive health, prevention of gender-based violence and harmful practices, and in population dynamics and data.

Several donor agencies, including the Embassy of Canada through the BERANI project, Australia’s DFAT for humanitarian, and Global Fund for HIV, provided resources for UNFPA to improve the lives of women, girls, and young people through reproductive health improvement, prevention of gender-based violence and harmful practices, ASRH, and quality data.

UNFPA was also able to strengthen and expand partnership not only with the Government Agencies, but also with universities, and several NGOs both at the central and regional levels.

On behalf of UNFPA, I would like to convey our appreciation to our Government partners, Civil Society Organizations, academics and donors who have been very supportive in partnering with us to achieve the results as described in this report.



UNFPA Indonesia Country Office staff

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# Facts at a Glance

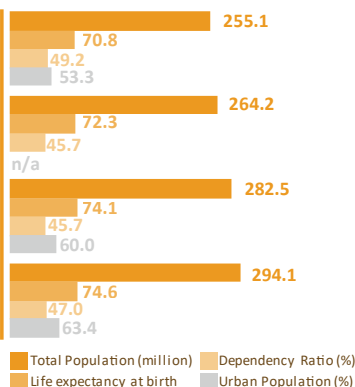


The Indonesian population will continue to grow during 2015-2030, but at a slower rate than during 1985-2015.

**The age structure** is changing profoundly. While the overall rate of population growth will be steadily declining, the growth of different age groups will vary considerably.

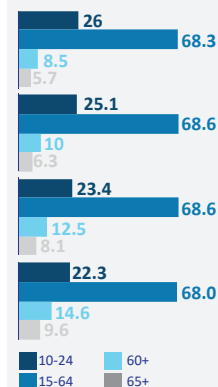
2015\*  
2018  
2025  
2030

## Total Population



Source:  
2015-2045 Indonesia's Population Projection  
\* 2015, Inter-censal Population Survey (SUPAS)

## Age Composition (%)



## Population Growth Rate

2010-2015\*  
**1.43**  
2015-2025  
**1.08**  
2025-2030  
**0.74**



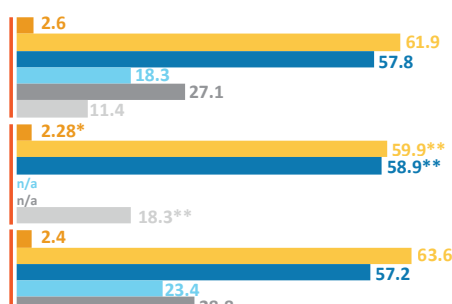
Source:  
2015-2045 Indonesia's Population Projection  
\* 2015, Inter-censal Population Survey (SUPAS)

**The stagnant Total Fertility Rate (TFR)** over two decades has shown a decrease with continuing higher rates in selected provinces.

**The CPR for modern methods of contraception (mCPR)** has been stagnant for more than two decades with selected provinces reporting < 50%.

**Unmet need for family planning** shows slight decrease and the unmet needs are

2012  
2015  
2017



■ Total Fertility Rate (TFR)  
■ Contraceptive Prevalence Rate (CPR)  
■ Any Method (%) among married women  
■ Contraceptive Prevalence Rate (CPR)  
■ Modern Method (%) among married women  
■ Active Long-term Method Family Planning User (MKJP) (%)  
■ Discontinuation Rate  
■ Unmet Need



Source:  
2012 refers to 2012 Indonesia Demographic and Health Survey (IDHS)  
2017 refers to 2017 Indonesia Demographic and Health Survey (IDHS)

预览已结束，完整报告链接和二维码如下：

[https://www.yunbaogao.cn/report/index/report?reportId=5\\_19587](https://www.yunbaogao.cn/report/index/report?reportId=5_19587)

