

PN-AAS-258
ISBN 39 068

Indonesia

**FAMILY
PLANNING
PROGRAM**



orientation booklet

**OFFICE OF POPULATION & HEALTH
U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT
JAKARTA, INDONESIA**

June - 1983

INTRODUCTION

This is the fifteenth annual edition of USAID's Orientation Booklet. The purpose of the booklet is to provide a brief introduction to the Indonesian family planning program and USAID's assistance to this program.

We have tried consciously to limit the amount of written materials in this booklet. Instead, we have presented statistical and financial tables and graphs that allow the reader to assess the success of the Indonesian family planning program over the past decade or more. We hope that we have provided enough information to be useful to the reader, but not so much as to be overwhelming.

The booklet is divided into five sections to describe:

- Population Problem in Indonesia.
- Population Policy and Goals of the Government of Indonesia.
- Population Strategy.
- Program Inputs.
- Program Results.

The data included in this Booklet have been compiled from numerous sources, including the National Family Planning Coordinating Board (BKKBN), USAID Office of Population, and other quoted sources.

All financial projections represent estimates by the USAID Office of Population and should not be considered commitments by either the U.S. Government or any other agency.

We welcome suggestions from the readers on how to improve this Orientation Booklet.

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Office of Population & Health
June 1983

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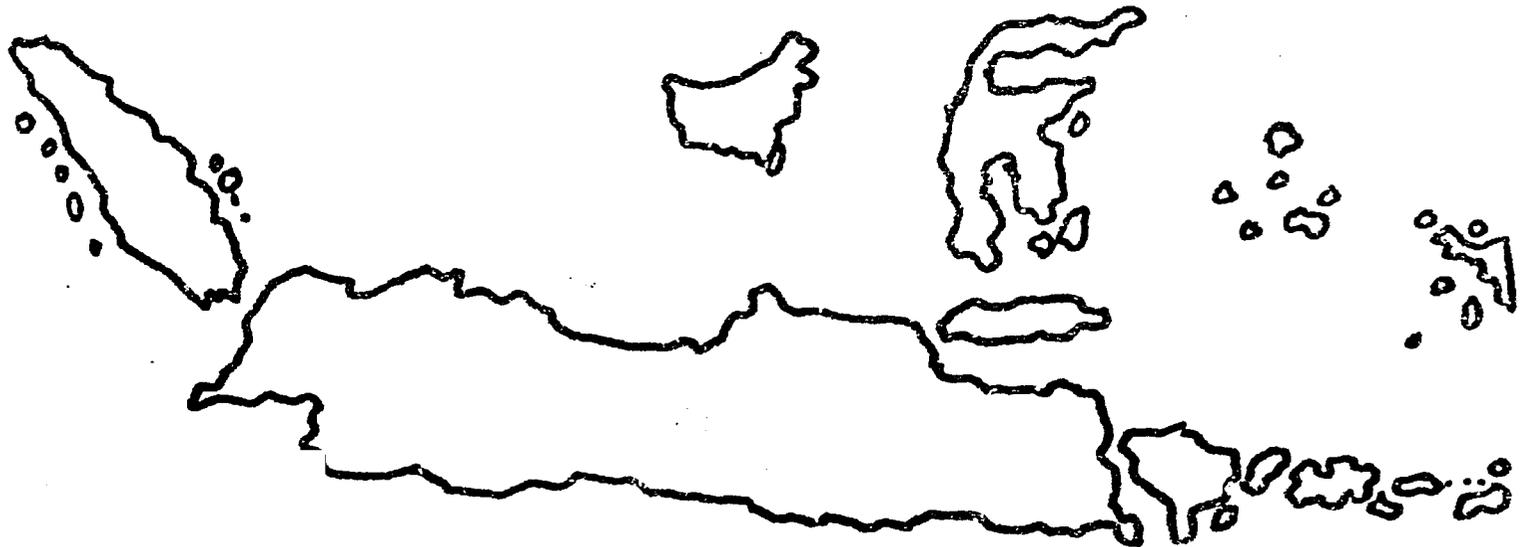
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I-A

INDONESIA: The distribution of land view



INDONESIA: The distribution of population view



I-B
DEMOGRAPHIC HIGHLIGHTS
1971 and 1982

	<u>1971</u>	<u>1982</u>
Population (millions)	119	155
Population Density (persons per square mile)	150	207
Java	1,463	1,856
Sumatra	98	159
Sulawesi	96	147
Kalimantan	23	32
Crude Birth Rate (births per 1000 population)	46	31
Crude Death Rate (deaths per 1000 population)	19	13
Annual Crude Rate of Natural Increase	2.7%	1.8%
Population Doubling Time at Current Rate of Increase	26 years	39 years
Infant Mortality Rate (deaths per 1000 live births)	140	100 ⁺
Child Mortality - Per cent Dying Before Age 5	20+%	18%
Life Expectancy at Birth	47 years	51 years
Urban	51 years	54 years
Rural	46 years	49 years
Married Women of Reproductive Age (15-44 years)	17 million	23 million
Gross Domestic Product Per Capita	80(US\$)	520 (US\$)
Literacy Rate for Persons Over Age 15	57%	64%
Population Distribution		
Ages 0-14 - dependents	44%	41%
15-64	53%	57%
65 and over - dependents	3%	2%
School Age Population (5-14 years)	31 million	40 million
Children Enrolled in Primary School (7-12 years)	60%	85%

I-C
TOTAL POPULATION AND POPULATION DENSITY
BY PROVINCE
1980 CENSUS RESULTS

Province	1980 population	Area (km ²)	Total density (people per km ²)
A. JAVA BALI	93,739,458	137,748	680
1. East Java	29,188,852	47,922	609
2. Yogyakarta	2,750,813	3,169	868
3. Bali	2,469,930	5,561	444
4. Central Java	25,372,889	34,206	742
5. West Java	27,453,525	46,300	593
6. Jakarta	6,503,449	590	11,023
B. OUTER ISLANDS I	39,086,544	609,353	64
1. West Nusa Tenggara	2,724,564	20,177	135
2. South Sulawesi	6,062,212	72,781	83
3. South Kalimantan	2,064,649	37,660	55
4. North Sulawesi	2,115,384	19,023	111
5. West Sumatra	3,406,816	49,778	68
6. Lampung	4,624,785	33,307	139
7. West Kalimantan	2,486,068	146,760	17
8. North Sumatra	8,360,894	70,787	118
9. South Sumatra	4,629,801	103,688	45
10. Aceh	2,611,271	55,392	47
C. OUTER ISLANDS II	14,664,296	1,172,342	12
1. Bengkulu	768,064	21,168	36
2. East Kalimantan	1,218,016	202,440	6
3. Jambi	1,445,994	44,924	32
4. Riau	2,168,535	94,562	23
5. Central Sulawesi	1,289,635	69,726	18
6. Central Kalimantan	954,353	152,600	6
7. South East Sulawesi	942,302	27,686	34
8. East Nusa Tenggara	2,737,166	47,876	57
9. Maluku	1,411,006	74,505	19
10. Irian Jaya	1,173,875	421,981	3
11. East Timor	555,350	14,874	37
TOTAL	147,490,298	1,919,443	77

Source: Central Bureau of Statistics, Penduduk Indonesia Menurut Propinsi: Seri L No. 3, Hasil Pencacahan Lengkap Sensus Penduduk 1980, May 1981, p. 13, Tabel 1.

I-D
INDONESIAN POPULATION GROWTH:
PAST, PRESENT, FUTURE

Calendar year	Population (millions) ^a	Crude birth rate per 1,000 pop.	Crude death rate per 1,000 pop.	Annual rate of natural increase (%)	Percentage of married couples of reproductive age using modern contraceptives (%) ^b
1970	117	46	19	2.7	--
1980	147	33	14	1.9	34
1990	172-176	23	10	1.3	68
2000	194-200	20	9	1.1	75

^a Based on Indonesian census figures, the annual average rate of population growth was 2.3 per cent during the 1971-1980 period. USAID's estimate of an annual rate of natural increase (RNI) of the population in 1980 of 1.9 per cent was based both upon empirical estimates of crude birth and death rates and upon an arithmetic extrapolation: an RNI of 2.7 per cent in 1971 and an annual average rate of increase of 2.3 per cent over the 1971-1980 period justifiably assumes an RNI of 1.9 per cent in 1980. Census data not yet released might modify these projections.

USAID currently projects a decrease in the average annual rate of natural increase to 1.6 per cent during the 1980-1990 period and to 1.2 per cent during the 1990-2000 period.

^b Percentages of contraceptive users include 6 per cent served through the private sector.

II-A
POPULATION POLICY - GOVERNMENT OF INDONESIA

Goal: Institutionalize the small, happy, prosperous family norm.

Strategy: - Reduce significantly the rate of population growth through the family planning program and related population policies,
- ameliorate population maldistribution through transmigration programs, and
- improve socio-economic conditions for all citizens through expanded development programs.

Family Planning Target: Reduce the crude birth rate to 22 per 1,000 population by March 1991. This represents a 50 per cent reduction in the crude birth rate over a 20 year period (1971 - 1991).

Chronology of Policy and Program Development

- * late 1950's - family planning services provided by the Indonesia Planned Parenthood Association.
- * 1967 - President Suharto signed the World Leaders Declaration on Population.
- * 1970 - National Family Planning Coordinating Board (BKKBN) created as an independent agency reporting directly to the President. BKKBN is responsible for coordinating all population - family planning programs. It relies on many governmental and private organizations for program implementation.
- * 1970-1974 - Phase I of the national family planning service delivery program. Family planning services offered only in health clinics. Services were available only in Java-Bali.
- * 1974 - Phase II of the national family planning service delivery program began. Village family planning program initiated in Java-Bali; villagers assume responsibility for information, motivation, and contraceptive supplies. Family planning services through health clinics begin in ten large provinces (Outer Islands I).
- * 1974 - Government announced goal of reducing the 1971 birth rate of 44-46 births per 1,000 population by 50% by the year 2000.
- * 1977 - Phase III of the Village family planning system introduced in ten provinces of Outer Islands I.
- * 1979 - Clinic-based family planning services initiated in remaining eleven provinces (Outer Islands II), with Village Family Planning, Phase IV begun in Phase III areas.
- * 1979 - Government revised goal - 50 per cent reduction in 1971 birth rate by March 1991. Urban areas to receive special attention.
- * 1980's - Government further strengthens its commitment to family planning with emphasis on voluntary sterilization, training and local manufacture of contraceptives.

I-B
Indonesia
 FAMILY PLANNING PROGRAM



AREA	POPULATION		CONTRACEPTIVE USE	
	MILLIONS	PERCENT OF TOTAL POPUL.	1) ACTUAL 83	2) ESTIMATE 87
A ■ JAWA & BALI	98	64	57	65
B ▨ OUTER ISLANDS I	41	26	40	47
C □ OUTER ISLANDS II	16	10	19	28
INDONESIA	155	100	48	56

SOURCE: 1) BKKBN, SERVICE STATISTICS SUMMARY AS OF MARCH 1983 2) BKKBN PROJECTIONS FOR THIRD DEVELOPMENT PLAN

A) 6 Provinces

JAKARTA, W. JAVA, YOGYAKARTA, C. JAVA, E. JAVA & BALI

B) 10 Provinces

N. SULAWESI, S. SULAWESI, W. KALIMANTAN, S. KALIMANTAN, ACEH, N. SUMATRA, LAMPUNG, W. NUSA TENGGARA, S. SUMATRA, W. SUMATRA

C) 11 Provinces

BENGKULU, JAMBI, E. KALIMANTAN, C. KALIMANTAN, C. SULAWESI, SE. SULAWESI, MALUKU, W. IRIAN, E. TIMOR, E. NUSA TENGGARA, RIAU

II-C
ADDITIONAL CURRENT CONTRACEPTIVE USERS REQUIRED TO ACHIEVE THE TWO-CHILD
FAMILY NORM (80% OF MARRIED WOMEN OF REPRODUCTIVE AGE); RANKED BY
PROVINCE AND TARGET NUMBER OF MWRA (000s)

Province (target group ranking)	Married women of reproductive age (1)	Current contra- ceptive users (2)	80% of MWRA (3)	Target group (4)=(3)-(2)	Current users as % of MWRA (5)
1. West Java	4371	2000	3497	1497	) 46
2. Central Java	3969	2213	3175	962	) 56
3. North Sumatra	1362	547	1090	543	) 52%
4. East Java	4527	3175	3622	447	) 70
5. Jakarta	1074	445	859	414	) 41
6. South Sumatra	735	252	588	336	) 34
7. Lampung	801	312	641	329	) 39
8. South Sulawesi	952	449	739	313	) 26%
9. East Nusa Tenggara	373	39	298	259	) 10
10. West Sumatra	541	181	433	252	) 33
11. Riau	322	42	258	216	) 13
12. Aceh	419	123	335	212	) 29
13. Maluku	227	14	182	168	) 6
14. West Kalimantan	392	153	314	161	) 39
15. West Nusa Tenggara	434	202	347	145	) 47
16. Jambi	237	52	190	138	) 22%
17. Central Sulawesi	209	36	167	131	) 17
18. Irian Jaya	180	13	144	131	) 7
19. East Kalimantan	210	43	168	125	) 20
20. North Sulawesi	336	148	269	121	) 44
21. South Kalimantan	327	142	262	120	) 43
22. South East Sulawesi	155	17	124	107	) 11
23. Central Kalimantan	156	29	125	96	) 19
24. East Timor	87	2	70	68	) 2
25. Yogyakarta	424	281	339	58	) 66
26. Bengkulu	127	44	102	58	) 35
27. Bali	386	257	309	52	) 67
T O T A L	23,333	11,211	18,666	7,455	48

Source: BKKBN Monthly Service Statistics Report, March 1983.

Note: Figures may not add to totals due to rounding.

III-A
VILLAGE FAMILY PLANNING (VFP) - HOW IT WORKS

- WHAT - A family planning information, motivation, and contraceptive services program centered at village (desa) level and run by village residents.
- WHY - Clinic-based services do not reach majority of villagers.
- Gives villagers responsibility for managing own program.
- Helps institutionalize family planning behavior as village social process.
- HOW - Train influential village leaders (village chief, secretary, religious leaders, women leaders, schoolteachers, etc.) to manage and monitor VFP.
- Appoint a village leader as contraceptive distributor; train to record/report contraceptive distribution.
- Establish contraceptive resupply depot at specific place (village chief's office, village social center, distributor's home, etc.).
- Form sub-village groups of satisfied acceptors who recruit new members and establish "neighborhood" contraceptive resupply.
- Promote sub-village group activities such as nutrition, sewing and handicrafts, savings schemes, functional literacy program, income-generating projects, etc., to link family planning with total family welfare.
- WHO - Sub-district (kecamatan) personnel, including chief administrative officer (camat), clinic staff, fieldworker, supervisor, information officer, religious official, etc., operate as family planning team for training, supervising, and coordinating village-level activities in their area.
- Fieldworkers (PLKB) act as motivators in recruiting new acceptors, maintaining current acceptors, and establishing sub-village acceptor groups. Fieldworkers are the link between VFP and clinic.
- Village chief responsible for overall management of VFP in village.
- Other village leaders assist village chief with VFP responsibilities.
- Village contraceptive distributor manages resupply depot and works with sub-village groups.
- Satisfied acceptors act as sub-village (dukuh, kampong, etc.) group leaders and motivators.
- WHERE/
WHEN - Java/Bali since early 1975; current phase focuses on further development and strengthening of sub-village groups and using satisfied acceptors as motivators.
- 10 large Outer Islands provinces since mid-1977; sub-district teams, village leaders, and contraceptive depots being established.
- Remaining 11 Outer Islands provinces since mid-1979; still in early phase of expanding service outlets and training village leaders.

III-B
VILLAGE FAMILY PLANNING - FOUR PHASES

Phase I--Initiation:

Initial development of Village Family Planning (VFP) motivational activities and contraceptive distribution begins by: spreading the idea of family planning in the villages of the province; increasing the understanding and support of formal and informal leaders at the regency (kabupaten), sub-district (kecamatan), and village (desa) levels; creating a forum for discussion of family planning; developing village family planning contraceptive depots (Pos KBs or PPKBDs) in selected villages; increasing the number of new acceptors; improving continuation rates; encouraging the use of satisfied users as motivators; and increasing information and motivation activities.

This phase is characterized by the following types of USAID-funded activities:

- a. Training.
- b. Orientation sessions and workshops.
- c. Information and motivation activities.
- d. Establishment of village family planning depots on a phased basis.
- e. Recruitment of new and maintenance of old acceptors.

Phases II and III--Extension and Expansion:

Like Phase I, the extension and expansion phases extend the program by further developing village family planning motivational activities and contraceptive distribution through the various means outlined above for Phase I. In these phases, VFP activities are expanded from the limited number of kabupatens, kecamatans, and desas of Phase I to selected or full kabupaten, kecamatan, and desa coverage.

These phases are characterized by the following types of USAID-funded activities:

- a. Training--expanded to include personnel in new areas of coverage.
- b. Expansion of village contraceptive depots.
- c. Operations--e.g., mobile medical teams, information and motivation activities, and village depot operational expenses.

III-B (cont'd)

- d. Supervision and consultation at all administrative levels.
- e. Reporting and recording.
- f. Equipment and supplies--e.g., village depot name signs, data boards, contraceptive cabinets.
- g. Program review.
- h. Community incentives--promotion of inter-community competition.

Phase IV--Institutionalization:

At the end of Phases II and/or III, depending upon the individual province, Phase IV begins the institutionalization process. The activities of Phase IV assist the province in further strengthening the philosophy and practice of family planning. Each province, in responding to the national goals of overall fertility reduction and the inculcation of the small, happy, and prosperous family norm, further promote and strengthen VFP by bringing information, motivation, and services closer to the people; increasing community participation in the program; increasing the number of new acceptors; maintaining current users; re-recruiting drop-outs; and integrating the population and family planning programs into other sectors of community life.

This phase is characterized by the following types of USAID-funded activities:

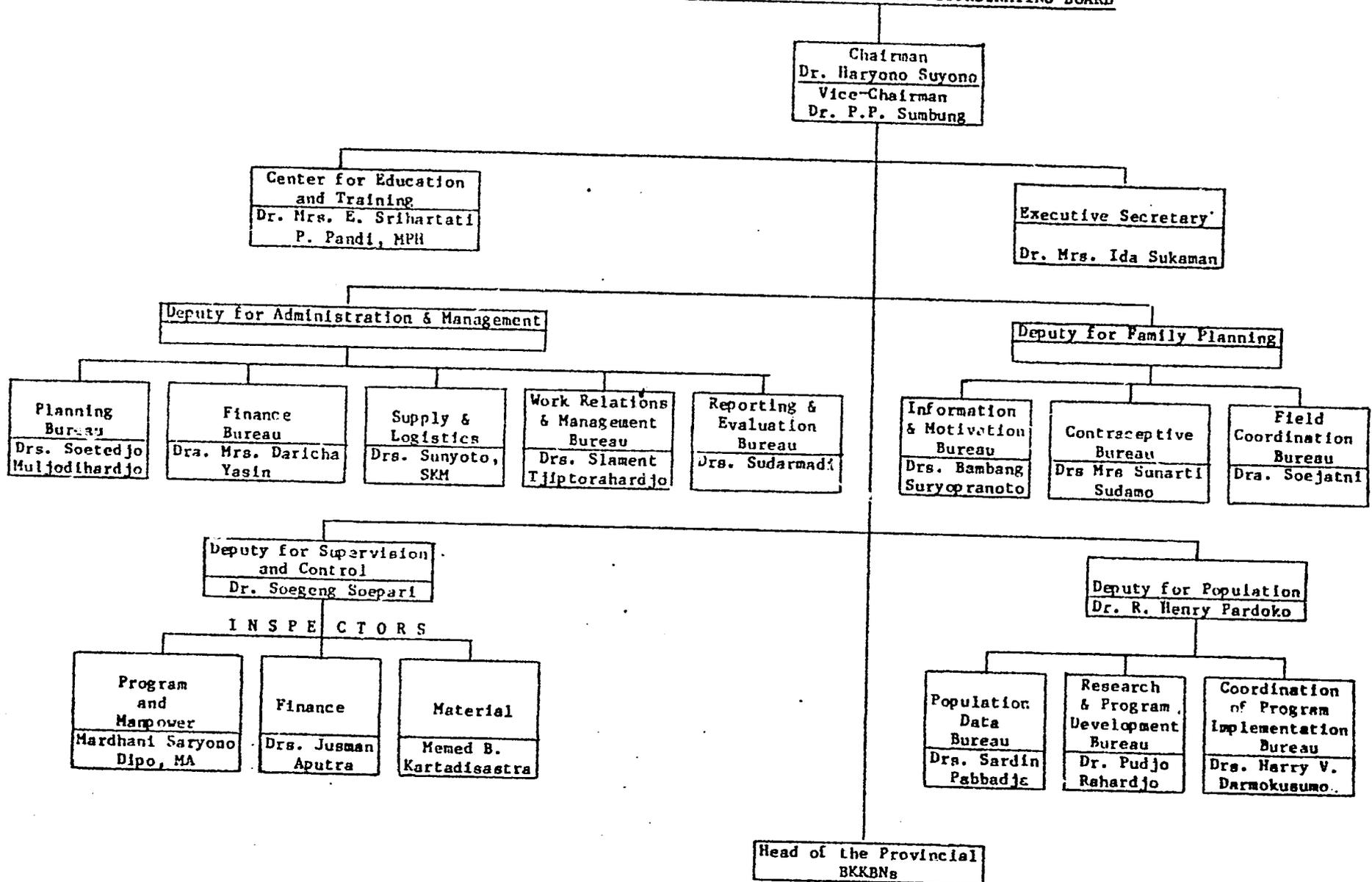
- a. Education and training--both new and refresher courses.
- b. Operations--e.g., village level family planning motivators, traveling medical and information teams.
- c. Equipment and supplies--e.g., data and scheduling boards, contraceptive cabinets.
- d. Guidance, supervision, and consultation at all administrative levels.
- e. Comparative study tour--intra-province and inter-province--to gain insights and share experiences.
- f. Expansion of motivation and services from village level depots to hamlet level sub-depots.
- g. Community incentives to promote inter-community competition.

III-C
FAMILY PLANNING SERVICE DELIVERY POINTS
MARCH, 1983

	Hospitals & health clinics	Village depots	Sub- village depots	Total service points	Service points per 1,000 MWRA
Total For Country	6,586	61,447	124,154	191,887	9
A. JAVA-BALI:	3,492	31,238	97,481	131,914	9
1. East Java	1,327	8,340	33,248	42,915	9.5
2. Yogyakarta	129	556	5,853	6,538	15
3. Bali	160	3,726	3,726	7,612	20
4. Central Java	758	9,529	33,230	43,517	11
5. West Java	803	6,440	19,809	27,052	6
6. Jakarta	315	2,350	1,615	4,280	4
B. OUTER ISLANDS I:	2,004	25,107	26,673	53,704	8.5
1. North Sulawesi	130	1,266	3,671	5,067	15
2. Lampung	156	1,511	4,715	6,382	8
3. South Kalimantan	141	1,683	1,132	2,956	9
4. West Nusa Tenggara	138	569	1,674	2,381	5.5
5. South Sulawesi	275	1,288	3,812	5,375	5.5
6. West Sumatra	242	3,518	3,332	6,992	13
7. Aceh	170	3,800	1,462	5,352	13
8. South Sumatra	228	2,340	1,813	4,381	6
9. West Kalimantan	149	3,500	2,579	6,228	16
10. North Sumatra	375	5,632	2,583	8,590	6
C. OUTER ISLANDS II:	1,090	5,102	-	6,269	3
1. Bengkulu	95	974	-	1,039	8
2. East Kalimantan	134	600	-	734	3.5
3. Jambi	103	323	-	426	2
4. Riau	123	400	-	523	1.5
5. Central Sulawesi	108	400	-	508	2.5
6. Central Kalimantan	122	250	-	372	2.5
7. Southeast Sulawesi	58	400	-	458	3
8. East Nusa Tenggara	139	1,100	-	1,239	3
9. Maluku	98	305	-	403	2
10. West Irian	77	100	-	177	1
11. East Timor	33	250	-	360	4

- Source:** - BKKBN Monthly Service Statistics Report, March 1983 (Clinic & PPKBD).
- Hospitals are located in major cities at the provincial and regency level. Services include IUD, pill, condom, injection, plus sterilization in selected hospitals.
 - Health center clinics are located country-wide at the district (kecamatan) level and provide counseling, IUD, pill, condom, injection, and sterilization referral.
 - Field workers and supervisors on Java-Bali and Outer islands I provinces recruit new acceptors; link depot to clinic; provide contraceptive supplies door-to-door.
 - Mobile clinic teams work out of district health centers to recruit new acceptors.
 - Village depots on Java-Bali and Outer Islands I provinces serve as the village resupply point for pills and condoms. Accurate data on Outer Islands II presently are unavailable.
 - Sub-village depots and family planning groups insure contraceptive resupply at the sub-village (hamlet) level; motivate new acceptors; and provide peer support to acceptors.
- Accurate data on number of sub-village depots on Outer Islands II, except Bengkulu, presently are unavailable.

III-D:
ORGANIZATION AND KEY PERSONNEL
NATIONAL FAMILY PLANNING COORDINATING BOARD



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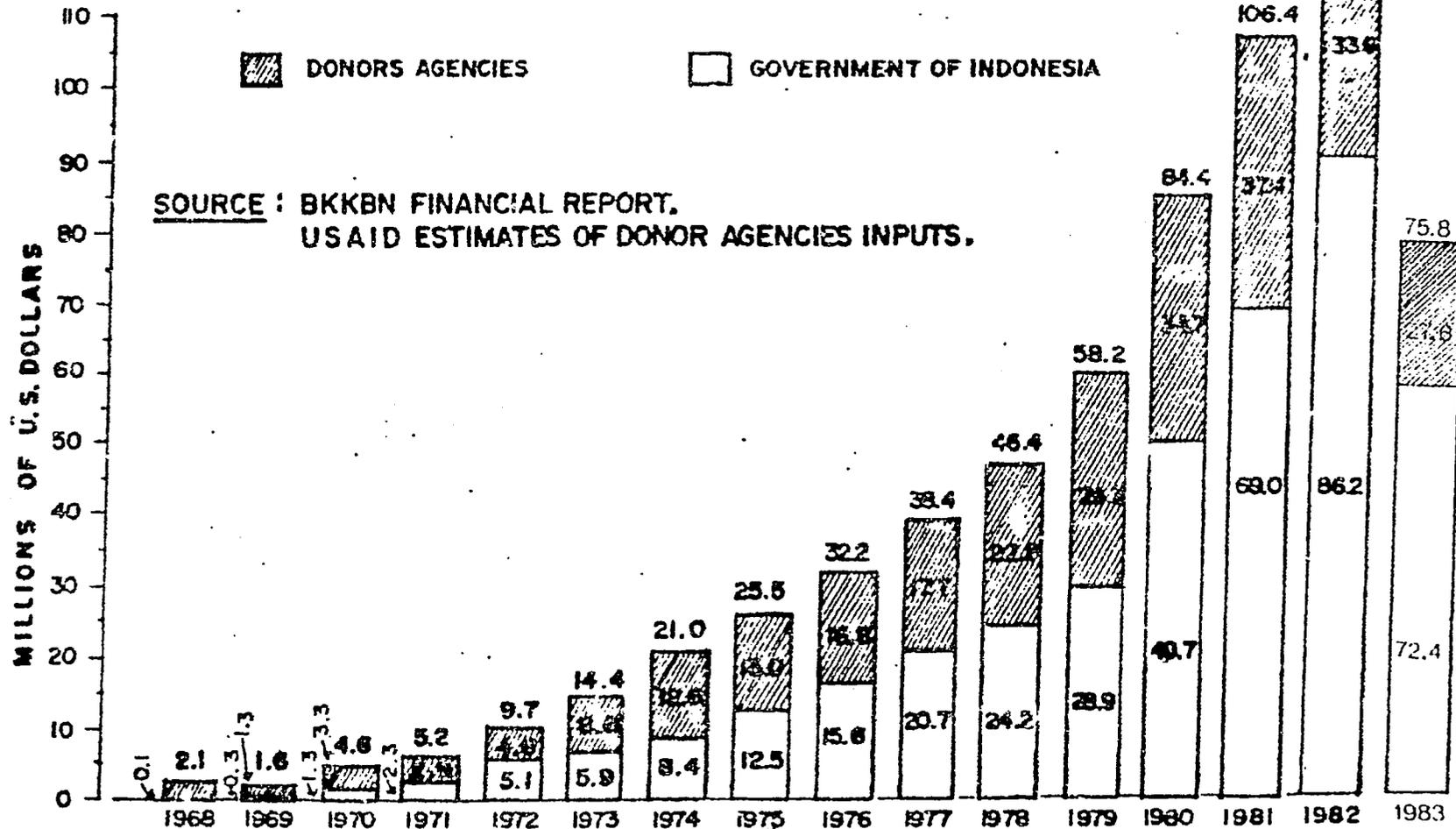
III-E
USAID POPULATION STRATEGY

During the 1980's, USAID expects to maintain a large population-family planning assistance program in Indonesia. The major areas of USAID assistance will be to:

- provide technical experts to assist the BKKBN in the fields of planning, finance, management, training, reporting and recording, and logistics.
- continue financing local costs for innovative village family planning activities, focusing especially on the low acceptor areas of Java and on the ten large outer island provinces. Seven provinces, including West, Central, and East Java, contain two-thirds of all the non-acceptor married women of reproductive age in Indonesia. While it is important to make family planning services freely available to all couples in Indonesia, future achievements in the few most populous provinces will have the greatest impact on national fertility rates.
- support an expansion of voluntary sterilization services through mechanisms acceptable to the Government of Indonesia. Voluntary sterilization services are increasing yearly, but are still low compared to other Asian countries.
- continue and expand training assistance: Many of the key BKKBN and other family planning-population officials received advanced academic training under AID auspices. BKKBN needs more trained people, especially at the mid-level, and geographically in the provinces outside Java-Bali. USAID will continue sending selected individuals for training in the United States, with the emphasis on persons who will return to training institutions in Indonesia. The aim of the 1980's will be to upgrade and expand in-country training capabilities.
- support of the expansion of family planning services in relatively neglected urban areas, through projects using imaginative approaches to family planning. Promote expansion of services, training of hospital and clinic staffs, dissemination of accurate informative and new channels for contraceptive sales.
- Encourage BKKBN to assume financial responsibility for purchases of contraceptives. With the termination of the current AID loan, BKKBN has committed its own resources for future procurements and assisting local IUD and oral contraceptive production.
- promote the integration of other development activities with family planning, so long as the family planning program does not suffer. USAID's new Village Family Planning/Mother and Child Welfare Project will help the GOI to add some limited health, nutrition, and income-generating activities in areas with high family planning acceptor rates.

IV-A

**INDONESIA POPULATION-FAMILY PLANNING PROGRAM
RESOURCES - GOVERNMENT OF INDONESIA & DONOR AGENCIES
1968 - 1983
(MILLIONS OF U.S. DOLLARS)**



NOTE: IN 1983, THE RUPIAH WAS DEVALUATED BY 41%.

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IV-B
GOVERNMENT OF INDONESIA PROPOSED BUDGET FOR FAMILY PLANNING,
1983-84, BY PROVINCE

Province	IFY 1983-1984 family planning budget		Provincial budget per MWRA		Cost per current user	
	(Rp. millions)	(\$000s)	(Rp.)	(\$)	(Rp.)	(\$)
INDONESIA TOTAL:	41,097	41,934	1,761	1.80	3,667	3.74
A. JAVA-BALI:	14,774	15,075	1,002	1.02	1,765	1.80
1. East Java	4,456	4,547	1,047	1.07	1,404	1.43
2. Yogyakarta	661	675	1,559	1.59	2,335	2.40
3. Bali	684	698	1,772	1.81	2,661	2.72
4. Central Java	4,174	4,259	1,052	1.70	1,886	1.92
5. West Java	3,714	3,790	850	0.87	1,857	1.89
6. Jakarta	1,084	1,106	1,010	1.03	2,438	2.49
B. OUTER ISLANDS I:	8,458	8,630	1,343	1.37	3,770	3.44
1. W. Nusa Tenggara	552	563	1,273	1.30	2,730	2.78
2. South Sulawesi	1,150	1,173	1,208	1.23	2,559	2.61
3. South Kalimantan	690	705	2,108	2.15	4,851	4.96
4. North Sulawesi	552	563	1,642	1.68	3,719	3.79
5. West Sumatra	947	967	1,750	1.79	5,008	5.11
6. West Kalimantan	809	825	2,062	2.10	5,277	5.38
7. Lampung	612	625	764	0.78	1,964	2.05
8. North Sumatra	1,432	1,461	1,051	1.07	2,618	2.67
9. South Sumatra	827	844	1,126	1.15	3,287	3.35
10. Aceh	886	904	2,114	2.16	7,221	7.37
C. OUTER ISLANDS II:	3,949	4,029	1,729	1.76	11,923	12.16
1. Bengkulu	284	290	2,242	2.29	6,434	6.57
2. East Kalimantan	403	411	1,422	1.96	9,427	9.65
3. Jambi	325	332	1,370	1.40	6,241	6.37
4. C. Kalimantan	411	420	2,628	2.68	13,943	14.25
5. C. Sulawesi	328	334	1,566	1.60	8,994	9.16
6. S.E. Sulawesi	325	331	2,098	2.14	19,340	19.70
7. Maluku	338	345	1,487	1.52	23,766	24.26
8. Riau	403	411	1,252	1.28	9,674	9.87
9. Irian Jaya	389	397	2,160	2.20	30,307	30.93
10. E. Nusa Tenggara	648	661	1,738	1.77	16,780	17.12
11. East Timor	95	97	1,090	1.11	44,186	45.12
D. JAKARTA						
HEADQUARTERS:	13,916	14,200	--	--	--	--

Source: BKKBN Proposed Budget, 1983-1984 (development and administrative budgets).

Note: IFY: Indonesian Fiscal Year (April 1, 1983, to March 30, 1984).
980 Rupiahs = US\$1.00

^aMWRA = Married Women of Reproductive Age.

Cost per MWRA current user is calculated by dividing the 1983/84 budget by the number of MWRA current users reported in March 1983.

IV-C
 USAID BILATERAL POPULATION PROGRAM ASSISTANCE
 FY 1968-1983
 (US\$ MILLIONS)

U.S. Fiscal Year	AID/W	Project 0188	Project 0188	Project 0270	Project 0271	Project 0305 ^a	Project 0327	Annual Total
	Oral Contraceptives and Condoms	Family Planning Services Grant	Oral Contraceptives Loan	Family Planning Development & Services Grant and Loan	Oral Contraceptives Loan	Village Family Planning/ Mother-Child Welfare Grant	Family Planning and Services II Grant & Loan	
Totals	\$22.02	\$18.15	\$7.30	\$27.92	\$56.1	\$7.40	\$12.40	\$151.29
1968-71	-	3.38	-	-	-	-	-	3.38
72	-	2.16	-	-	-	-	-	2.16
73	1.75	5.32	-	-	-	-	-	7.07
74	3.50	1.76	-	-	-	-	-	5.26
75	3.02	1.68	-	-	-	-	-	4.70
76	7.55	0.95	-	-	-	-	-	8.50
77	2.42	2.90	7.30	-	-	-	-	12.62
78	2.70	-	-	4.18	7.00	-	-	13.88
79	1.08	-	-	5.19	13.00	-	-	19.27
80	-	-	-	6.00	13.00	1.00	-	20.00
81	-	-	-	6.55	11.75	4.40	-	22.70
82	-	-	-	6.00 ^b	11.35	2.00	-	19.62
83	-	-	-	-	-	-	12.40 ^c	12.40

Source: AID Financial Records.
^aFunded from AID's Health Account.
^bIncludes \$2,000,000 loan.
^cIncludes \$3,000,000 grant and \$9,400,000 loan.

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IV-D
 USAID PROJECT 497-0270
FAMILY PLANNING DEVELOPMENT AND SERVICES
U.S. FYs 1978-1982

<u>Activity</u>	<u>Projected Inputs</u>
<u>Technical Assistance</u> ----- Long-term and short-term experts to work with BKKBN and other institutions in such fields as training and manpower planning; development of integrated programs; management systems; data collection and analysis; logistics; women's projects related to family planning; planning; reporting and recording; and evaluation.	\$ 1,658,980
<u>Overseas Training</u> ----- To date, 98 persons have received long-term academic training. Another 40 persons will receive master's or doctoral training by the end of the project. Nearly 50 persons have participated in short-term training courses.	\$ 2,466,794
<u>Commodities</u> ----- Major commodities provided to date include 295 jeeps to expand field supervision; 650,000 Copper T IUDs; 700,000 Lippes Loop IUDs; 100 laproscopators and 600,000 Falope rings; 3,000 IUD kits; 500 vasectomy kits; 1,000 mini-lap kits; office and medical equipment; and books.	\$ 7,605,073
<u>Local Costs</u> ----- Most of the funds are used to support the expansion of village family planning in the Java-Bali provinces, the ten provinces grouped as Outer Islands I, and several provinces of Outer Islands II. Additional funds are used to support in-country training activities including some scholarships for master's degree training at the School of Public Health. Operations research and bio-medical research activities are also supported.	\$14,189,153
<u>Loan Funded Overseas Training</u> ----- The loan will fund up to 30 participants over a 3 year period for short-term courses, and training for master's degrees in the U.S. or developing countries. Stipends for 6 Ph.D candidates will also be provided. Training will help strengthen the staffs of the family planning agencies, especially in areas of administration, management, data analysis, implementation, research, evaluation and training.	\$ 2,000,000
<u>Total</u> -----	<u>\$27,920,000</u>

IV-E
USAID PROJECT 0271
ORAL CONTRACEPTIVES LOAN
U.S. FYs 1978-1983

The Government of Indonesia has a current goal of self-sufficiency in procurement of oral contraceptives (pills). Local production and packaging of pills at the Kimia Farma pharmaceutical company in Bandung began in early 1980. USAID contracted with Syntex Corporation under an earlier loan to provide raw materials and packaging supplies, as well as technical assistance and personnel training. The Kimia Farma plant is producing an increasingly larger part of BKKBN's annual pill requirements. Additional plant and equipment will be required to achieve complete local production of all pill requirements in future years.

The aim of the five year USAID loan was to insure availability of oral contraceptives in sufficient quantities to allow continued family planning program expansion during the transition from USAID to GOI funding of contraceptives. The GOI policy is to have a twelve month supply of pills stored in country at all times, with at least another twelve month supply on order. Thus, through 1983-1984 deliveries have exceeded the expected current use of pills by a substantial amount.

During the six year planning period, the GOI plans to purchase about 144,000,000 monthly cycles of pills, primarily from local production. USAID has procured with loan funds up to 330,662,000 monthly cycles.

USAID has provided \$56,100,000 for procurement of pills; the GOI will spend over \$18,770,000 for local procurement of pills.

DELIVERY REQUIREMENTS AND FINANCIAL PLAN

US FY	CY	Total Outlay, GOI and AID		GOI Inputs		USAID Inputs: Loan 0271	
		Cycles (000's)	\$ (Mil)	Cycles (000's)	\$ (Mil)	Cycles (000's)	\$ (Mil)
1978	1979	42,216	7.00	--	--	42,216 ^a	7.00
1979	1980	87,554	14.68	10,000	1.68	77,554 ^b	13.00
1980	1981	90,261	15.91	16,500	2.91	73,761	13.00
1981	1982	92,881	17.93	32,000	6.18	60,881	11.75
1982	1983	116,250	19.35	40,000	8.00	76,250 ^c	11.35
1983	1984	45,500	5.82	45,500	5.82	--	--
TOTALS		474,662	84.59	144,000	24.59	330,662	56.10

Source: BKKBN-USAID estimates.

^aExcludes 15 million cycles of pills provided by AID as a grant.

^bExcludes 6 million cycles of pills provided through FPIA as a grant with AID funds.

^cDelivery will continue through November 1984.

IV-F
USAID ORAL CONTRACEPTIVE PROCUREMENT
FOR INDONESIA
1968 - 1984

Obligated in US Fiscal Year	U.S. Dollars (000s)	Monthly Cycles
1968 Grant	20	90,000
1969 Grant	208	1,100,000
1970 Grant	203	1,100,000
1971 Grant	315	2,000,000
1972 Grant	2,162	9,900,410
1973 Grant	2,319	25,102,546
1974 Grant	4,679	31,852,800
Grant (AID/W)	83	516,600
1975 Grant	4,397	31,045,800
1976 Grant	8,235	51,250,800
1977 Grant	2,256	13,930,800
Loan	4,700	27,600,600
1978 Loan	7,000	42,216,000
Grant	2,553	15,000,000
Grant (FPIA)	924	6,000,000
Grant (AID/W)	48	300,000
1979 Loan	13,000	77,554,200
Grant (AID/W)	127	796,322
1980 Loan	13,000	73,761,000
1981 Loan	11,750	58,395,000
1982 Loan	<u>11,350</u>	<u>76,250,000</u> - on order
SUB-TOTAL	89,329	545,762,878
1977 Loan-Raw Materials	<u>2,600</u>	<u>43,000,000</u>
T O T A L	\$91,929	588,762,878

PROJECTED ORAL CONTRACEPTIVE USE IN INDONESIA

CY	Millions of Monthly Cycles
1979	44.7
1980	54.2
1981	64.4
1982	75.2
1983	87.3
1984	99.1
1985	110.1

Note: Several other donors have supplied small quantities of oral contraceptives. In January 1980, the Kimia Farma Pharmaceutical Company (Bandung) began to produce oral contraceptives. The BKKBN will purchase its entire output for the family planning program.

IV-G
USAID PROJECT 0305
VILLAGE FAMILY PLANNING/MOTHER-CHILD WELFARE (VFP/MCW)

Period: FY 1980-1985

Funding: US\$10,000,000

The VFP/MCW project, currently in the fourth year of implementation, assists the BKKBN, Ministry of Health, Ministry of Agriculture, and Ministry of Religion to add selected nutrition and primary health care interventions to Indonesia's successful village-based program of family planning services. This intersectoral program follows guidelines established for the National Family Nutrition Improvement Program (UPGK). Trained village volunteer workers, assisted by BKKBN fieldworkers, agriculture extension agents, and supervisory personnel from sub-district health centers:

- help mothers to weigh their infants and young children under five years of age and to maintain a monthly record of each child's growth;
- conduct mothers' group nutrition education, including demonstration cooking and child feeding sessions;
- distribute vitamin A and iron supplements, antihelminthic medicine, and oralyte (for oral rehydration of diarrhea cases);
- coordinate immunizations for children against smallpox, TB, and DPT;
- demonstrate home and communal gardens for food supplementation.

A research and development component of the VFP/MCW project provides support for GOI development and evaluation of cooperative food production and income-generating activities through the village mothers clubs and family planning acceptor groups.

As of mid-1983, the project encompasses 790 villages in East Java and 1148 banjar (sub-villages) in Bali. A third province, West Nusa Tenggara has been added and project activities are scheduled for 100 villages in Lombok. Implementation of activities is planned to begin in mid FY-84 will incorporate village-based rehabilitation of malnourished under-fives referred from the weighing program. An additional 1000 villages in East Java will be covered in FY-84.

The VFP/MCW project may reach over 7,000 villages and 5,000,000 recipients during the period FY 1980-1984. FY 1980-1982 funding of US\$7,400,000 is being programmed for approximately 3,500 villages and for research and development activities.

Results of the mid-project evaluation indicate that the project, despite various technical problems, is progressing well. The evaluation recommended modifications of some activities to promote self-reliance in target villages, further training of field workers and greater cooperation among involved agencies in order to increase the nutritional impact on intended beneficiaries.

IV-H
Family Planning Development and Services II (327)
1983 - 1989

The purpose of the FPDS II is to increase the use of all legal types of contraceptives. There are six components to the project as described below:

1. Village Family Planning: 13 provinces \$ 6 054
(West Java, Central Java, East Java, North Sumatra, West Sumatra, Lampung, South Sulawesi, Nusa Tenggara Barat, South Sumatra, Nusa Tenggara Timur, Aceh, Riau, West Kalimantan)

This component will include: strengthening or expanding the number of villages or sub-village service points; education and training; pilot testing of new techniques; information and motivation services; strengthening management, logistics and reporting capabilities and techniques; equipment and supplies; essential operating costs, supervision and consultant support.

2. Urban Family Planning: 10 cities \$ 4,000
(Jakarta, Surabaya, Bandung, Medan, Semarang, Palembang, Ujung Pandang, Malang, Padang, Surakarta)

Includes: development and expansion of both public and private of physicians and service provider networks; training of physicians and midwives; new channels for the sale of contraceptives; expanded information and education campaigns; technical assistance for management and market research; equipment and supplies; pilot test of new techniques and approaches; experiments with fee-for-service techniques.

3. Voluntary Sterilization Services: 12 provinces \$ 3,582
Includes: Needs assessment of hospitals and clinic in Jakarta and the 3 larger provinces of Java to provincial and regency hospitals and to sub-districts clinics; upgrading hospitals and clinics in regencies and sub-districts in Jakarta, the 3 largest provinces of Java, and 8 priority Outer Island provinces; establishing comprehensive family planning centers including voluntary sterilization facilities in approximately 173 hospitals and 346 clinics over a 3 year period. Renovating and equipping these facilities; training physicians and paramedics; technical assistance when required.

IV-H
Family Planning Development and Services II (327)
1983 - 1989
(Continued)

4. Training: \$ 6,495
 Outputs include: 56 persons completing Master's degrees and 16 persons completing doctoral degrees in the U.S; 90 Master's degree and 14 doctoral degrees in Indonesia; development and adaption of at least 4 specialized in-services training programs and special program management development training; plans for new schools of public health which include identification of faculty members requireing additional cademic training; specification of library and other reference requirements.
5. Modern Management Technology: \$ 1,369
 A current survey funded under Project 270 will provide defenitive specifications for equipments and staff training needs.
- Funding from 327 will be used for develop computer and word processing capabilities in 16 provincial BKKBN offices, in headquarters offices, and in selected training and research institutions; provide technical assistance to simplify and focus the various existing reporting and data recording for immediate management needs.
6. Research and Development \$ 1,900
 The approach used will help to further increase Indonesian research abilities while responding flexibly to research opprotunities. The channels for research will be broadened to include participation from individuals, universities, non-government organizations as well as BKKBN and other GOI agencies, as appropriate. Findings will be disseminated to key decision makers as well as the research community. Activities include an intercensal survey; 25 studies; short-term training in population research methodologies for 100 persons. Research project ideas include topics such as: evaluation of mobile family planning team operations; manpower needs and quality of clinic staffs; studies on pilot project related to population/ development issues; studies on cost-effectiveness and continuation rates of various contraceptive methods; cost recovery; recurring costs as higher prevalence rates are achieved; role of the private sector expecially in urban areas.

Loan	\$15,900
Grant	\$ 7,500
<u>Total</u>	<u>\$23,400</u>

IV-I:
UNITED NATIONS FUND OR POPULATION ACTIVITIES
PROPOSED PROJECTS, 1979-80 TO 1983-84

The UNFPA has allocated approximately \$6,000,000 for a three year program, with the following budget breakdown. Since 1981 the UNFPA has reduced substantially its budget for Indonesia. Funds are allocated in the following areas:

FAMILY PLANNING SERVICES:

- Support for expansion of family planning services to outer island provinces to outer island provinces.
- Integration of primary health and nutrition services into existing family planning network.
- Urban family Planning.

INFORMATION, EDUCATION AND COMMUNICATIONS

- Population and family life education for workers, Armed Forces, School System, and Council of Churches.
- Family Planning IE and C

DATA COLLECTION

- 1980 Census and related activities.
- Expansion of BKKBN's data processing/monitoring.

OTHER AREAS

- Biomedical research.
- ASEAN module training.
- Strengthening local demographic and research institutions.
- Women in population and development activities.

IV-J
WORLD BANK POPULATION PROJECTS

<u>First Project</u> <u>(1972-1980)</u>	<u>Second Project</u> <u>(1977-1983)</u>	<u>Third Project</u> <u>(1980-1985)</u>
IDA: \$13.2 million	IBRD: \$24.5 million	IBRD: \$35.0 million
UNFPA: \$13.2 million	GOI: \$35.5 million	GOI: \$37.6 million
GOI: \$ 6.6 million		
<hr/>	<hr/>	<hr/>
Total \$33.0 million	Total \$60.0 million	Total \$72.6 million

Major Activities Under Third Project:

1. MCH/FP Service Delivery

- Construction of 95 MCH/FP Centers, 50 in-patient annexes at existing centers, and 21 provincial and 107 district warehouses for contraceptive supplies.

2. Management

- Construction and furnishing of 27 provincial BKKBN offices and 107 district offices.
- Provision of motorcycles for field supervisors.

3. Training

- Construction and furnishing of BKKBN Central Training Center, 17 provincial training centers, and 10 sub-provincial training centers.

4. Population Education

- Provision of 165 Mobile Information Units.
- Curriculum development, provision of textbooks, and teacher/supervisory training for national program.

V-A
NEW FAMILY PLANNING ACCEPTORS WITHIN OFFICIAL PROGRAM
1970-1983

Y E A R	T O T A L	Per cent accepting each contraceptive method				New acceptors per 1,000 married women aged 15-44
		Pill	I U D	Condom	Other*	
<u>A. Java-Bali</u>						
1970	53,103	27	55	18	-	5
1971	181,059	44	42	14	-	15
1972	519,330	54	41	3	2	40
1973	1,078,899	56	35	7	2	81
1974	1,369,077	63	21	15	1	101
1975	1,475,016	69	11	19	1	103
1976	1,785,908	68	13	18	1	126
1977	1,979,445	67	18	13	2	137
1978	1,934,806	71	17	9	3	138
1979	1,797,565	68	20	8	4	132
1980	1,772,174	68	20	8	4	131
1981	2,145,402	68	19	8	5	155
1982	2,075,029	62	23	6	9	145
1983	2,825,938	56	30	5	9	192
<u>B. Outer Islands I</u>						
1975	117,875	66	17	14	3	24
1976	180,677	69	16	11	4	36
1977	233,345	69	16	11	4	45
1978	313,662	73	14	7	6	62
1979	418,228	75	11	8	6	82
1980	400,912	75	11	8	6	72
1981	768,992	73	9	12	6	135
1982	717,090	72	13	5	10	119
1983	851,598	72	13	8	7	135
<u>C. Outer Islands II</u>						
1980	56,705	68	15	7	10	28
1981	136,850	63	21	7	9	66
1982	174,778	59	21	7	13	82
1983	207,440	59	23	5	13	91

Source: BKKBN Reporting and Recording Statistical Summaries.

Note: All data are presented by Indonesian Fiscal Year (April 1 through March 31). For example, April 1, 1982, through March 31, 1983, is reported as 1983.

*Other includes injectables and voluntary sterilization.

V-B
CURRENT CONTRACEPTIVE USERS IN OFFICIAL FAMILY PLANNING
PROGRAM BY YEAR, 1971-1983, BY PROVINCE
(PER CENT OF MARRIED WOMEN 15-44
USING MODERN CONTRACEPTIVES)

Year	1971	1972	1973	1974	1975	1976	1977	1978	1979	1980	1981	1982	1983
Total for country	1	2	6	9	13	17	19	23	27	31	36	39	48
1. East Java		3	11	19	27	32	34	40	50	57	60	65	70
2. Yogyakarta		4	10	14	16	18	19	27	27	50	55	65	66
3. Bali		7	15	22	27	32	36	43	46	50	54	62	67
4. Central Java		2	6	9	13	17	20	26	36	44	52	49	56
5. West Java		2	5	8	11	15	19	23	24	25	32	34	46
6. Jakarta		4	7	9	11	13	15	21	22	20	25	27	41
1. West Nusa Tenggara					1	2	5	8	10	13	24	41	47
2. South Sulawesi					2	4	6	10	8	13	23	34	47
3. South Kalimantan					1	5	7	14	15	19	27	32	43
4. North Sulawesi					2	11	18	26	21	30	35	30	44
5. West Sumatra					1	3	6	9	10	14	20	27	33
6. Lampung					1	3	5	9	17	20	28	25	39
7. West Kalimantan					1	2	4	8	6	7	13	25	40
8. North Sumatra					2	4	7	9	11	13	13	24	40
9. South Sumatra					2	4	5	7	9	9	13	20	34
10. Aceh					1	3	5	6	6	8	15	18	29
1. Bengkulu										9	22	28	35
2. East Kalimantan										7	13	14	20
3. Jambi										5	10	14	22
4. Riau										2	8	10	13
5. Central Sulawesi										3	8	10	17
6. Central Kalimantan										4	7	10	19
7. South East Sulawesi										3	7	8	11
8. East Nusa Tenggara										1	4	7	10
9. Maluku										2	4	6	6
10. West Irian										1	3	4	7
11. East Timor										0	0	2	2

Source: BKKBN, Monthly Service Statistics Reports.

Note: All data are presented by Indonesian Fiscal Years (April 1 through March 31). For example, April 1, 1982 through March 31, 1983 is reported as 1983.

V-C
MARRIED COUPLES OF REPRODUCTIVE AGE,
CURRENT CONTRACEPTIVE USERS, AND CURRENT USERS
AS PER CENT OF MCRA, BY PROVINCE, MARCH 1983

Province	Married couples of reproductive age (15-44)	Current contraceptive users	Current users as per cent of MCRA
TOTAL FOR COUNTRY	23,333,008	11,211,285	48%
A. PHASE IV			
1. East Java	4,527,215	3,174,897	70
2. Bali	385,994	257,075	67
3. Yogyakarta	423,955	280,683	66
4. Central Java	3,968,930	2,212,737	56
B. PHASE III			
5. N . T . B	433,783	202,209	47
6. South Sulawesi	952,019	449,421	47
7. W. Java	4,370,702	2,000,312	46
8. North Sulawesi	336,164	148,430	44
9. South Kalimantan	327,295	142,252	43
10. Jakarta	1,073,572	444,677	41
11. North Sumatera	1,361,877	547,049	40
12. Lampung	800,583	311,627	39
13. West Kalimantan	392,369	153,314	39
14. Bengkulu	126,646	44,138	35
C. PHASE II			
15. South Sumatera	734,715	251,614	34
16. West Sumatera	541,227	181,089	33
17. Aceh	419,023	122,697	29
18. Jambi	237,293	52,079	22
19. East Kalimantan	209,629	42,751	20
20. Central Kalimantan	156,374	29,478	19
21. Central Sulawesi	209,391	36,468	17
D. PHASE I			
22. Riau	321,965	41,660	13
23. South East Sulawesi	154,944	16,804	11
24. N . T . T	372,831	38,617	10
25. West Irian	180,051	12,835	7
26. M a l u k u	227,331	14,222	6
27. East Timor	87,130	2,150	2

Source: BKKBN, Monthly Service Statistics Report, March 1983

V-D
CURRENT CONTRACEPTIVE USE, BY METHOD, WITHIN OFFICIAL PROGRAM,
BY PROVINCE, AS A PER CENT OF
MARRIED WOMEN AGED 15-44, MARCH 1983

Province	Pill	IUD	Condom	Inject- able	Other	Total
Total for Indonesia	29	12	3	3	1	48
A. JAVA -BALI	52	17	3	3	2	57
1. East Java	43	23	2	1	1	70
2. Bali	7	51	3	1	4	67
3. Yogyakarta	20	20	18	1	6	66
4. Central Java	33	15	5	3	2	57
5. West Java	27	11	*	7	1	46
6. Jakarta	15	15	2	5	4	41
B. OUTER ISLANDS I	29	6	3	2	1	40
1. W. Nusa Tenggara	39	6	1	*	*	47
2. South Sulawesi	40	4	1	2	1	47
3. North Sulawesi	24	14	*	4	1	44
4. South Kalimantan	38	2	1	1	1	43
5. North Sumatra	23	4	7	2	2	40
6. Lampung	31	5	1	1	*	39
7. West Kalimantan	21	3	3	1	1	39
8. South Sumatra	24	4	4	1	1	34
9. West Sumatra	16	11	3	2	1	33
10. Aceh	24	2	2	2	2	29
C. OUTER ISLANDS II	9	3	1	2	*	15
1. Bengkulu	21	10	2	1	*	35
2. Jambi	16	4	1	2	*	22
3. East Kalimantan	12	3	1	3	1	20
4. Central Kalimantan	14	2	1	3	*	19
5. Central Sulawesi	11	4	*	1	1	17
6. Riau	7	3	1	1	1	13
7. South E. Sulawesi	8	1	1	1	*	11
8. E. Nusa Tenggara	4	3	1	1	1	10
9. Maluku	2	2	*	1	1	6
10. West Irian	2	2	1	1	1	7
11. East Timor	2	*	*	*	*	2

Source: BKKBN, Monthly Service Statistics Report, March 1983.

* = less than 1%.

Figures may not add to totals due to rounding.

V-E
COMPARISON OF NEW ACCEPTORS AND CONTINUING USERS
FOR 1982 AND 1983, BY PROVINCE

Province	New acceptors			Current users			Current users as % of MWRA		
	March 1982	March 1983	Increase	March 1982	March 1983	Increase	March 1982	March 1983	Increase
	(000)	(000)	(000)	(000)	(000)	(000)	(000)	(000)	(% points)
<u>PHASE IV</u>									
1. East Java	528	623	95	2,886	3,175	289	65	70	5
2. Bali	47	50	3	232	259	25	62	67	5
3. Yogyakarta	53	53	-	271	281	10	65	66	1
4. Central Java	668	864	196	1886	2213	327	49	56	7
<u>PHASE III</u>									
5. West Nusa Tenggara	75	67	-8	172	202	30	41	47	6
6. South Sulawesi	123	115	-8	315	449	134	34	47	13
7. West Java	597	1,002	405	1,418	2,000	582	34	46	12
8. North Sulawesi	40	47	7	96	148	52	30	44	14
9. South Kalimantan	49	42	-7	100	142	42	32	43	11
10. Jakarta	182	235	53	275	445	170	27	41	14
11. North Sumatera	137	219	82	305	547	242	24	40	16
12. Lampung	74	104	30	184	312	128	25	39	14
13. West Kalimantan	44	54	10	99	153	54	25	39	14
14. Bengkulu	15	19	4	3	44	11	28	35	7
<u>PHASE II</u>									
15. South Sumatera	72	99	27	140	252	112	20	34	14
16. West Sumatera	69	63	-6	142	181	39	27	33	6
17. Aceh	33	41	8	74	123	49	18	29	11
18. Jambi	22	34	12	32	52	20	14	22	8
19. East Kalimantan	21	26	5	27	43	16	14	20	6
20. Central Kalimantan	22	20	-2	16	29	13	10	19	9
21. Central Sulawesi	17	22	5	21	36	15	10	17	7
<u>PHASE I</u>									
22. Riau	24	26	2	29	42	13	10	13	3
23. South East Sulawesi	11	9	-2	12	17	5	8	11	3
24. East Nusa Tenggara	21	27	6	25	39	14	7	10	2
25. West Irian	7	10	3	6	13	7	4	7	3
26. Maluku	11	12	1	11	14	3	6	6	-
27. East Timor	3	3	-	2	2	-	2	2	-
T O T A L	2,967	3,885	918	8,809	11,211	2,402	39	48	9

Source: BKKBN, Monthly Service Statistics Report, March 1983.

V-F
COMPARATIVE POPULATION DATA FOR THE WORLD AND
THE 20 LARGEST DEVELOPING COUNTRIES -1982

Geographic areas	Population (millions)	Birth rate per 1,000 popula- tion	Death rate per 1,000 popula- tion	Rate of natural increase (%)	1980 per capita GNP (US\$)	Per cent of	
						all develop- ing countries (%)	the world (%)
World	4,585	29	11	1.7	2,620	-	-
More Developed	1,152	15	10	0.6	8,130	-	25.1
Less Developed	3,434	33	12	2.1	680	-	74.9
Countries							
1. China	1,000	22	7	1.4	290	29.1	21.8
2. India	714	35	15	2.0	240	20.8	15.6
3. <u>INDONESIA</u>	<u>151</u>	<u>34</u>	<u>16</u>	<u>1.7</u>	<u>420</u>	<u>4.4</u>	<u>3.3</u>
4. Brazil	128	32	9	2.4	2,050	3.7	2.8
5. Bangladesh	93	47	19	2.8	120	2.7	2.0
6. Pakistan	93	44	16	2.8	300	2.7	2.0
7. Nigeria	82	50	18	3.2	1,010	2.4	1.8
8. Mexico	71	32	6	2.5	2,130	2.1	1.5
9. Vietnam	57	37	9	2.8	N A	1.7	1.2
10. Philippines	52	34	8	2.6	720	1.5	1.1
11. Thailand	50	28	7	2.1	670	1.5	1.1
12. Turkey	48	33	10	2.2	1,460	1.4	1.0
13. Egypt	45	43	12	3.1	580	1.3	1.0
14. Iran	41	44	14	3.1	N A	1.2	0.9
15. Rep. of Korea	41	19	5	1.4	1,520	1.2	0.9
16. Burma	37	39	14	2.4	180	1.1	0.8
17. Ethiopia	31	50	25	2.5	140	0.9	0.7
18. Zaire	30	46	19	2.8	220	0.9	0.7
19. Argentina	29	25	9	1.6	2,390	0.8	0.6
20. Colombia	26	28	8	2.0	1,180	0.8	0.6

Source: Population Reference Bureau, 1982 World Population Data Sheet.

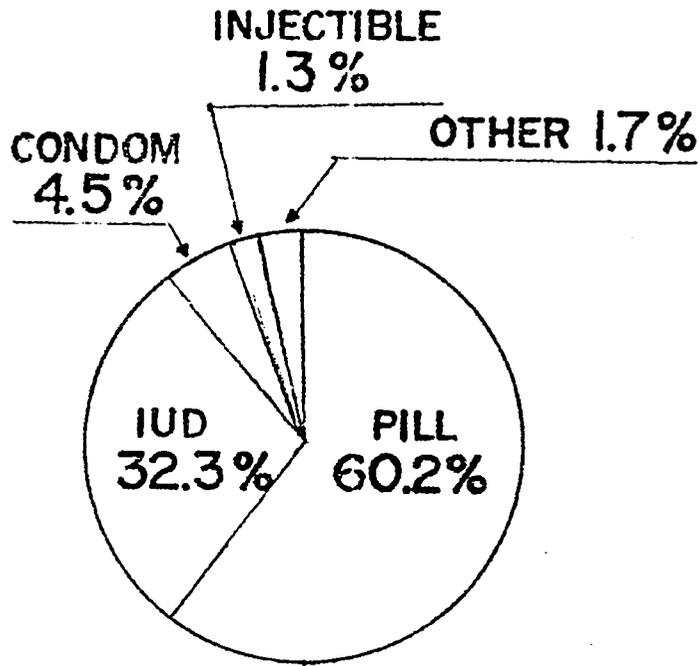
Note: Figures for Indonesia may vary from those found elsewhere in this booklet. We have used the Population Reference Bureau estimates for Indonesia to be consistent with estimates for other countries.

Figures may not add to totals due to rounding.

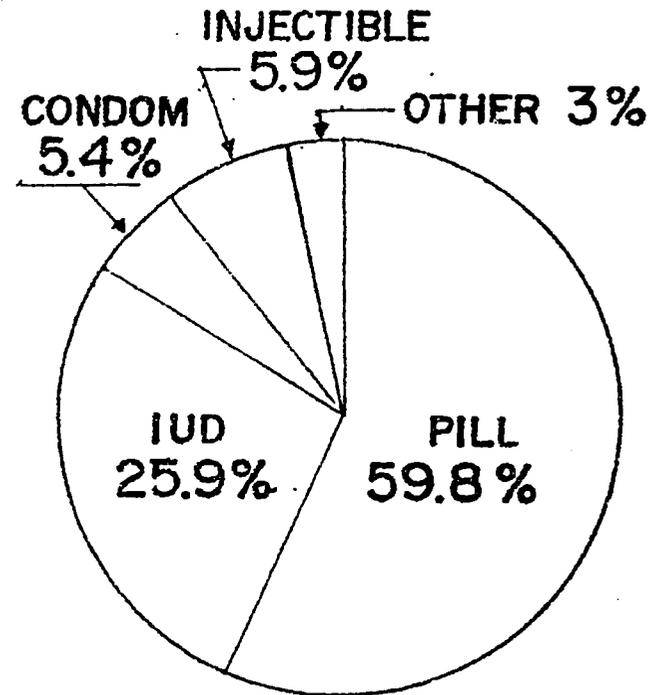
V-6

CONTRACEPTIVE METHODS

OF CURRENT USERS
1978 and 1983



MARCH 1978
4,687,723 current users



MARCH 1983
11,211,285 current users

31

