

Indonesia

2024 SNAPSHOT

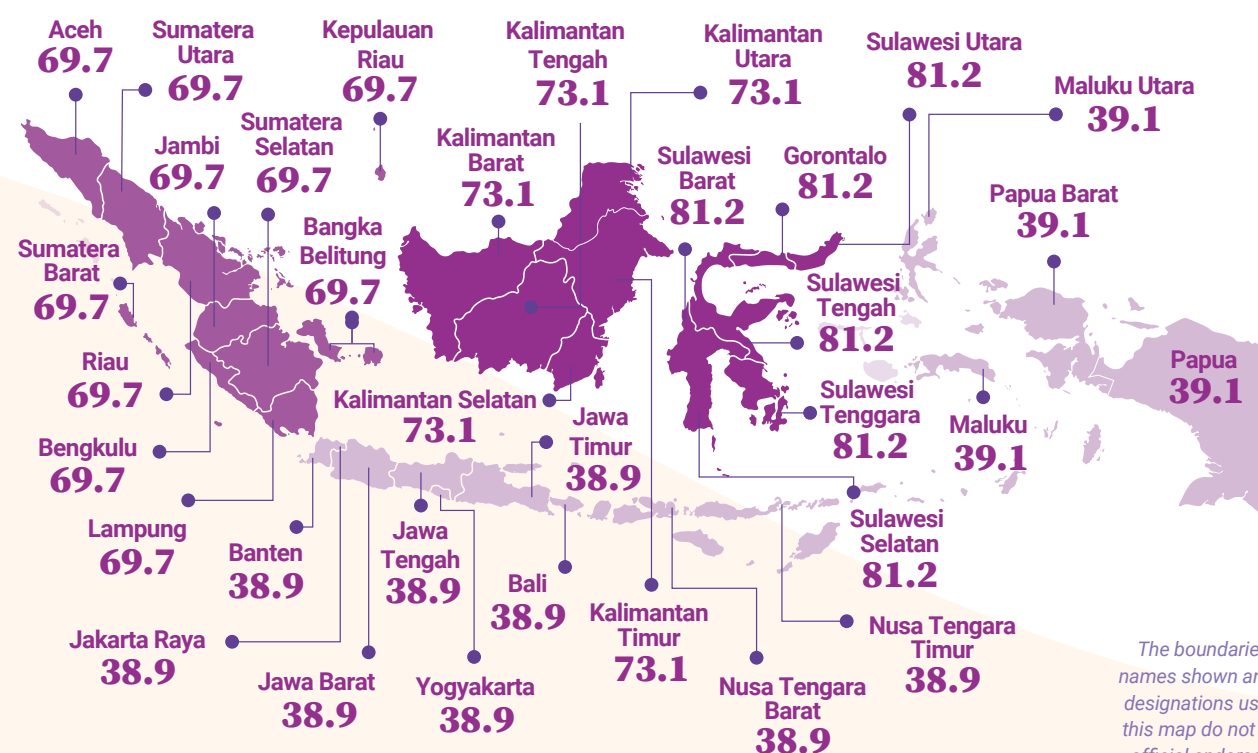
Sociopolitical context

Indonesia, the world's fourth most populous nation, is grappling with a dual health challenge of both communicable and non-communicable diseases. The Government is actively working to fortify its healthcare system and achieve universal health coverage. The country is also highly susceptible to natural disasters, and to a lesser extent, localized conflicts and human rights issues, particularly in the Papua region. Indonesia's decentralized governance and cultural and religious sensitivities pose challenges to open dialogue on sexual and reproductive health.

FGM context

Female genital mutilation is a deeply rooted practice often justified by cultural and religious norms. Midwives and traditional practitioners are mainly reported to perform FGM (48 and 51 per cent, respectively). The majority of reported cases (58.6 per cent) are non-invasive "symbolic" procedures. New government regulations (No. 28 of 2024 and a 2025 Ministry of Health regulation) acknowledge FGM as a human rights violation and outline steps for its elimination.

Latest subnational FGM prevalence (percentage) among females aged 15–49 years



Source: 2024 SPHPN.

The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the United Nations.

Social norms

No data available for descriptive and injunctive norms or for outcome expectancies.

Proportion of individuals who believe FGM should be stopped

No data available.

Highlights of 2024 programme results

TARGETS

* No targets were set for 2024



270

RESULTS

The number of people who engaged in a public declaration that they will abandon the practice of FGM



85,000

Number of individuals (boys, girls, women and men) reached by mass media messaging on FGM, women's and girls' rights, and gender equality

Spotlighted interventions

Expanding and intensifying the influence of the Joint Programme

→ The Joint Programme facilitated the expansion of FGM monitoring, planning and medicalization regulation at a national scale. For instance, a partnership with the National Development Planning Agency resulted in successful integration of an FGM prevalence metric into the nation's 2025–2029 National Medium-Term Development Plan and the Ministry of Women's Empowerment and Child Protection's strategic plan. Furthermore, the 2024 reproductive health regulation (No. 28) clause on ending FGM and its medicalization is an important milestone that could potentially positively influence national law ratification in Indonesia and elsewhere in the region.

Financing with diversified funding mechanisms

→ To scale up interventions on FGM, the Indonesian Ministry of Health allocated a national budget for prevention and elimination. This is a crucial indicator of commitment to eliminating FGM and ownership of the FGM programme and its activities. In 2024, the Government co-funded pilot activities in three provinces, with the Ministry of Health providing \$33,740.



IN-COUNTRY PARTNERS

Number	List of partners*
5	Indonesian Women Ulama Congress (KUPI), Ministry of Health, Ministry of Women Empowerment and Child Protection, National Commission on Violence against Women, Puan Amal Hayati

** List is a mix of implementing and strategic partners*