

Check against delivery

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Statement by
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## Agenda Item 4:

"General Debate on National Experience in Population Matters: Fertility, Reproductive Health and Development"

New York, 11 April 2011

## Mr. Chairman,

Firstly, allow me to thank the Secretary-General of the ECOSOC for a range of practical recommendations provided in the reports related to fertility, reproductive health and development, along with useful key elements to accelerate the progress of universal access to sexual and reproductive health, as well as implementation of the Cairo Agenda and the achievement of the Millennium Development Goals. Indonesia also welcomes the 2010 Global Strategy for Women's and Children's Health and thus underscores the vital need to enhance financing, strengthen policy and improve service delivery in addressing the challenges that remain.

Indonesia is aware that the high fertility rate and low health status of its population creates a particular challenge to improving the welfare of the community, especially in achieving poverty alleviation. The population programme that relates to fertility and reproductive health in particular has been the core of our national development plan which started in 1967.

The full extent of the Government's commitment in managing fertility, reproductive health and development is reflected in the Act on the Long Term National Development Plan 2005 to 2025, the Presidential Regulation on the Medium Term Development Plan 2010 to 2014, the Presidential Instruction on Gender Mainstreaming in National Development, the Presidential Instruction on the Acceleration of the Implementation of National Development Priorities in 2010, and the Presidential Instruction on development embracing pro-poor, justice for all, and MDG acceleration programmes.

This commitment has resulted in the decline of the total fertility rate from 5.6 in 1970 to its current rate of around 2.3. The replacement level of fertility will undergo further change in the next few years. In line with the reduction of fertility, infant and child mortality rates are also expected to decline as targeted by the MDGs. The infant mortality rate (IMR) has declined from 142 per 1000 live births in 1971 to the current 34 per 1000 live births.

The decline of fertility and infant mortality has changed the population age structure and dependency ratio. Indonesia is projected to undergo its lowest dependency ratio between 2020 and 2025. During this period, Indonesia will experience the demographic bonus of better economic opportunities for all. A large proportion of the productive age group equipped with better education and health status will constitute top-quality human resources which in turn will support economic growth. The quality of our human resources combined with abundant natural resources will assure sustainable economic growth. In this

regard, Indonesia has attained world class status by being ranked 18th in the world economy as indicated by its Gross Domestic Product.

## Mr. Chairman,

Despite those achievements, Indonesia is still facing a number of challenges pertaining to maternal mortality and HIV/AIDS. Indonesia's Maternal Mortality Rate (MMR) remains high but, with current trends, it has been falling gradually. Indonesia is therefore committed to making the extra effort to achieve 102 deaths per 100,000 live births by 2015. The total number of HIV infected individuals in Indonesia is still relatively low at 0.17 percent of the population, but the rate of increase is relatively high. The number of HIV cases increased by some 17.5 percent. That is estimated to be about 193,000 people. Cumulatively, the number of AIDS cases has tended to increase, reaching 24,131 cases in 2010 which is more than double the 8,194 cases in 2006.

We have to continue our efforts to reduce maternal mortality and to achieve universal access of reproductive health through health system reforms and the revitalization of the family planning programme. This involves increasing the quantity and quality of health care services and enhancing community participation. Further, in January 2011, the Government approved a policy to fully finance antenatal care, properly skilled birth attendance, post natal and new born care as well as family planning services.

For family planning, the national programme currently focuses on increasing access and quality care in 23,500 family planning clinics serving the underprivileged, such as poor families and those who live in remote areas, promoting the use of long term contraception, and strengthening institutional capacity, especially the front liners. These policies are also meant to narrow the performance disparities among regions and bridge the socio-economic gaps that exist.

With regard to the issue of HIV/AIDS, the National AIDS Strategy Action Plan 2010-2014 was developed with the focus on several issues, namely, improving access by strengthening public health services to anticipate and respond to the epidemic; enhancing community mobilization to improve HIV/AIDS prevention, care and treatment interventions; mobilizing additional financial resources for a successful HIV/AIDS strategy; improving cross-sector coordination and good governance; and strengthening information, monitoring and evaluation systems.

## Mr. Chairman,

The central core of national programmes on fertility, reproductive health and development is a part of Indonesia's efforts to implement its human rights obligations as a State Party to the Convention on the Elimination of Discrimination against Women, Convention on the Rights of the Child, and the International Covenant on Economic, Social and Cultural Rights.

With regard to regional and international collaboration, Indonesia has also agreed to bilateral cooperation with several countries in the field of reproductive health. At the regional level, Indonesia, together with other ASEAN Member Countries, has declared the commitment to attain MDGs in ASEAN. In this respect, fertility and reproductive health are specifically covered within the ASEAN Strategic Framework on Health and Development (2010-2015). At the international level, in addition to the South-South Cooperation in the field of population and development, Indonesia's commitment to the fulfilment and improved management of reproductive health is reiterated in the 2007 Declaration of the First Session of the Organization of the Islamic Conference (OIC) Health Ministers.

I thank you.