



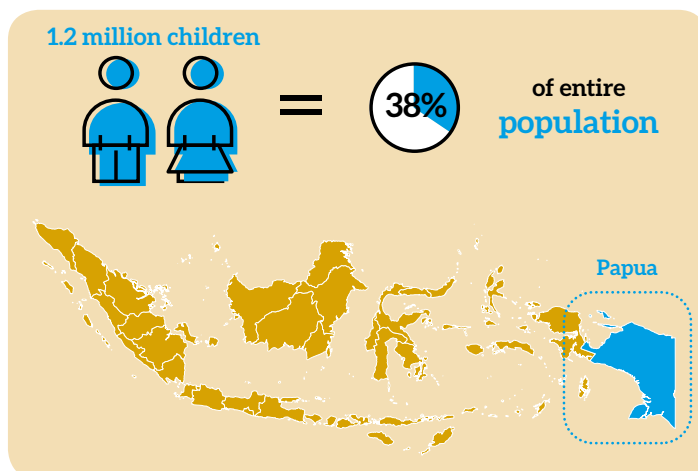
SDGs for Children in Indonesia

Provincial snapshot: Papua

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.

Papua is a youthful province. Its 1.2 million children represent 38 per cent of the total population. Around three in four children live in rural areas. Increased strategic investments in children are required to fast-track achievement of the SDGs for the province.

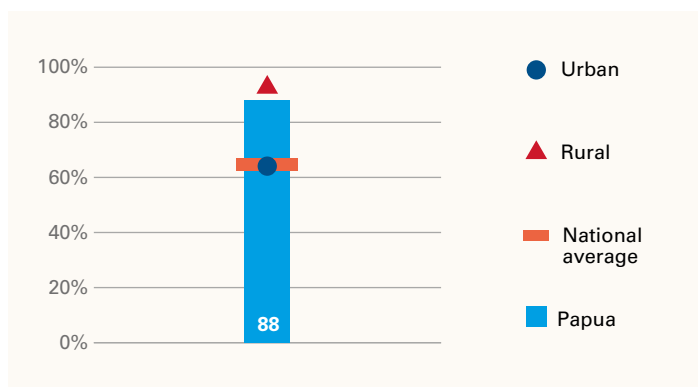


GOAL 1 NO POVERTY



Some 412,000 children (35 per cent) were living below the official poverty line in 2015 (Rp 13,217 per person per day). Many more families are insecure and live on incomes that are only marginally higher. In addition, 88 per cent of children experienced deprivations in two or more non-income dimensions of poverty, with persistent disparities between urban and rural areas.¹

Multidimensional child poverty in Papua



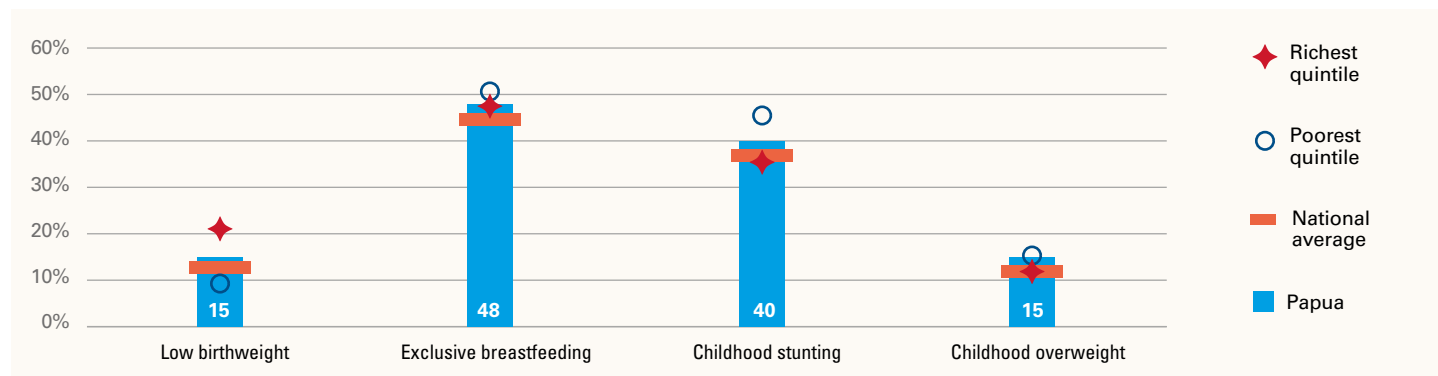
GOAL 2 ZERO HUNGER



Adopting optimal feeding practices is fundamental to a child's survival, growth and development. Forty-eight per cent of infants in Papua were exclusively breastfed for the first six months of life in 2015, which is above the national average.

The prevalence of malnutrition is relatively high, including among those in more affluent households. Some 15 per cent of newborns have a low birthweight, and four in 10 children under five were stunted (low height for their age) in 2013.

Wealth disparities in child feeding and nutrition outcomes



GOAL 3 GOOD HEALTH AND WELL-BEING



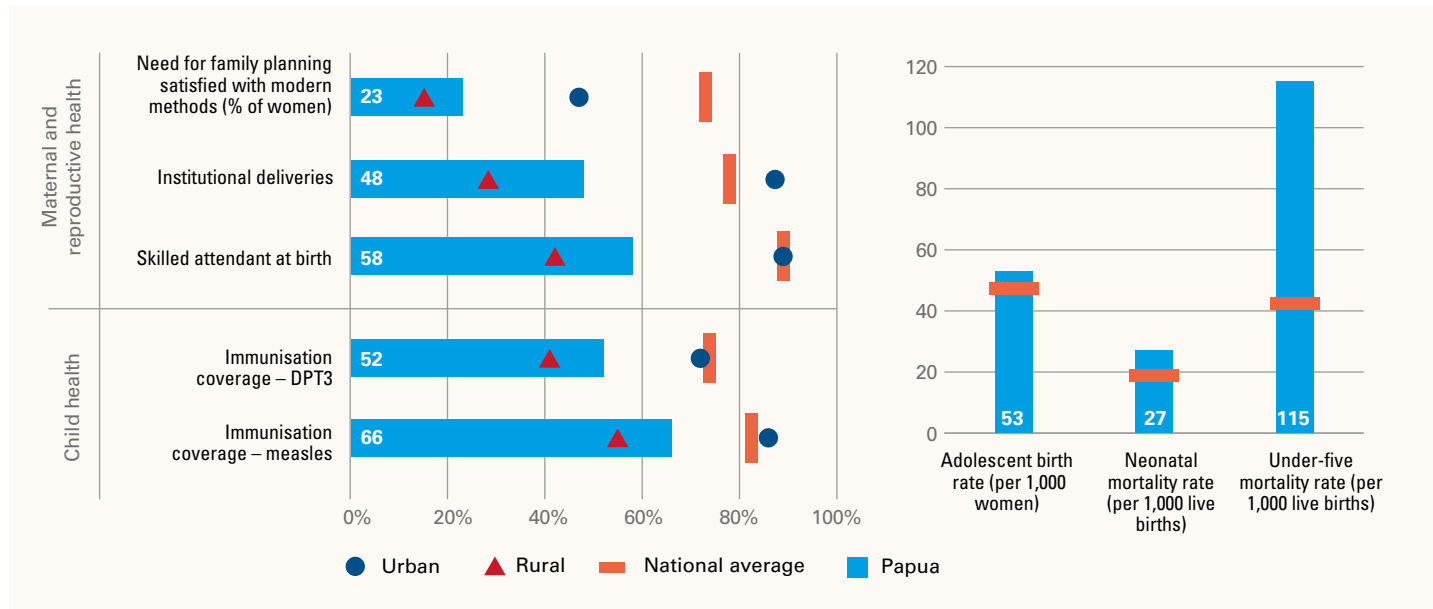
Despite progress, child mortality remains a significant challenge. For every 1,000 live births, 27 newborn babies died in their first month of life and 115 before their fifth birthday.

Improving women's access to sexual and reproductive health services is essential. Less than one in four women and adolescents aged 15-49 years had their need for family planning satisfied with modern methods in 2015, and 58 per cent of births

occurred with assistance from a skilled attendant. Levels of access are lower for mothers and children in rural areas.

Continued efforts are needed to reach and sustain high immunisation coverage. Nearly 70 per cent of infants were vaccinated against measles and 52 per cent received the recommended three doses of DTP vaccine in 2015.

Geographic disparities in maternal and child health



GOAL 4 QUALITY EDUCATION

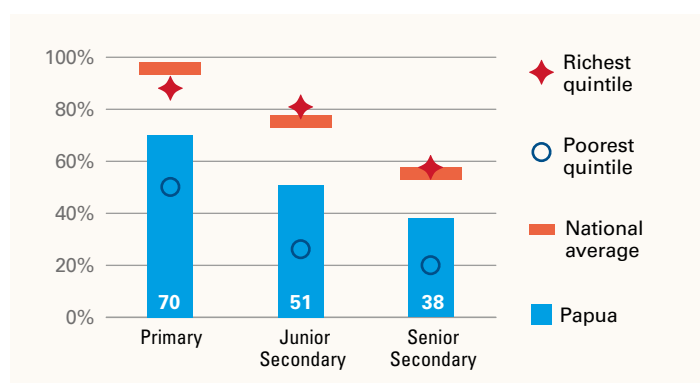


Children's school readiness can be improved through early childhood development programmes. The participation rate in organised learning among 6-year-olds was 60 per cent in 2015, with many enrolling early into primary school.

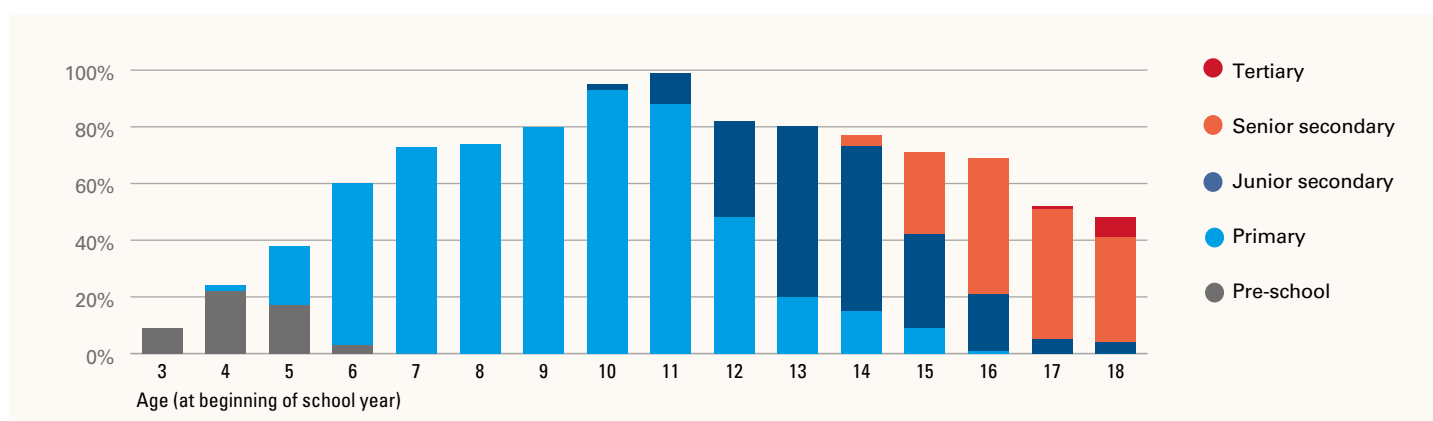
Papua has made good strides in improving access to primary education. However, children from the poorest households are much less likely to complete schooling compared with their more affluent peers.

Quality of education is a key concern. Around 40 per cent of primary school children achieved the minimum national benchmark in reading and 16 per cent in mathematics, which is on par with many other provinces.

Wealth disparities in school completion rates



Percentage of children attending school, by age



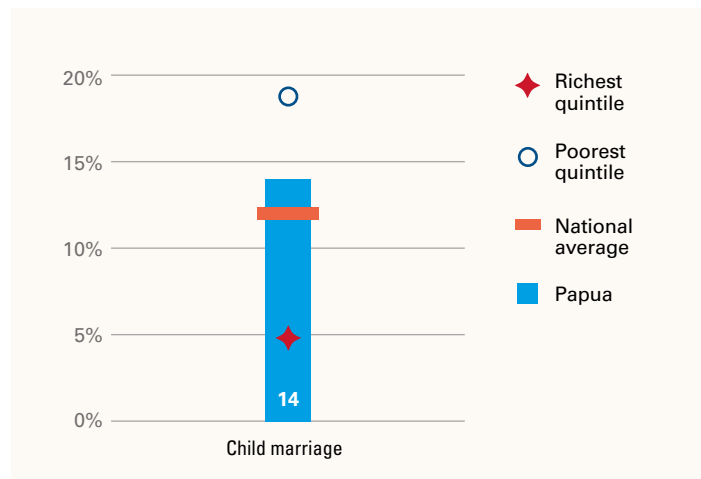
GOAL 5 GENDER EQUALITY



The practice of child marriage is declining. In Papua, some 14 per cent of women aged 20–24 years were married or in union before the age of 18 in 2015. Levels of child marriage are higher among girls from the poorest households.

In 2016, over one in three women aged 14–64 in Papua and West Papua reported having experienced physical and/ or sexual violence by a male intimate partner at least once in their lifetime. Nearly one in five had experienced one of these forms of violence in the 12 months before the survey.

Wealth disparities in child marriage



14% of women  are **married** before **18**

GOAL 6 CLEAN WATER AND SANITATION

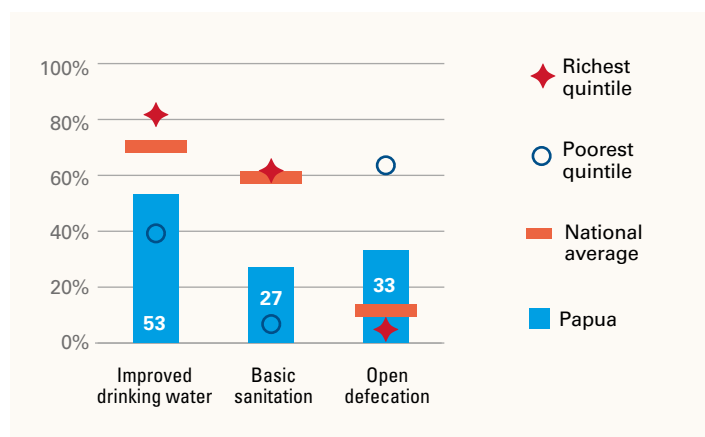





Achieving universal access to drinking water, sanitation and hygiene is crucial to further progress in health, education and poverty eradication. Just over a quarter of the population used a basic sanitation facility at home in 2015, while a third practised open defecation. The coverage of improved drinking water sources is significantly higher, however, both in

households and schools.²

Disparities based on wealth and place of residence are pronounced, pointing to the importance of integrating equity considerations into policy and practice and further expanding the community-based total sanitation programme.

Wealth disparities in access to water and sanitation



 schools with  basic water services =  59%

School environment	
Schools with basic water services (%)	59
Schools with sex-disaggregated sanitation facilities (%)	27

Community	
Villages and wards implementing community-based total sanitation (%)	6

GOAL 16 PEACE, JUSTICE AND STRONG INSTITUTIONS

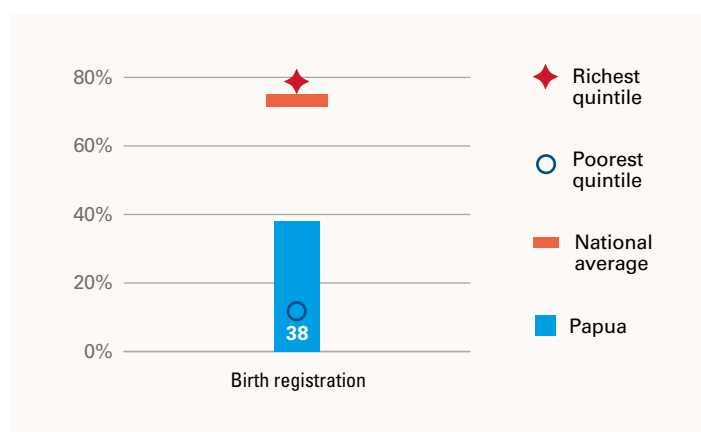


Levels of birth registration are slowly improving, and four out of 10 children under 5 years of age had a birth certificate in 2015. There are large differences between urban and rural areas and based on households' wealth status, due to financial and supply-side barriers.

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 Papua, 13 per cent of all children in detention were unsentenced, which is significantly better than the national average.

Limited data is available on all forms of childhood violence in the region to inform policy and prevention programmes.

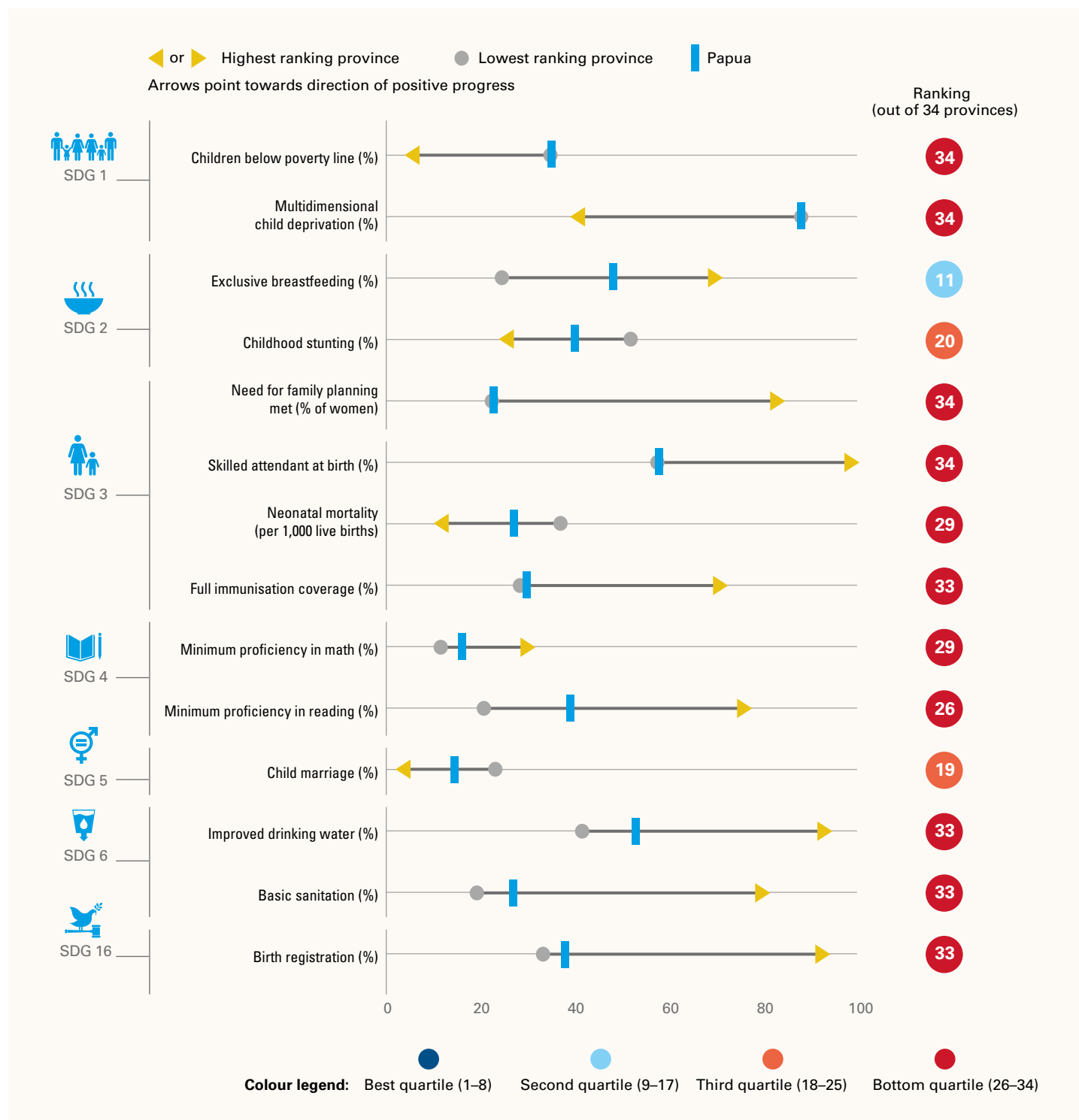
Wealth disparities in birth registration



PROVINCIAL SCORECARD

The scorecard summarises Papua's performance for a selection of SDG indicators compared to other provinces in the country. For each indicator, the graph shows Papua's average value as well as the provinces with the highest and the lowest data value.

On the right side of the scorecard Papua'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: National household surveys (SUSENAS, RISKESDAS, IDHS); administrative data (Ministry of Education and Culture, Ministry of Health); and Study on Women's and Men's Health and Life Experiences in Papua, Indonesia (UNDP/USAID). Detailed information on data sources and indicator definitions is available online at: <https://sdg4children.or.id>

- 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.
- 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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