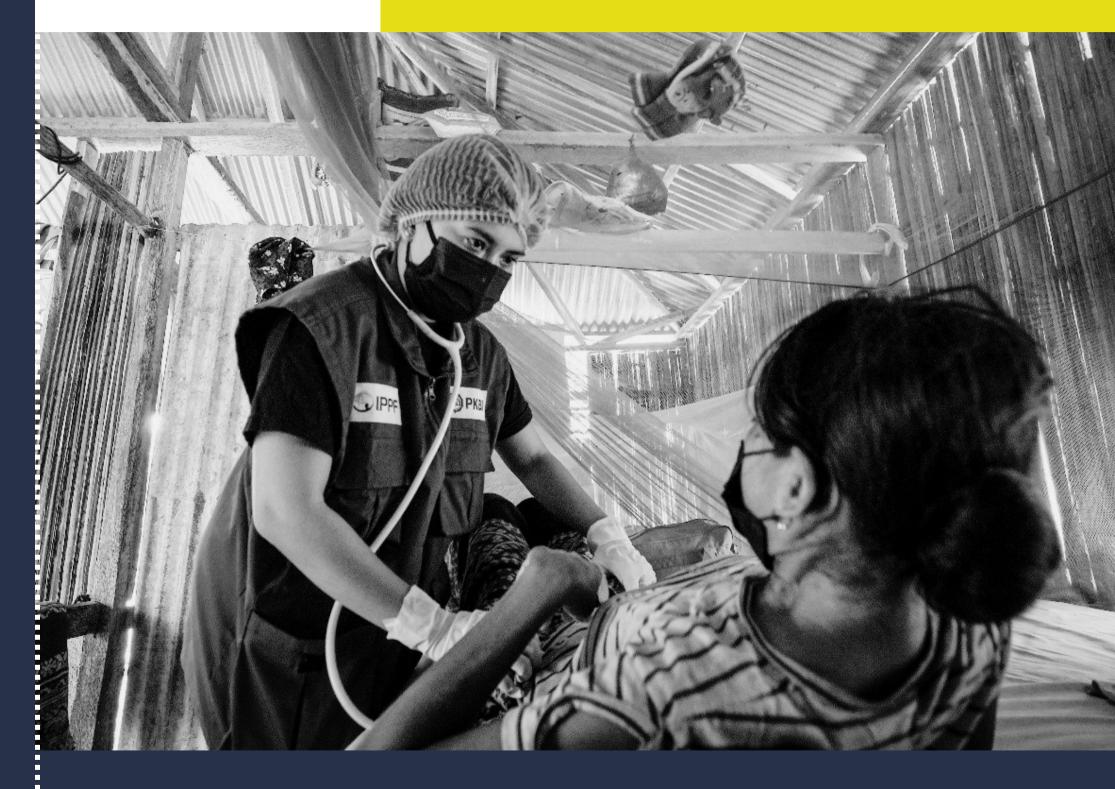


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Annual Report

IPPA INCLUSION IN PANDEMIC YEAR



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Who Are We?

IPPA IN A NUTSHELL

The Indonesian Planned Parenthood Association (IPPA) is a non-governmental organization that has been the pioneer of the Planned Parenthood movement since 1957.

IPPA has contributed to developing the network of Planned Parenthood trainers and has trained medical personnel and midwives to provide reproductive and sexual health services.

Since 1968, IPPA has been initiating the program of reducing maternal mortality and in 1970 the New Order government adopted IPPA's reproductive health program through the establishment of BKKBN, the National Coordinating Agency of Family Planning.

In March 2020, IPPA formed a strategic national partnership with BKKBN that has been transformed into the National Agency of Population and Family Planning, followed by technical collaborations between every Regional IPPA and Regional BKKBN.

At present, the focus of IPPA has been to comprehensively accommodate the sexual and reproductive health rights of the public through clinical services, education, humanitarian programs, youth programs, and providing services to vulnerable groups.

In December 2022, IPPA will have its 65th Anniversary.
In the future, IPPA will carry on to endeavor for developing responsible and inclusive Indonesian families and society.



Foreword

DR. ICHSAN MALIK, MSI CHAIRMAN OF IPPA NATIONAL BOARD

Throughout 2020, IPPA had been on a steep road with sharp turns. The collapse of the guesthouse's business, the ending of all long-term donor programs, and the Covid19-related deaths of more than 30 IPPA volunteers commenced the year with an austere start for IPPA. My thoughts and prayers to the IPPA volunteers and staff, may their fighting spirits stay with the surviving IPPA's family.

The National Board had to provide strategic direction. We asked the Executive Director to conduct a consolidation with the staff and volunteers, to strive for efficiency at every level, and to downsize the personnel. The executives then formed several teams and working groups to provide space for maneuvering for governance improvement in all sectors.

Having managed to set aside a National Reserve Fund, IPPA succeeded in settling the debts of Hang Jebat Guesthouse employees' salaries (since 2018), in addition to covering other debts of as many as 3.7 Billion. Furthermore, IPPA has gained ground in purchasing a new asset namely a shophouse of three stories in Duren Sawit, East Jakarta area, to replace the Kebon Kacang Guesthouse which had to be sold to cover operating costs.

Hereinafter, in mid-2020, IPPF selected IPPA to receive the MA Governance Initiative project. Under the directives of Central IPPF in London, IPPA was urged to carry out a review in particular around its governance and organizational structure.

IPPA has also conducted improvement and updating of its guidelines. From Financial SOPs, Employment SOPs, and Volunteers SOPs, IPPA straightened them up to meet the standards of IPPF accreditation.

Amidst the Covid19's dreadful outbreak throughout 2020, IPPA had to alternate operating locations executed working restrictions including the Working From Home arrangement, and conducted quarantine for Covid19-exposed staff families.

Meanwhile, a number of potential donors started to see IPPA in a new light and the Executives have succeeded to develop proposals for strategic programs with anticipation that the programs would extend the life of IPPA in the areas of Sexual and Reproductive Health Rights (SRHR) and Planned Parenthood.

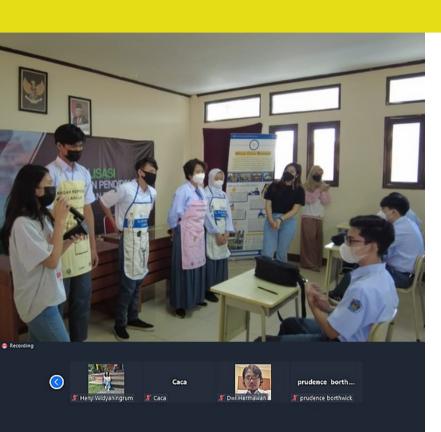
Approaching the end of 2020, the National Board directed the Executive Team to organize the 2021 Plenary Meetings and I had confidence that IPPA could overcome the Covid19 pandemic storm, as a winner.

Ichsan Malik



2020 End of Year Note

EKO MARYADI EXECUTIVE DIRECTOR OF IPPA







2020 is the year of the pandemic, a hard year for everyone.

The Covid-19 pandemic has caused turmoil in people's lives all over the world, as well as in Indonesia. Ever since the government announced the first case of Covid positive in March 2020, IPPA-at regional and national levels-has been facing incessant ordeals.

The closure of the National IPPA Guesthouse was a direct impact on the pandemic to IPPA since there had been no visitors or clients to rent the rooms or the meeting hall. The barren guesthouse that continually had been facing operational losses since 2017, got worsened financially during the Covid-19 pandemic. The crisis took its toll in 2020 when the National IPPA had to postpone and even cut the salaries of National IPPA staff due to the need to subsidize the salaries of the Guesthouse employees and the lack of income in National IPPA finance. To halt this financial crisis, the National Board of IPPA has formed a National Asset Team to formulate a scheme of asset handling and financial crisis management for the organization.

Regarding IPPA's projects, most of the major ones --including RHRN, SST, and Peduli that had been running in the past few years-would be completed in 2020. IPPA had to terminate work contracts with a number of project staff and cut the employee benefits for a few months as an efficiency measure for the organization.

The Pandemic Era of Working Online

The Corona or SARS Cov-2 virus pandemic has brought changes in conditions of work, health, social, cultural, economic, and domestic politics. Almost in every province, the central government implemented the program of social movement restrictions (PSBB and PPKM) to stop the transmission of Coronavirus. They also provided medical facilities to take care of the tens of thousands of Covid patients in the regions.

To overcome this situation, IPPA has been continuously carrying out an online working system from home (WFH) and office working (WFO). About 75 percent of program activities have been transformed from offline to online through digital meeting forums such as Zoom, Google Meet, and Skype.

Each staff member was required to comply with the health protocols at the office and public areas, by wearing masks, keeping a safe social distance, staying away from crowded areas, washing hands regularly, daily checking body temperature, and following the weekly shift schedule of WFO-WFH. Such arrangements had been carried out throughout 2020 until May 2021 when Indonesia had gone through the second wave of Covid-19 spread outbreak.

The adverse times for IPPA were that during 2020, almost every day we received reports of Covid positive or death of regional IPPA volunteers and staff. There had been 32 staff and volunteers who were Covid positive with most having already recovered, while there were 24 volunteers and staff of IPPA who passed away between April 2020 and July 2021.

The services of IPPA Clinics in 16 regions and 8 branches were also hit by the Covid-19 pandemic. Almost all services provided by IPPA Clinics such as counseling, contraceptives, IMS, HIV, gynecologist & obstetrician, urology, pediatric, and CAC services, had been drastically declining between 72 to 95 percent. Several branch clinics had to be closed due to operational and medical staff crises.

In such limited circumstances, IPPA had to finalize its projects and commitment to donors, including Rutgers, Arrow, The Asia Foundation (TAF), and Global Fund. Thanks to the commitment and hard work of the entire staff of IPPA, in April 2021 all projects had been well completed.

Behind any hardship, there are blessings and convenience.

News from the youth program: IPPA's Youth Forum successfully held its first Online Congress in October 2020. They have selected the representatives for the new National Youth Forum and reinforced the connectivity among IPPA Youth Centers in the regions/provinces.

By the end of 2020, IPPA's National Board and Asset Team have succeeded to capitalize on the Kebon Kacang Guesthouse Building. IPPA had therefore been able to cover all the debts of the Association and to pay several years' pension (the rights) of every guesthouse employee. IPPA could also afford to purchase a new building in East Jakarta and reserve an endowment fund of IDR 25 billion.

Arriving in the challenging year of 2021, the entire staff and volunteers of IPPA at national and regional levels continue to fortify their solidity and solidarity, build communications, and reconstruct the organization to rise from the recent hardship. The efforts to build networks, communication, and advocacy on current issues have received positive responses from partners and donors. The cooperation and collaboration between IPPA and BKKBN have also been expanding in 14 regions.

The hard work and contributions of IPPA have been widely welcomed by the public and the government. It is reflected by the awards received from government agencies such as the National Development Planning Agency (Bappenas), Ministry of Internal Affairs, Ministry of Law and Human Rights (Directorate General of Penitentiary), and provincial & regional administrations, on IPPA's contributions in SDGs program, upskilling in Child Detention Centers, empowerment of marginalized groups, and natural disasters management through IPPA's Humanitarian program.

When the Covid pandemic has subsided, IPPA should hit the running track to catch up with the many lags. IPPA has been continually developing the cooperation project scheme of clinic empowerment, vaccination program, and inclusion-based social health service, with other institutions with the vision and mission of public health service.

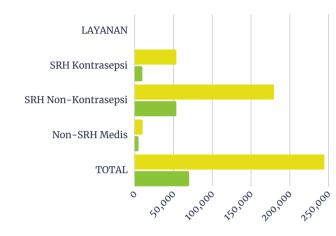
IPPF as the umbrella organization of IPPA

At the IPPF Congress in New Delhi in November 2019, attended by members of the federation from 124 countries, IPPA's Executive Director witnessed the agreement to start IPPF's radical change in its governance and financial reform. Through the motto of "IPPF is changing for choice by choice", the umbrella organization of IPPA has agreed to reform itself to become a swift, modern, and accountable Planned Parenthood Federation.

As a subsidiary, IPPA will follow the stream of change and the direction of IPPF, specifically the Regional IPPF (ESEAOR). IPPA is also committed to providing the best public service in sexual and reproductive health with a broader, modern and accountable approach.

Life Is Not About Waiting for the Storm to Pass But Learning to Dance in the Rain.

Overview of Reproductive Health Situation in 2020



DECLINING REPRODUCTIVE HEALTH SERVICES

The Covid-19 pandemic throughout 2020 has caused fear. People were afraid to go out and access the services at the clinics. The table below shows that the number of reproductive health services at IPPA's clinics had been declining throughout the year.

Sexual Reproductive Health (SRH) and contraception services, including birth control pills, condoms, IUDs, and other contraception, had been decreased by 82%. Non-contraceptive SRH services including Sexually Transmitted Infections (STI), HIV & AIDS, Gynecology, Obstetrics, Fertility, Sexual & Gender-Based Violence (SGBV) services, and psychological counseling had been decreased by 70%. Meanwhile, non-SRH medical services had declined by 52%.

The decline in reproductive health services in various clinics during the pandemic had a huge impact on women's and children's health. In March 2021, the National Population and Family Planning Badan (BKKBN) found that 10% of contraceptive users in 34 provinces had obstacles to access contraceptives[1], this reflects the pandemic's direct impact on this service. The BKKBN estimated that a onemonth decline in contraceptive use in Indonesia could increase the risk of pregnancy by 15% [2].

Many patients suffered due to the disruption in the health services for mother and child and for women. Cases of unwanted pregnancy, child stunting, and infant and maternal mortality had increased. The National Commission for Women's Rights also reported that gender-based violence cases had steeply risen.

Since the outbreak of Covid-19, the data emerging from reports by front liners have shown that the number of all sexual and gender-based violence (SGBV), particularly domestic violence, has risen. It was undoubtedly a direct impact of the stay-at-home and online schooling policies for school-age children.

UN Women defines SGBV as a shadow pandemic, which should be addressed collectively and globally. The Legal Aid Association for Women (LBH Apik) Jakarta has documented 59 cases of domestic violence, rape, sexual violence, and online pornography[3]. From the same source, by October 2020 SGBV cases have increased by 63 percent during the pandemic[4]. The increasing number of early marriages and forced marriages showed that adolescent girls are at high risk to become victims of violence[5].

Sexual and reproductive health services, in particular for the poor and vulnerable, were neglected. The number of services for People Living With HIV/AIDS (PLWHA) and key populations in HIV & AIDS prevention programs in Indonesia has decreased by 50% since early 2020.

This is an overview of the reproductive health situation in 2020 that should be addressed by IPPA and other stakeholders.

Collaboration of IPPA and BKKBN in Family Development Program

The spirit of the Indonesian Planned Parenthood Association is to help manifest responsible and prosperous families and to develop quality Indonesian human resources, by addressing the physical, mental, and socio-spiritual health aspects.

Commensurate with IPPA, as a non-ministerial government institution, BKKBN has the task of implementing population and family planning programs to create small, happy, and prosperous families.

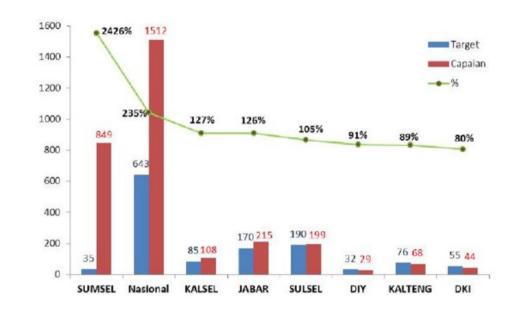
On March 5, 2020, PKBI signed a Memorandum of Understanding with BKKBN as part of the efforts to build synergy in family development, population, and planned parenthood programs. The signatories of the MoU were Chairman of IPPA National Board DR. Ichsan Malik, M.Si and Head of BKKBN dr. H. Hasto Wardoyo, Sp.OG (K). The signing was broadcasted virtually to every provincial and regional IPPA throughout Indonesia through a video conference channel.

IPPA and BKKBN have agreed on a five-year cooperation format within the scope of Advocacy, Communication, Information, and Education of the Bangga Kencana Program, developing youth networks throughout the regions, providing contraceptives and health care services for families, while also driving improvements in human resource competencies, data utilization, information, monitoring, evaluation, and learning.

Following the IPPA-BKKBN's MoU, regional BKKBN and IPPA offices throughout Indonesia immediately develop regional MoUs or agreements on operational cooperation according to the necessities of each region.

"Appreciate others the way you want to be appreciated, since everyone has the right to be good and do good deeds. To make humans humane is more essential than to give judgment towards others. Spread love!" – D. Anisa Sunija (Nasional Board of IPPA)

Workshop on Safe Area for Transgenders



Various transgender communities involved in the Peduli program (2017-2020), continue to be keenly involved in community activities, including social kinds.

In general, the social acceptance of transgenders has been developing. The absence of persecution, discrimination, or stigmatization against transgenders, has made them feel safe and secure. They interact and mingle in their daily life with the community in a spirit of kinship and healthy social relations.

The following data show how the Peduli program (TAF IPPA) has succeeded nationally in driving transgender participation to be actively involved in the community.

The national achievement is 235% or 1,512 transgenders have engaged in social activities. Four provinces, South Sumatera, South Kalimantan, West Java, and South Sulawesi, have succeeded in achieving the target beyond 100%.

South Sumatera Province, showed the highest achievement, above 2,000 percent, with transgender involvement reaching 849 people out of the 35 targets. The second place is South Kalimantan which reached 127%. Of the 85 targeted transgenders, it turns out more than 100 transgenders have been participating in community activities.

West Java Province was third place in achievement percentage, at 126 percent. South Sulawesi Province managed to reach above 100%, with 199 transgenders from 190 targeted to engage in public space activities. Meanwhile, despite being lower than 100% transgender involvement, Central Kalimantan and DKI Jakarta have each reached above 80% target.

It was affirmative that this program will be carried out continuously. Some transgender communities have even signed cooperation agreements with various stakeholders. One of them was reflected on a Village Head Certificate which proclaimed "Asri Mulya Trans 500 Village and Atu-Atu Village are Inclusive Villages that welcome diversity".

The success of the Transgender Pillar of Peduli Program in creating significant changes in the cultural and structural domains was actualized in Central Kalimantan, South Kalimantan, and South Sumatera. While policy structural changes came about in Central Kalimantan and South Kalimantan. The changes in each province are described below:

Central Kalimantan has a transgender organization called IWAPA (Palangkaraya Transgender Association). During the celebration of Palangkaraya's anniversary, IWAPA participated in the cultural parade held. The presence of IWAPA in the cultural parade showed that the public has welcomed the transgender community as part of them. Transgenders have been directly involved in government-organized activities.

Such a condition deserves appreciation and proves that public acceptance has been growing where initially they did not even acknowledge transgenders' existence. Nevertheless, with the PEDULI program, a collaboration of IPPA and The Asia Foundation, there have been more and more transgender figures who encourage their community to make public appearances. That was the momentum of acculturation and cultural acceptance by the government and society toward transgenders. Hopefully, there will be more safe areas for transgenders. Eventually, social stigmas and discrimination against transgenders will diminish and disappear for good.

Changes in structure and legality

As the umbrella organization for transgenders in Palangkaraya, IWAPA had been through significant changes since the Transgender Pillar of Peduli Program was carried out in Central Kalimantan. One of them was the improvement of management structure and they have even been given a Secretariat room at the National Unitary and Politics Office of Central Kalimantan Province. Furthermore, IWAPA has been officially registered as a mass organization according to Law No. 17 of 2013.

Ever since, the transgenders' association could not be disbanded by anyone except by a court decision, with the members of the organization having to agree to dissolve themselves. This change showed a structural change from being merely a community organization as a place of gathering for transgenders, to the present IWAPA that has equal footing with other mass organizations.

IWALATA IN SOUTH KALIMANTAN

Besides IWAPA, there is also IWALATA, the Transgender Association of Tanah Laut Regency, South Kalimantan Province. After they were involved in the Tanah Laut Gowes Cross Country (GCC) activities in 2019, a bicycle ride event, IWATALA has undergone significant changes. The GCC is an annual activity of the Tanah Laut Regency Government which was previously opened only for non-transgender citizens. However, since the public has become more familiar with IWATALA-organized activities such as Zumba gymnastics and volleyball games, finally the riding committee invited IWATALA to participate in the committee of the bike ride event.

There were more than five thousand participants at the ride event. Many were fascinated to see the transgenders joining the event attended by participants from provinces outside Kalimantan. The involvement of transgenders in a large-scale public event in Tanah Laut, South Kalimantan, showed that the transgender community in South Kalimantan has been openly recognized by the public and the government. There was no more stigma, discrimination, or persecution that the transgenders were used to experiencing.

The public acceptance—and also the government acknowledgment—of transgender organizations resulted in structural changes. IWATALA has successfully obtained a license for a business owned by IWATALA members, therefore they could install a billboard for their Tiara Salon business. The license requirements received dispensation and convenience from the Office of Investment and One–Stop Service, hence they could run it just like any other formal business.

Abort the Family Resilience Bill, Pass the Bill on Sexual Violence Crime

The leak of the Family Resilience Bill draft, dated February 7, 2020, has triggered a public debate. The Indonesian Planned Parenthood Association (IPPA) has monitored closely the progress of the Family Resilience Bill and considered the substance of the bill troublesome and did not reflect the principle of equality or non-discrimination.

THE CONCEPT OF CONSERVATIVE FAMILY

The Family Resilience Bill introduced a conservative binary family model or system, with a firm and steady division of roles in the family. For example, the wife's role is obligatory as the housekeeper.

The normative concept and definition of "a family" are indeed legitimate. Nevertheless, standardizing what is a good and right family concept according to the roles of family members based on gender, that's one problem. The state has no right to dictate the concept of a gender-biased family, that only refers to certain belief values with no space for differences or personal expression. According to the theory of Bowen family systems[1], each unit in the family has its own emotional feelings.

Therefore, forcing each unit to be interdependent despite promoting a harmonious and cooperative family, could also trigger problems and tensions within the family.

Family is not a static concept nor it must be standardized by justifying one theory view (the Family Resilience Bill) and ignoring the others. The law should not be built on the concept of devaluing the responsibility of parents to their children, demeaning the competence of children to be responsible for their decisions, or regulating husband and wife relations technically.

THE CONCEPT OF FAMILY, IPPA STYLE

It has been more than five decades since IPPA introduced the concept of a responsible family[2] which upholds five main dimensions, specifically:

- 1) The dimension of birth: that every birth is expected, is a conscious act and must be planned. This is the initial point for the concept of Planned Parenthood;
- 2) The dimension of health: the attitudes and behaviors for healthy living are essential to be promoted and enacted in the family;
- 3) The dimension of education: the education of boys or girls in the family shall not be differentiated, everything must be enacted equitably and in a communicative way;
- 4) The dimension of welfare: family dignity comes first, not merely having wealth. To be rich with no dignity is meaningless;
- 5) The dimension of the future: the whole family must be prepared to encounter the challenges of a growingly complex future and should be prevented from being confined to irrelevant or conservative values.

In the Family Resilience Bill, equality was not mentioned as an indicator to safeguard the family. This has created dividers between the roles of family members that are no longer adaptable. The family became a structure of classed humans such as people and their king. This bill did not liberate family members. It instead restrained them.

MENTAL HEALTH IS NOT A DEVIATION

Another issue in the Family Resilience Bill was that diverse, non-mainstream gender identities and sexual orientations such as LGBT were considered non-physical threats (Article 50 in the bill draft). This bill also considered homosexuals as sexual perversions. If these two points were accommodated on the bill, they would allow justification for the persecution by certain groups to suppress LGBT rights as a minority in Indonesia.

The Family Resilience Bill also concluded that Sadism, Masochism, and Homosexuals had the same roots, namely sexual perversion. The formulators of the Family Resilience Bill had misidentified sexual violence with safe intimate relationships carried out with the (rational and emotional) consent of the parties.

The formulators and proponents of the Family Resilience Bill have removed the scientific elements in studying gender and sexuality diversity. They even discarded the globally recognized international guidelines. What ensued was instead the state's efforts to trespass the boundaries of family privacy by pushing regulations toward private spaces of the citizens.

RELIGIOUS NORMS AND SOCIAL ETHICS

In the Family Resilience Bill, the phrase that was often used was the importance of prioritizing religious norms and social ethics. At the same time, the bill ignored the right to equality and to have freedom from discrimination, including freedom in sexual and reproductive health. In reality, these rights to equality and health care are part of the 10 Rights to Sexual and Reproductive Health (SRHR) recognized by the international community and the United Nations. The concept of rights contained in the Family Resilience Bill was restricted to basic human rights such as the right to life and the right to basic services, while the rest was just becoming a "robot" to the family.

The fight for Sexual and Reproductive Health Rights (SRHR) has been adopted in the Government of Indonesia's Sustainable Development Goals (SDGs), specifically in the third and fifth goals, regarding health and gender equality. Therefore, when the SRHR was disregarded, it indicated that the Family Resilience Bill would hinder the achievement of the National Medium Term Development Plan. The Bappenas (National Development Planning Agency), as the agency responsible for the SDGs achievements, must see this bill as a stumbling block that must be removed.

Furthermore, religious norms and social ethics, or more precisely social appropriateness, should not be clashed with each other. Contextually, religions should be in the domain of ideas, guidance for the soul, and also of life values. Whereas ethics and decency are in the social domain of society. This denotes religious norms should complement each other, instead of being set as rivals resembling general elections or political contestations.



Abort the Family Resilience Bill, Pass the Bill on Sexual Violence Crime

SEXUAL DEVIATIONS AND PSEUDOSCIENCE

Article 85 of the Family Resilience Bill stated that there would be an agency that would handle crises regarding sexual deviations. This idea actually weakened or even changed the task of the Directorate of Family Resilience under the BKKBN (National Family Planning Agency). The addition of this new agency would overlap with the work of the BKKBN and other relevant ministries. It would also add burdens to the state to meddle with its citizens' privacy that essentially was not to be regulated.

The development of articles and agencies addressing sexual deviations would invite corrupt health actors or pseudo doctors who do not have competence in rehabilitation. Additionally, Article 90 clause (1) of the Family Resilience would drive persecution and violence against minority groups in families or communities.

The concept of social rehabilitation in the bill was dubious since it did not refer to scientific principles and actual experience. Social rehabilitation efforts must be equipped with valid evidence by taking the impacts of the previous treatment into consideration.

"Thank you IPPA, for being a forum for us youth to be creative and empower ourselves." – Magdalena (Leader of Youth Forum)

A BUDGET MISSPEND AND WASTEFUL

It is obvious that the Family Resilience Bill would just misspend the state budget since it is just redundant to a number of available rules/laws.

For example, the bill would just repeat the regulations regarding the role of society in the family. It has been regulated in Law No. 52 of 2009 regarding Population Development and Family Development.

Furthermore, the measures to have a pregnancy outside the natural way have been regulated in Health Law No. 36 of 2009. In addition, the subject of rehabilitation of family members with mental disorders has also been regulated in the Mental Health Law No. 18 of 2014. The Mental Health Law has been proven to place priority on human rights through a non-discriminatory principle since the Law states that it provides rehabilitation to People with Mental Disorders. It does not use the term People With Mental Problems.

The articles on marriage and the relationship between husband and wife in the Family Resilience Bill were highly inclined towards one religion. The bill also duplicated the rules in Marriage Law Number 1 of 1974. The Family Resilience Bill was even more problematic in the issue of adoption, by ignoring the Government Regulation Number 54 of 2007. Even worse, the article abolished the criminal aspect of child neglect which has been regulated in the Law of the Elimination of Domestic Violence and Law No. 35 of 2004 regarding Child Protection.

Finally, IPPA Advocacy Team concluded that the Family Resilience Bill is troublesome in that many of its substances were just duplicating the existing regulations. On an additional note, the Family Resilience Bill would not only misspend the state budget but also has the potential to incite a discriminating and gender-biased Indonesian family system.

Cross Learning Youth Center of IPPA East Java





This program is the result of discussions by IPPA youth in early 2020, as their preparation to face the Covid-19 pandemic. Face-to-face activities that have been arranged in the annual work plan had to be halted due to the pandemic. Thereby these teenagers decided to hold sessions through a Zoom meeting with "Cross Learning Youth Center (CLYC)" as the theme.

The CLYC has been held since August 2020. CLYC is a sharing session between regional IPPA Youth Forums. Their activities have inspired other youth. IPPA has 25 Youth Forum communities expanded throughout cities.

One interesting CLYC event was when the East Java Youth Forum was sharing their experiences and the specialty of their community. The East Java teenagers have been building a creative economy for a few years. They have established and managed a cafe at the IPPA East Java office in Surabaya. The cafe is supported by free WiFi and is a favorite meeting place, where anyone can use it to hold meetings or discussion events.

These youth also promoted their activities to communities nearby so anyone could access their service. Members of the Family Welfare Development (PKK) organization often held meetings at the cafe, and their networks from other areas have also visited the coffee shop.

The Youth of IPPA East Java were not merely honing their young entrepreneurial skills in the business model they developed. They have already prepared themselves on how to obtain sources to fund their Youth Forum programs. The teenagers were certainly not alone in building this kind of business. They have been greatly assisted by the IPPA East Java in form of capital and in business development assistance as well. To PKBI East Java Youth Forum, best wishes for continued success!

From the Reproductive Health, Youth, to Safe House Programs of IPPA West Java

When the need for reproductive health services for vulnerable women groups arose during the pandemic, it set IPPA West Java in motion.

Starting mid-2020, IPPA had been joining forces with IPPF to implement the SPRINT Program through the Covid-19 Emergency Fund Project. The goal is to respond to the needs of reproductive health services during the pandemic, especially for vulnerable groups of women. The IPPA West Java was one of the locations that the program focused on. Accordingly, this regional IPPA continued to develop comprehensive and integrated services from health and psychology services to providing a temporary safe house, as well as reintegration assistance for vulnerable women, specifically female victims of gender-based violence.

Working through a pandemic condition has certainly been challenging. Citing the recapitulation results of the target achievement for clients and the services of IPPA West Java's Teratai Clinic at the end of the program, as of March 15, 2021, of the total client targets projected in the work-plan of 1,147, at the end of the program the clinic has provided services to at least 1,004 clients. This equals to 87.53% achievement rate.

The general strategy for the Indonesia Covid-19 Response Program for the period of September 2020 to March 2021 in IPPA West Java is as follows:

Enactment of the Covid-19 Prevention Protocol for the Internal Team through the procurement of adequate Personal Protective Equipment for the purpose of providing protection to every PKBI West Java staff and volunteers who are still working in the midst of a pandemic.

Improved Knowledge of Gender-Based Violence Issues and Cases for the Program Implementing Staff and Supporting Human Resources in IPPA West Java and becoming a comprehensive and integrated health service provider, primarily to serve special target groups such as victims of gender-based violence, requires a deep sensibility of issues from victims' perspective.

Capacity Building for Youth Counselors to empower the services at the Teratai Clinic in expanding the scope of targets, especially for youth groups, by developing various training schemes and curricula.

15

Session 1, strengthening the capacity of youth volunteers, was held for 2 days, January 27, 2021, with the subject of How To Be a Counselor. The second day's subject was Counseling Practice, tutored by Gusriyeni Yarman, a psychologist at the Teratai Clinic. This activity was attended by 10 youth volunteers of Mitra Citra Remaja of IPPA West Java.

In Session 2, held on January 29, 2021, the 10 participants who took the first session were provided with insights and skills in Introduction to the CMIS and the Practice of Data Input from counseling results into the IPPA's eIMS recording-reporting system. This session was led by Uung Sobarna, the data entry officer at the Teratai Clinic.

For Session 3, the activity took the form of a one-month internship as Youth Counselor at the Teratai Clinic, in February 2021. The internship was carried out through a shift mechanism of daily counseling at the Teratai Clinic.

Preparing Guidelines for Handling Gender-Based Violence

Implementing a program requires the support of adequate program management instruments. One of the important instruments in manifesting the program is a manual which will be a reference for every program implementer.

Publishing a Guidebook with ISBN

Having passed through various stages, finally, the Gender-Based Handling Guidebook has entered the print phase and will soon be published in 2 versions, the print edition and the e-Book. The plan is to distribute it nationally to IPPA in other regions that have clinics as well as to NGO networks, and also communities and governmental organizations which are part of IPPA West Java's network as service referral partners. This guidebook has been officially registered in the catalog of the National Library of the Republic of Indonesia with ISBN 0321001.

Guidebook Dissemination

National dissemination of the guidebook for handling gender-based violence was held on March 10, 2021, to introduce it to IPPA regionals, including exploring the experiences from other regions and providing feedback for improvement.

Transit Home for Victims of Gender-Based Violence

IPPA West Java was compelled to contribute adequate support to the national model of treatment for gender-based violence (GBV) victims. With the backing of the Covid-19 Emergency Funds program from IPPF, IPPA West Java has provided support through the procurement of Transit Home facilities (Temporary Safe House) for female victims of GBV. The process of revamping and setup for the Transit Home has been completed by the end of the program, just according to the plan.



IPPA's Humanitarian Role in the Masamba Flash Flood

The flash flood in the District of Masamba, North Luwu Regency, South Sulawesi, has caused crises of health and water for thousands of families.

The flood disaster in Masamba, Monday (13/7/2020) at 19:00 Central Indonesia Time, was triggered by heavy rain that caused an overflow of 3 major rivers, namely the Rongkong River, Meli River, and Masamba River. Six districts were incapable of holding up the river overflow. The six districts that had the worst impacts were Masamba, Sabbang, Baebunta, South Baebunta, Malangke and West Malangke.

This flash flood affected 4,930 families who resided in 14 refugee camps spread over 6 districts. It was reported that 15 people died and 46 went missing. The flash flood washed away a number of houses, knocked down dozens of houses, and buried hundreds of others in mud sediment, while the roads were covered with mud one and two meters high.

The flood inflicted a health crisis with 20 cases of childbirth in the refugee camp, 303 pregnant survivors, and 162 breastfeeding mothers. In such an emergency condition, priority assistance was needed, such as medicines, ready-to-eat food, blankets/proper clothes, tents/tarpaulins/cooking utensils, rice, and meals, as well as special supplies for vulnerable groups such as pregnant women, infants and toddlers, the disabled, female adolescents, and the elderly.

The IPPA Humanitarian Program deployed a team from the Central Region to conduct a rapid assessment led by the Executive Director of IPPA South Sulawesi, supported by 5 staff members. The results of the rapid study conducted in 5 days in Baenbunta District showed that there were 832 people affected, with vulnerable groups including 205 elderly people, 4 disabled people, and 24 pregnant women.

Scarcity of Clean Water and Drinking Water

After the flood, the availability of clean water and drinking water for residents had still been disrupted due to the damage to the Drinking Water Company's (PDAM) distribution pipe for the residents. This condition got worsened by the turbid water supply with sludge in PDAM reserve tanks. Some Masamba residents relied on raw water from wells and groundwater which did not meet the hygiene requirements of raw water.

Such conditions were also encountered by the survivors in the refugee camps in Meli, Radda, and Baebunta who relied on clean water and drinking water from the Indonesian Red Cross and the Masamba Regency Fire Department. As many as 16 trucks of clean water were deployed by South Sulawesi Province Red Cross, the City of Makassar Red Cross, Makassar Fire Department, as well as the Red Cross and Fire Department of Masamba. Shortly, there were only four clean water trucks operating, two from the Masamba Red Cross and the other two from the Masamba Fire Department, to serve the needs of survivors still residing at 12 evacuation points. (source: Office of Public Works and Spatial Management of Masamba)

Hygiene Condition

The hygiene conditions following the disaster were also unwholesome. Piles of trash from food scraps and plastic were scattered at several evacuation sites. The evacuation area was barren as it was formerly an oil palm plantation. The weather of Masamba with high rainfall created a revolting smell from the accumulated garbage that was potentially disease-ridden. The poor sanitation conditions are very harmful to pregnant women, infants, toddlers, and the elderly. Data from the Masamba Regency Health Office showed that diseases caused by poor sanitation had been manifesting just a few weeks after the flash flood.

The flash flood disaster has induced a situation of gender inequality and discrimination against people with disabilities. For example, there has been a dominance of men over the distribution of social aid, including decision-making in the family and facilities that were inconvenient for women's groups.

A considerable number of disabled people (see data of JMK's Rapid Assessment) often faced discrimination hence they could not access assistance. Additionally, access to sanitation facilities was hard to reach because they were not disability friendly. IPPA South Sulawesi who had stepped in during the flood disaster in Masamba had to work hard to keep an atmosphere of equality and inclusivity.



Creative Video Contest of "Teenagers and Corona" International Youth Day 2020 at IPPA Central Kalimantan



The International Youth Day is commemorated every 12th of August, likewise in Indonesia. In 2020, the United Nations promoted the theme of "Youth Engagement for Global Action" which focused on the ways youth engaged and their capabilities to address problems on a global level. IPPA called for young people to engage more in various social actions significantly.

In Central Kalimantan, the commemoration of International Youth Day 2020 was organized by the regional IPPA, collaborating with the Health Polytechnic of the Ministry of Health of Palangka Raya. Throughout August 1–28, 2020, IPPA and the Polytechnic held a video-making competition with the theme of "Youth and Corona" with sub-themes: 1) Corona Education, 2) The Role of Youth during the Covid–19 Pandemic, and 3) Clean and Healthy Life Habits Youth. The entire activity from registration and uploading videos took place between August 1st and 27th, followed by a selection phase on August 28th and 29th.

The creative video nomination was conducted by IPPA internal team, the Health Polytechnic, journalists, and videography experts. The competition was announced through the official Instagram accounts of IPPA Central Kalimantan, SIAR Youth Center, and the Polytechnic [1]. There were 18 (eighteen) participants from Central Kalimantan and outside the province.

The winners of the youth creative video competition were announced at a webinar of "Youth Having a Talk on Corona", also a collaboration event of IPPA and the Health Polytechnic of the Ministry of Health of Palangka Raya. The winners of the video competition are the top 3 (three) of Best Video and 1 (one) Most Viewers Video. Muhammad Alfi Alfaris won 1st place for Best Video[2], AR Team won 2nd place[3], and JK Project came 3rd[4], while the video with Most Viewers was created by Ravriel Naswan Saddad Putera Kusbianto. Congratulations to the winners of the creative video competition.

Fun Chat with IPPA of Yogyakarta Special Region (DIY) "Projection of Food Reserve in DIY with Eid Holiday Approaching"

This Fun Chat was adapted by IPPA DIY during the Covid-19 pandemic. The activity was initiated because the government imposed a social limitation but failed to accommodate the food necessity of the people during the pandemic.

Granted that according to Article 52 of Law No. 6 of 2018 regarding Health Quarantine, the government has obligations to accommodate the basic living needs of the citizens and animal food in conformity with the Home Quarantine. The incompetence of the state to pay attention to the food needs of its people instigated the civil society in DIY such as the Jogja Food Solidarity, the Jogja Food Barn Network (JALU), and others to form solidarity that focused on food needs.

The activities of this community solidarity were moving more swiftly because it was getting closer to Eid. It has been common in Indonesia when food prices are soaring ahead of the Eid holiday, and the people cannot afford them.

As a member of the DIY Food Solidarity, IPPA DIY disclosed that in the distribution of food aid/social assistance, it is vital to target sex workers and transgenders. As a minority group, they could not easily access social assistance from the government, due to administrative restrictions of "having no ID card". They could not work in formal domains. This group was therefore vulnerable to structural poverty and always excluded from the government's social aid programs.



In the forum, the food solidarity network in DIY stated that they would channel assistance from the DIY government to such groups. They would also advocate for the groups to the government so that they could get ID cards as citizens' rights, and also be prioritized in the distribution of social aid.

The discussion brought up new strategies for dealing with food shortage problems among minority groups. For example, they were encouraged to grow their own food around the house or boarding house and even in the surrounding unoccupied yards. They could utilize anything to plant and meet their food needs. It was as simple as growing commonly consumed vegetables to save their spending on food.

They were also advised to develop their own business through up-to-date financial technology. With such steps to take, it was hoped that the transgenders and female sex workers who joined the forum would stay optimistic that they could survive the difficult pandemic time.



Discussion of Talk More Social Inclusion at IPPA East Java

Manifesting Independence and Social Inclusion for Children in Conflict with the Law

The discussion on Children in Conflict with the Law (CICL) was taking place within a webinar titled "Talk More Social Inclusion" with the theme Manifesting Independence and Social Inclusion for Children in Conflict with the Law.

This webinar was held on August 24, 2020, attended by Drs. Herawanto Ananda, M.Si (Office of Women Empowerment, Child Protection, and Population/DP3AK of East Java Province), Andik Ariawan A.Md.IP., S.H., M.H. (Head of Correctional Center Class I Blitar), Abdul Salim Siregar (Executive Director of IPPA Bengkulu Region), and Tri Wahyu Ariningsih (Director of IPPA Gunungkidul Branch), with Abdi Suryaningati (Team Leader of The Asia Foundation's PEDULI Program) as the keynote speaker and Humam Maulana (Member of Youth Center SeBAYA IPPA East Java) as the moderator.

The resource persons from various institutions brought diverse perspectives on child protection, especially Children in Conflict with the Law (CICL), including children who become victims of crime, and children who witness criminal acts.

In her speech, Abdi Suryaningati stated that Children in Conflict with the Law were one of the six parties who deserved inclusivity in Indonesia. It was, therefore, important to help them to meet their rights and to be equal to other children. Furthermore, Abdi hoped that the webinar program of Talk More Social Inclusion could continue with real follow-ups in manifesting protection towards CICL.

The disposition of children, the concept and objective of child protection as the basis of this program were also presented to remind us that all parties could play their roles in protecting children. The restorative justice approach as a method of handling CICL was discussed. Various institutions involved should take a systematic, comprehensive, sustainable, and integrated handling, while also taking into account the other parties such as perpetrators, victims, families of perpetrators/victims, and others involved. Restorative justice was seen as a measure to find an equitable solution and to emphasize restoration to its initial state.

Access to counseling providers, physical/mental health, and other services, was discussed to ensure that protection for CICL was implemented properly. It was mentioned that the DP3AK offices in each regency in Indonesia provide free access for CICL to get professional counseling.

The CICL has experienced many lessons prior to the implementation of PEDULI program, including unfair legal treatment, violations of basic rights, facing discrimination, lack of basic education and health services, officers who are not child-friendly, stereotypes as prisoners, and stigma as ex-prisoners.

It was expected that through the PEDULI program every Child in Conflict with the Law could access psychosocial services, have their basic rights met, and receive good communication and support through government policies and budgets. The real results of the PEDULI program were more commitments from stakeholders caring about CICL, the availability of program policies and budgets from the Regional Government through related supporting agencies (tentatively), and detention centers becoming more child-friendly and more open to coaching programs from outside to open access towards basic services such as health, education, skills and population administration.

Despite the various problems encountered, the attitude of officers, parents, and the surroundings was still the main obstacle. After the leadership sector has been empowered, regional head decrees regarding oversight of children have been advocated to become regional regulation, budget advocacy to Regional Parliament was carried out, and the capacity of officers, parents, and the media have been enhanced, after a while, various problems began to be resolved.

As a final point, they discussed the role of youth considered important in increasing public awareness regarding the protection of children. Also carrying out activities that empower and increase children's knowledge, to build a child-friendly environment, were some of the critical subjects discussed.

KOLASE Collaboration of Healthy Youth Actions



IPPA Regionals were part of the One Vision Alliance (Aliansi Satu Visi or ASV) as a network of civil society organizations that have been around for 10 years, with members working in 10 provinces in Indonesia.

This network has initiated the Get Up Speak Out (GUSO) program to meet the rights of sexual and reproductive health of adolescents. The program has been running for 5 years since 2016 in the cities of Bandar Lampung, Jakarta, Semarang, Denpasar, and Kupang. Of the five regions, the Regional IPPAs had a strategic role in 4 regions as well as at the national level in the process of planning, implementation, evaluation, and being responsible for the GUSO program.

The Get Up Speak Out program in the Bandar Lampung area was implemented by IPPA Lampung; in the Jakarta area was carried out by IPPA DKI Jakarta, including in several districts, collaborating with the East Jakarta Red Cross and the Pelita Ilmu Foundation; in the Semarang area it was administered by IPPA Central Java, in the Denpasar area it was carried through by IPPA Bali.

Coinciding with Youth Pledge Day, the One Vision Alliance network held a peak celebration of the five-year journey of the GUSO program titled "COLLAGE: Collaboration of Healthy Youth Actions" on October 28, 2020, broadcasted on Aliansi Satu Visi's Youtube Channel. This event presented videos of the journey and achievements of the GUSO Program, talk shows with policymakers, and the introduction of youth champions from various regions.

The collaboration of Healthy Youth Actions was also a gateway for youth from various regions to become key actors in the program. They expressed their work by campaigning for "Empowered Youth Dare to Speak", "Comprehensive Sexual and Reproductive Health Education is Not Taboo but Necessary", and "Everyone Has the Right to Access Youth Friendly Health Services". Through the COLLAGE Challenge, more than 100 Tik Tok videos, posters, and photovoice works were displayed on social media by youth across Indonesia.

Guests from the Ministry of Health, the National Development Planning Agency (Bappenas), the Ministry of Education and Culture, and the Ministry of Women Empowerment and Child Protection were invited to witness together the changes brought about by the GUSO program related to the Sexual and Reproductive Health Rights of Adolescents. It was expected that similar programs can be proceeded by the regional and central governments.

The momentum of COLLAGE (Collaboration for Healthy Youth Actions) was one important milestone for the young key actors in the GUSO program to expand collaboration and enthusiasm in continuing the movement with a running engine. As part of the program, IPPA regionals have also thrived in forming an important legacy to be cared for and prospered to benefit Indonesian youth.





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IPPA REGIONALS

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IPPA EXECUTIVE HEAD QUARTER

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Vice Chairperson IV : Dra. Retno Dewanti Purba, MPsiT, Psikolog

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Honorary Secretary : Dra. Josephine Rosa Marietta, M.Psi

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Executive Director : Eko Maryadi

Vice Executive Director : Heri Susanto

Head of Planning and Development: Erry H. Kamka

Head of Program and Advocacy : Yudi Supriadi

Head of Governance : Haryati

Head of Finance : Milawati Rahayu



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INDEPENDENT AUDITORS' REPORT

Ref: 00312/3.0409/AU.1/11/1150/1/VI/2021

Kepada Yth, Pengurus Nasional Perkumpulan Keluarga Berencana Indonesia (PKBI)

Kami telah mengaudit laporan keuangan Perkumpulan Keluarga Berencana Indonesia (PKBI) terlampir, yang terdiri dari laporan posisi keuangan tanggal 31 Desember 2020, serta laporan penghasilan komprehensif, laporan perubahan aset neto, dan laporan arus kas untuk tahun yang berakhir pada tanggal tersebut, dan suatu ikhtisar kebijakan akuntansi signifikan dan informasi penjelasan lainnya.

Tanggung jawab manajemen atas laporan keuangan

Manajemen bertanggung jawab atas penyusunan dan penyajian wajar laporan keuangan ini sesuai dengan Standar Akuntansi Keuangan di Indonesia, dan atas pengendalian internal yang dianggap perlu oleh manajemen untuk memungkinkan penyusunan laporan keuangan yang bebas dari kesalahan penyajian material, baik yang disebabkan oleh kecurangan maupun kesalahan. To: The National Board Indonesian Planned Parenthood Association (IPPA)

We have audited the accompanying financial statements of Indonesian Planned Parenthood Association (IPPA), which comprise the statements of financial position as of December 31, 2020, as well as a statement of comprehensif income, statement of changes in net assets, and statement of cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's responsibility for the financial

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Indonesian Financial Accounting Standards, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Tanggung jawab auditor

Tanggung jawab kami adalah untuk menyatakan suatu opini atas laporan keuangan ini berdasarkan audit kami. Kami melaksanakan audit kami berdasarkan Standar Audit yang ditetapkan oleh Institut Akuntan Publik Indonesia. Standar tersebut mengharuskan kami untuk mematuhi ketentuan etika serta merencanakan dan melaksanakan audit untuk memperoleh keyakinan memadai tentang apakah laporan keuangan bebas dari kesalahan penyajian material.

Suatu audit melibatkan pelaksanaan prosedur untuk memperoleh bukti audit tentang angka-angka dan pengungkapan dalam laporan keuangan. Prosedur yang dipilih bergantung pada pertimbangan auditor, termasuk penilaian atas risiko kesalahan penyajian material dalam laporan keuangan, baik yang disebabkan oleh kecurangan maupun kesalahan. Dalam melakukan penilaian risiko tersebut, auditor mempertimbangkan pengendalian internal yang relevan dengan penyusunan dan penyajian wajar laporan keuangan entitas untuk merancang prosedur audit yang tepat sesuai dengan kondisinya, tetapi bukan untuk tujuan menyatakan opini atas keefektivitasan pengendalian internal entitas. Suatu audit juga mencakup pengevaluasian atas ketepatan kebijakan akuntansi yang digunakan dan kewajaran estimasi akuntansi yang dibuat oleh manajemen, serta pengevaluasian atas penyajian laporan keuangan secara keseluruhan.

Auditors' responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Standards on Auditing established by the Indonesian Institute of Certified Public Accountants. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether such financial statements are free from material misstatement.

An audit involves perfoming procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriteness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

FORUM OF FIRMS

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KANAKA PURADIREDJA SUHARTONO

Kami yakin bahwa bukti audit yang telah kami peroleh adalah cukup dan tepat untuk menyediakan suatu basis bagi opini audit kami.

Opini

Menurut opini kami, laporan keuangan terlampir menyajikan secara wajar, dalam semua hal yang material, posisi keuangan Perkumpulan Keluarga Berencana Indonesia (PKBI) tanggal 31 Desember 2020, serta kinerja keuangan dan arus kas untuk tahun yang berakhir pada tanggal tersebut, sesuai dengan Standar Akuntansi Keuangan di Indonesia.

Hal lain

Laporan keuangan Perkumpulan Keluarga Berencana Indonesia (PKBI) tanggal 31 Desember 2019 diaudit oleh auditor independen lain dengan opini tanpa modifikasian dalam laporan No. 00209/2.1000/AU.1/11/1264-2/1/X/2020 tanggal 7 Oktober 2020.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Indonesian Planned Parenthood Association (IPPA) as of December 31, 2020, and their financial performance and cash flows for the year then ended, in accordance with Indonesian Financial Accounting Standards.

Other matters

The financial statements of Indonesian Planned Parenthood Association (IPPA) as of December 31, 2019 audited by other independent auditor with unmodified opinion No. 00209/2.1000/AU.1/11/1264-2/1/X/2020 dated October 7, 2020.

KANAKA PURADIREDJA, SUHARTONO

Barugamuri Dachi, M. Ak., CA., CPA.
Nomor Izin Akuntan Publik No. AP. 1150

Jakarta, 30 Juni 2021/ June 30, 2021

Licence of Public Accountant No. AP. 1150



PERKUMPULAN KELUARGA BERENCANA INDONESIA LAPORAN POSISI KEUANGAN PADA TANGGAL 31 DESEMBER 2020

(Disajikan dalam Rupiah dengan translasi ke Dolar Amerika Serikat)

INDONESIAN PLANNED PARENTHOOD ASSOCIATION STATEMENTS OF FINANCIAL POSITION AS OF DECEMBER 31, 2020

(Expressed in Rupiah with translation into United States Dollar)

									Translasi ke Do					
			2020			2019			2020			2019		
			Dengan			Dengan			Dengan			Dengan		
		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		
		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		
		sumber daya/	daya/		sumber daya /	daya /		sumber daya/	daya /		sumber daya/	daya /		
		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		
	Catatan/	from resource	from resource	Jumlah/	from resources	from resource	Jumlah/	from resource	from resource	Jumlah/	from resources	from resource	Jumlah/	
	Notes	provider	provider	Total	provider	provider	Total	provider	provider	Total	provider	provider	Total	
ASET														ASSETS
Aset lanear														Current assets
Kas dan setara kas	4, 24	44.983.214.282	3.424.497.497	48.407.711.779	11.908.406.447	12.147.060.006	24.055.466.453	3,189,168	242,786	3,431,954	856,658	873,826	1,730,484	Cash and cash equivalents
Investasi lain-lain	5, 24	99.434.165		99.434.165	356.875.589		356.875.589	7,050		7,050	25,673		25,673	Other investments
Piutang lain-lain	6, 23, 25	2.522.322.981		2.522.322.981	1.805.181.686	1.293.533.925	3.098.715.611	178,825		178,825	129,860	93,053	222,913	Other receivables
Persediaan	7	220.780.838		220.780.838	197.365.802		197.365.802	15,653		15,653	14,198		14,198	Inventories
Uang muka dan beban dibayar dimuka	8	487.901.229	2.306.496.863	2.794.398.092	167.833.607	1.644.551.137	1.812.384.744	34,591	163,523	198,114	12,073	118,305	130,378	Advances and prepaid expenses
Jumlah aset lancar		48.313.653.495	5.730.994.360	54.044.647,855	14.435.663.131	15.085.145.068	29.520.808.199	3,425,287	406,309	3,831,596	1,038,462	1,085,184	2,123,646	Total current assets
Aset tidak lancar														Non-current Asstes
Aset tetap – nilai buku	9	11.528.569.781		11.528.569.781	15.636.814.290		15.636.814.290	817,339		817,339	1,124,870		1,124,870	Fixed Assets - book value
Uang muka investasi	10	891.616.863		891.616.863	861.616.863		861.616.863	63,213		63,213	61,982		61,982	Advance in investment
Jumlah aset tidak lancar		12.420.186.644		12.420.186.644	16.498.431.153		16.498.431.153	880,552		880,552	1,186,852		1,186,852	Total non-current assets
Jumlah Aset		60.733.840.139	5,730,994,360	66.464.834.499	30.934.094.284	15.085,145.068	46.019.239.352	4,305,839	406,309	4,712,148	2,225,314	1,085,184	3,310,498	Total Assets

Lihat catatan atas Laporan Keuangan yang merupakan bagian yang tidak terpisahkan dari Laporan Keuangan secara keseluruhan.

See accompanying Notes to Financial Statements which are an integral part of the Financial Statements taken as a whole.

- 1 -

PERKUMPULAN KELUARGA BERENCANA INDONESIA LAPORAN POSISI KEUANGAN (lanjutan) UNTUK TAHUN YANG BERAKHIR PADA 31 DESEMBER 2020

(Disajikan dalam Rupiah dengan translasi ke Dolar Amerika Serikat)

FOR THE YEAR ENDED 31 DECEMBER 2020 (Expressed in Rupiah with translation into United States Dollar)

									Translasi ke I	olar Amerika Serikat/I	Franslated into United S	States Dollar		
			2020			2019			2020			2019		
		Tanpa pembatasan dari pemberi sumber daya/	Dengan pembatasan dari pemberi sumber daya /		Tanpa pembatasan dari pemberi sumber daya /	Dengan pembatasan dari pemberi sumber daya /		Tanpa pembatasan dari pemberi sumber daya /	Dengan pembatasan dari pemberi sumber daya /		Tanpa pembatasan dari pemberi sumber daya/	Dengan pembatasan dari pemberi sumber daya /		
		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		
	Catatan/	from resource	from resource	Jumlah/	from resources	from resource	Jumlah/	from resource	from resource	Jumlah/	from resources	from resource	Jumlah/	
	Notes	provider	provider	Total	provider	provider	Total	provider	provider	Total	provider	provider	Total	
LIABILITAS														LIABILITIES
Liabilitas Jangka Pendek														Current Liabilities
Utang usaha	11, 24	193.339.771	481.354.533	674.694.304	929.155.880	122.568.626	1.051.724.506	13,707	34,127	47,834	66,841	8,817	75,658	Account payables
Biaya yang masih harus dibayar	12	285.096.985	342.665.499	627.762.484	43.962.348	970.141.944	1.014.104.292	20,212	24,294	44,506	3,163	69,789	72,952	Accrued expenses
Utang pajak	16a	891.162.238		891.162.238				63,181		63,181				Taxes payable
Pendapatan ditangguhkan	13	2.688.932.468	19.693.286.336	22.382.218.804	100.819.982	12.532.406.311	12.633.226.293	190,637	1,396,192	1,586,829	7,253	901,547	908,800	Differed income
Dana titipan	14, 24	226.668.667	15.000.000	241.668.667	94.580.624	20.446.569	115.027.193	16,070	1,063	17,133	6,806	1,471	8,277	Fund Deposits
Utang lain-lain	15, 24	1.969.168.455	-	1.969.168.455	781.640.000	1.439.581.618	2.221.221.618	139,608	-	139,608	56,229	103,560	159,789	Other payables
Jumlah Liabilitas Jangka Pendek		6.254,368,584	20.532.306.368	26.786.674.952	1.950.158.834	15,085,145,068	17.035,303,902	443,415	1,455,676	1,899,091	140,292	1,085,184	1,225,476	Total Current Liabilities
Liabilitas Jangka Panjang														Non-Current Liabilities
Pembiayaan konsumen					76.083.000		76.083.000				5,473		5,473	Consumer financing
Liabilitas imbalan pascakerja	17	1.720.590.799		1.720.590.799	2.411.939.126		2.411.939.126	121,984		121,984	173,508		173,508	Post-employment benefit liabilities
Jumlah Liabilitas Jangka Panjang		1.720.590.799		1.720,590,799	2.488.022.126		2.488.022.126	121,984		121,984	178,981		178,981	Total Non-Current Liabilities
Jumlah Liabilitas		7,974,959,383	20.532.306.368	28.507.265.751	4,438,180,960	15,085,145,068	19.523.326.028	565,399	1,455,676	2,021,075	319,273	1,085,184	1,404,457	Total Liabilities
ASET NETO														NET ASSETS
Aset Neto	18	44.763.812.342	(6.668.325.384)	38.095.486.958	26.495.913.324		26.495.913.324	3,173,613	(472,763)	2,700,850	1,906,041		1,906,041	Net Assets
Komponen ekuitas lainnya	17	(137.918.210)		(137.918.210)				(9,778)		(9,778)				Other equity components
Jumlah Aset Neto		44.625.894.132	(6.668.325.384)	37.957.568.748	26.495.913.324		26.495.913.324	3,163,835	(472,763)	2,691,072	1,996,041		1,906,041	Total Net Assets
JUMLAH LIABILITAS DAN ASET NE	то	52,600,853,515	13.863.980.984	66.464.834.499	30.934.094.284	15.085,145.068	46.019.239.352	3,729,234	982,913	4,712,148	2,225,314	1,085,184	3,310,498	TOTAL LIABILITIES AND NET ASSETS

Lihat catatan atas Laporan Keuangan yang merupakan bagian yang tidak terpisahkan dari Laporan Keuangan secara keseluruhan.

See accompanying Notes to Financial Statements which are an integral part of the Financial Statements taken as a whole.

INDONESIAN PLANNED PARENTHOOD ASSOCIATION

STATEMENTS OF FINANCIAL POSITION (continued)

PERKUMPULAN KELUARGA BERENCANA INDONESIA LAPORAN PENGHASILAN KOMPREHENSIF UNTUK TAHUN YANG BERAKHIR PADA 31 DESEMBER 2020

(Disajikan dalam Rupiah dengan translasi ke Dolar Amerika Serikat)

INDONESIAN PLANNED PARENTHOOD ASSOCIATION STATEMENT OF COMPREHENSION INCOME FOR THE YEAR ENDED 31 DECEMBER 2020 (Expressed in Rupiah with translation into United States Dollar)

Translasi ke Dolar Amerika Serikat/Translated into United States Dollar

			2020			2019			2020			2019		
		Tanpa pembatasan	Dengan pembatasan dari		Tanpa pembatasan	Dengan pembatasan dari		Tanpa pembatasan	Dengan pembatasan dari		Tanpa pembatasan	Dengan pembatasan dari		
		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		
		sumber daya/	daya /		sumber daya /	days /		sumber daya /	daya/		sumber daya/	daya /		
		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		
	Catatan/	from resource	from resource	Jumlah/	from resources	from resource	Jumish/	from resource	from resource	Jumlah/	from resources	from resource	Jumish/	
	Notes	provider	provider	Total	provider	provider	Total	provider	provider	Total	provider	provider	Total	
PENDAPATAN														INCOMES
Pendapatan Donor														Grant Incomes
Hibah kas dari IPPF	19	4.025.660.280	425.346.185	4.451.006.465	4.110.602.676	7.951.737.029	12.062.339.705	285,407	30,156	315,563	295,706	572,026	867,732	IPPF cash grants
Donatur lainnya	20	1.856.341.896	60.592.873.325	62.449.215.221	65.057.794	78.800.637.432	78.865.695.226	131,609	4,295,844	4,427,453	4,680	5,668,703	5,673,383	Others donors
Pemerintah local	21	6.392.317	1.289.965.792	1.296.358.109	40.941.269	1.474.456.706	1.515.397.975	453	91,455	91,908	2,945	106,069	109,014	Local governments
Jumlah Pendapatan Donor		5.888.394.493	62,308,185,302	68.196.579.795	4.216.601.739	88.226.831.167	92.443.432.906	417,469	4,417,455	4,834,924	303,331	6,346,798	6,650,129	Total Grant Incomes
Pendapatan lain-lain														Other Incomes
Klinik		3.528.325.111		3.528.325.111	8.415.355.044		8.415.355.044	250,147		250,147	605,378		605,378	Clinics
Program untuk peningkatan dana		9.766.719.269	61.012.500	9.827.731.769	14.518.560.894	20.037.513	14.538.598.407	692,429	4,325	696,754	1,044,426	1,441	1,045,867	Fund raising programs
Bunga		163.102.393	28.781.289	191.883.682	189.498.720	360.547	189.859.267	11,563	2,041	13,604	13,632	26	13,658	Interest
Lain-lain		33.586.766.148		33.586.766.148	2.082.034.240		2.082.034.240	2,381,196		2,381,196	149,774		149,774	Others
Total Pendapatan lain-lain		47.044.912.921	89.793.789	47.134.706.710	25.205.448.898	20,398,060	25.225.846.958	3,335,335	6,366	3,341,701	1,813,210	1,467	1,814,677	Total Other Incomes
JUMLAH PENDAPATAN		52.933.307.414	62.397.979.091	115.331.286.505	29.422.050.637	88.247.229.227	117.669.279.864	3,752,804	4,423,821	8,176,625	2,116,541	6,348,265	8,464,806	TOTAL INCOMES

Lihat catatan atas Laporan Keuangan yang merupakan bagian yang tidak terpisahkan dari Laporan Keuangan secara keseluruhan.

See accompanying Notes to Financial Statements which are an integral part of the Financial Statements taken as a whole.

- 3 -

PERKUMPULAN KELUARGA BERENCANA INDONESIA LAPORAN PENGHASILAN KOMPREHENSIF (lanjutan) UNTUK TAHUN YANG BERAKHIR PADA 31 DESEMBER 2020 (Disajikan dalam Rupiah dengan translasi ke Dolar Amerika Serikat) INDONESIAN PLANNED PARENTHOOD ASSOCIATION STATEMENT OF COMPREHENSION INCOME (continued) FOR THE YEAR ENDED 31 DECEMBER 2020

(Expressed in Rupiah with translation into United States Dollar)

			2020			2019			2020			2019		
			Dengan			Dengan			Dengan			Dengan		
		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		
		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		
		sumber days /	daya /		sumber days /	days /		sumber daya/	daya /		sumber daya /	daya /		
		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		
	Catatan/	from resource	from resource	Jumlah/	from resources	from resource	Jumish/	from resource	from resource	Jumlah/	from resources	from resource	Jumlah/	
	Notes	provider	provider	Total	provider	provider	Total	provider	provider	Total	provider	provider	Total	
BIAYA														EXPENSES
Biaya Proyek per Strategi														Project Expenses per Strategy
Layanan Kesehatan Seksual dan Reproduksi														Sexual and Reproductive Health Services
(Strategi 1)	22		19.251.002.289	19.251.002.289		10.983.313.938	10.983.313.938		1,364,835	1,364,835		790,110	790,110	(Strategy 1)
Program Anak dan Remaja & Gerakan														Children and Youth Program & National
Kesehatan Nasional (Strategi 2)	22	14.226.071.362	5.827.188.996	20.053.260.358	6.854.418.262	31.808.630.123	38.663.048.385	1,008,584	413,129	1,421,713	493,088	2,288,226	2,781,314	Health Movement (Strategy 2))
Penanggulangan HIV & AIDS dan Kampanye														HIV & AIDS Prevention and Community-
Penghapusan Stigma dan Diskriminasi														based Stigma and Discrimination
berbasis masyarakat (Strategi 3)	22		37.331.539.286	37.331.539.286		32.364.381.041	32.364.381.041		2,646,688	2,646,688		2,328,205	2,328,205	Elimination Campaign (Strategy 3)
Advokasi Untuk Pemenuhan Hak-Hak Seksual														Advocacy for the Fulfillment of Sexual and
dan Reproduksi (Strategi 4)	22		6.450.010.096	6.450.010.096	-	8.347.743.304	8.347.743.304	-	457,285	457,285		600,514	600,514	Reproductive Rights (Strategy 4)
Pengelolaan Pengetahuan dan Money,														Knowledge Management and
Peningkatan Kapasitas Organisasi														Monitoring and Evaluation,
dan Manajemen,														Organizational and Management
Pusat Informasi, Edukasi,														Capacity Building, Information Center,
Konseling HKSR dan														Education, HKSR Counseling and
Mobilisasi Sumber														Mobilization of Funding Resources
Dana (Strategi 5)	22		206.563.808	206.563.808		4.743.160.821	4.743.160.821		14,646	14,646		341,210	341,210	(Strategy 5)
Jumlah Biaya Proyek		14.226.071.362	69.066.304.475	83.292.375.837	6.854.418.262	88.247.229.227	95.101.647.489	1,008,584	4,896,583	5,905,167	493,088	6,348,265	6,841,353	Total Projects Expenses

Lihat catatan atas Laporan Keuangan yang merupakan bagian yang tidak terpisahkan dari Laporan Keuangan secara keseluruhan.

See accompanying Notes to Financial Statements which are an integral part of the Financial Statements taken as a whole.

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INDONESIAN PLANNED PARENTHOOD ASSOCIATION STATEMENT OF COMPREHENSION INCOME (continued) FOR THE YEAR ENDED 31 DECEMBER 2020

(Expressed in Rupiah with translation into United States Dollar)

									Translasi ke D	olar Amerika Serikat/7	runslated into United S	tates Dollar		
			2020			2019			2020			2019		
			Dengan			Dengan			Dengan			Dengan		
		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		Tanpa pembatasan	pembatasan dari		
		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		dari pemberi	pemberi sumber		
		sumber daya /	daya/		sumber days /	daya/		sumber daya /	daya /		sumber daya /	daya /		
		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		Without restrictions	With restrictions		
	Catatan/	from resource	from resource	Jumlah/	from resources	from resource	Jumlah/	from resource	from resource	Jumlah/	from resources	from resource	Jumlah/	
	Notes	provider	provider	Total	provider	provider	Total	provider	provider	Total	provider	provider	Total	
BIAYA (lanjutan)														EXPENSES (continued)
Strategi pendukung	22	3.915.883.630		3.915.883.630	4.110.602.676		4.110.602.676	277,624		277,624	295,706		295,706	Supporting Strategy
Proyek pendukung	22	1.237.390.829	-	1.237.390.829	303.895.400		303.895.400	87,727		87,727	21,861		21,861	Project support
Administrasi dan jasa umum	22	15.286.062.574		15.286.062.574	17.198.007.123		17.198.007.123	1,083,734		1,083,734	1,237,178		1,237,178	Administration and general services
JUMLAH BIAYA		34.665.408.395	69.066.304.475	103.731.712.870	28.466.923.461	88.247.229.227	116.714.152.687	2,457,669	4,896,583	7,354,252	2,047,833	6,348,265	8,396,098	TOTAL EXPENSES
LABA (RUGI) BERSIH SEBELUM		18.267.899.019	(6.668.325.384)	11.599.573.635	955.127.176		955.127.176	1,295,135	(472,762)	822,373	68,708		68,708	NET INCOME (LOSS) BEFORE
PAJAK PENGHASILAN														ENCOME TAX
Bebun Pajak Penghasilan	16b													Income tux expenses
account again t cagaranan	140													an our as rapeases
LABA (RUGI) BERSIH TAHUN		18.267,899,019	(6.668.325.384)	11.599.573.635	955,127,176		955.127,176	1,295,135	(472,762)	822,373	68,708		68,708	NET PROFIT (LOSS) FOR THE
BERJALAN														CURRENT YEARS
PENGHASILAN KOMPREHENSIF LAIN														OTHER COMPREHENSIVE INCOME:
Kerugian aktuaria	17	(137.918.210)		(137.918.210)				(9,778)		(9,778)				Actuarial losses
Kerugun aktuaru		(137.318.210)		(137.918.210)				(7,778)		(7,718)				ACTIMENTAL MINISTS
JUMLAH LABA (RUGI) BERSIH		18.129.980.809	(6.668.325.384)	11.461.655.425	955.127.176	-	955.127.176	1,285,357	(472,762)	812,595	68,768		68,708	TOTAL NET COMPREHENSIVE
KOMPREHENSIF														INCOME (LOSS)
ASET NETO AWAL TAHUN	18	26.495.913.323		26.495.913.323	25.540.786.147		25.540.786.147	1,878,477		1,878,477	1,763,745		1,763,745	NET ASSETS AT BEGINNING OF YEAR
SELISHI KURS PENJABARAN MATA UANG ASING								27,565		27,565	73,588		73,588	CUMULATIVE TRANSLATION ADJUSTMENT
		44,625,894,132	(6,668,325,384)	37,957,568,748	26,495,913,323		26,495,913,323	3,191,399	(472,762)	2,718,637	1,996,041		1,906,041	NET ASSETS END OF YEAR
ASET NETO AKHIR TAHUN		***************************************	(0.000.727.784)	31,731,396,148	20,475,713,323		20,475,713,323	2,171,377	(472,762)	2,710,037	1,700,041		1,700,041	

Lihat catatan atas Laporan Keuangan yang merupakan bagian yang tidak terpisahkan dari Laporan Keuangan secara keseluruhan.

See accompanying Notes to Financial Statements which are an integral part of the Financial Statements taken as a whole.

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3

PERKUMPULAN KELUARGA BERENCANA INDONESIA LAPORAN PERUBAHAN ASET NETO UNTUK TAHUN YANG BERAKHIR PADA 31 DESEMBER 2020

(Disajikan dalam Rupiah dengan translasi ke Dolar Amerika Serikat)

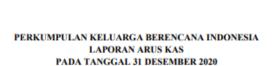
INDONESIAN PLANNED PARENTHOOD ASSOCIATION STATEMENT OF NET ASSETS FOR THE YEAR ENDED 31 DECEMBER 2020 (Expressed in Rupiah with translation into United States Dollar)

Translasi ke Dolar Amerika Serikat/

				Dollar				
			Aset neto / assets neto			Aset neto / assets neto		
			Dengan		Tanpa	Dengan		
		Tanpa pembatasan	pembatasan dari		pembatasan dari	pembatasan dari		
		dari pemberi	pemberi sumber		pemberi sumber	pemberi sumber		
		sumber daya /	daya /		daya / Without	daya /		
		Without restrictions	With restrictions		restrictions from	With restrictions		
	Catatan/	from resources	from resources	Jumlah aset neto	resources	from resources	Jumlah aset neto /	
	Notes	provider	provide	/Total net assets	provider	provide	Total net assets	
aldo per 1 Januari 2019	18	25.540.786.147		25.540.786.147	1,837,332		1,837,332	Balance as of January 1, 20
Cenaikan tahun berjalan	18	955.127.176	-	955.127.176	68,709		68,709	The Increase of net asse
aldo per 31 Desember 2019	18	26.495.913.323		26.495.913.323	1,906,041		1,906,041	Balance as of December 31, 20
enaikan tahun berjalan	18	18.267.899.019	(6.668.325.384)	11.599.573.635i	1,295,135	(472,763)	822,372	The Increase of net asso
erugian aktuaria	16	(137.918.210)		(137.918.210)	(9,778)		(9,778)	Actuarial lo
aldo per 31 Desember 2020	18	44.625.894.132	(6.668.325.384)	37.957.568.748	3,191,399	(472,763)	2,718,637	Balance as of December 31, 20.

Lihat catatan atas Laporan Keuangan yang merupakan bagian yang tidak terpisahkan dari Laporan Keuangan secara keseluruhan.

See accompanying Notes to Financial Statements which are an integral part of the Financial Statements taken as a whole.



(Disajikan dalam Rupiah dengan translasi ke Dolar Amerika Serikat)

INDONESIAN PLANNED PARENTHOOD ASSOCIATION STATEMENT OF CASH FLOWS AS OF 31 DECEMBER 2020

(Expressed in Rupiah with translation into United States Dollar)

				Translasi ke Dolar	Amerika Serikat/	
	Catatan / Notes	2020	2019	2020	2019	
ARUS KAS DARI OPERASI	110103				2017	CASH FLOW I
Aset neto		11.461.655.425	955.127.176	812,595	68,709	
Penyesuaian untuk rekonsiliasi perubahan dalam aset neto -						
menjadi kas neto yang digunakan untuk aktivitas operasi:						net assets into c
Penyusutan aset tetap	9	1.457.900.271	945.634.669	103,360	68,026	
Liabilitas imbalan pascakerja	17	(691.348.327)	-	(49,014)	-	
Perubahan dalam aset dan liabilitas :						
Piutang lain – lain		576.392.630	1.182.351.821	40,864	85,055	
Persediaan		(23.415.036)	40.065.569	(1,660)	2,882	
Uang muka dan biaya dibayar dimuka		(982.013.348)	4.973.150.142	(69,622)	357,755	
Uang muka investasi		(30.000.000)	-	(2,127)	-	
Utang usaha		(377.030.202)	(439.997.428)	(26,730)	(31,652)	
Biaya yang masih harus dibayar		(386.341.809)	613.147.932	(27,390)	44,108	
Utang pajak		891.162.238	(1.839.338)	63,181	(132)	
Pendapatan ditangguhkan		9.748.992.511	(14.514.927.278)	691,173	(1,044,164)	
Data titipan		126.641.474	(4.775.346.379)	8,978	(343,525)	
Utang lain – lain		(252.053.163)	193.397.938	(17,870)	13,913	
Investasi lain – lain		257.441.694	988.285.280	18,252	71,095	
Pembiayaan konsumen		(76.083.000)	(41.759.926)	(5,394)	(3,006)	
Kas neto diperoleh dari (digunakan untuk) aktivitas operasi		21.701.901.358	(9.882.709.822)	1,538,596	(710,936)	Net cash provi
ARUS KAS DARI AKTIVITAS INVESTASI						CASH
Pelepasan aset tetap	9	2.650.343.968		187,901		
Perolehan aset tetap	9	_	(282.158.751)	-	(20,298)	
Kas neto diperoleh dari (digunakan untuk) aktivitas investasi		2.650.343.968	(282.158.751)	187,901	(20,298)	Net cash provide
ARUS KAS DARI AKTIVITAS PENDANAAN		-	-	-	-	CASH
KENAIKAN (PENURUNAN) NETO DALAM KAS DAN						NET INCREA
SETARA KAS		24.352.245.326	(10.164.868.573)	1,726,497	(731,234)	
SELISIH KURS PENJABARAN MATA UANG ASING		-	-	-	98,598	EXCHANGE RA
KAS DAN SETARA KAS PADA AWAL TAHUN	4, 24	24.055.466.453	34.220.335.026	1,705,457	2,363,120	CASH AND CASH EQUIVAL
KAS DAN SETARA KAS PADA AKHIR TAHUN	4, 24	48.407.711.779	24.055.466.453	3,431,954	1,730,484	CASH AND CASH E

CASH FLOW FROM OPERATING ACTIVITIES
Net assets
Adjustment to reconcile changes in
net assets into cash provided by operating activites:
Depreciation of fixed assets
Post-employment benefits liabilities
Changes in assets and liabilities:
Other receivables
Inventories
Advances and prepaid expenses
Advances investment
Account payables
Accrued payables
Taxes payables
Unearned revenue
Fund deposits
Other payables
Other investment
Consumer financing
Net cash provided by (used in) operating activities
CASH FLOW INVESTING ACTIVITIES
Dispossal of fixed assets
Acquisition of fixed assets
Net cash provided by (used in) investing activities
CASH FLOW FINANCING ACTIVITIES
NET INCREASE (DECREASE) IN CASH AND
CASH EQUIVALENT
EXCHANGE RATE DIFFERENCE IN FOREIGN
CURRENCY TRANSLATION
${\it CASH\ AND\ CASH\ EQUIVALENTS\ AT\ BEGINNING\ OF\ YEAR}$
CASH AND CASH EQUIVALENTS AT END OF YEAR

Lihat catatan atas Laporan Keuangan yang merupakan bagian yang tidak terpisahkan dari Laporan Keuangan secara keseluruhan.

See accompanying Notes to Financial Statements which are an integral part of the Financial Statements taken as a whole.

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