
Two Is Enough — the ubiquitous slogan of the Indonesian family planning (FP hereafter) programme — is an apt title for this book, which covers 30 years of its implementation. The slogan expressed the FP programme’s goal to bring down Indonesian fertility to replacement level. While the replacement level target had not yet been achieved, the fertility rate had declined from 5.91 to 2.78.

The book has two objectives: “to provide a comprehensive description of the family planning programme” and to “take a closer look at the fertility transition” (p. 4) in Indonesia. It contains 12 chapters: the history of FP from the 1950s to the early 1960s (by Solita Sarwono) and from 1968 till 1998 (by Firman Lubis); two chapters by Terence Hull on birth control efforts and the political context; the role of foreign assistance (by David Piet); the involvement of non-governmental organizations (NGOs) (by Ninuk Widyantoro); the practice of FP (by Anke Niehof and Firman Lubis); demographic change (by Gavin Jones); two chapters on the relationship of FP and women’s lives (by Anke Niehof, and by Karen Hardee, Elizabeth Eggleston, Siti Hidayati Amal, and Terence Hull); and the reproductive health agenda (by Nancy Piet-Pelon, Setyawati Budiningsih, and Joedo Prihartino). The editors, Anke Niehof and Firman Lubis, wrote the introduction and a concluding discussion.

The comprehensive coverage of various aspects of the FP programme has provided a number of key insights: How the government successfully shifted from a pro-natalist (under the then president Soekarno) to an anti-natalist policy (under the then president Soeharto); the important role played by two very committed individuals: Ali Sadikin, the then governor of Jakarta, and Haryono, the then director of the BKKBN (the National Family Planning Board). Foreign assistance to the programme provided by the USAID, the World Bank, UNFPA, and the Netherlands also certainly benefited the FP programme. Another key insight is the linking of the policy to reduce population growth to a development
strategy that combines economic growth with programmes to promote family welfare and to reduce poverty. The contribution by the early pioneers of FP, especially from the Planned Parenthood Federation (PKBI), is also acknowledged. They helped to provide contraceptives to women, which was widely used in the 1970s. We also learn about the contested practice of abortion services (phrased as menstrual regulation), a service that the PKBI had already offered during the 1950s and continued to operate cautiously as abortion was not a recognized way of birth control. Other insights gained pertain to the several case studies that either integrated FP with health or with an income-raising component; both approaches helped to make the programme and its message to lower family size more acceptable.

The fertility transition is widely covered, with two chapters (by Gavin Jones and by Anke Niehof and Firman Lubis) dealing exclusively with this issue. Through careful demographic analysis, Jones points out the difficulty of trying to quantify the impact of the FP programme on fertility decline. This is because other variables, such as economic and social development, also have an impact on population growth. Nevertheless, he also cites the contribution of FP programme messages that promote marriage at a later age and a small family size as the norm, of linking the FP programme with community development programmes, and of the bureaucratic-military control of the FP programme.

In their chapter, Niehof and Lubis also attempt to account for the decline in fertility rate from 5.91 to 2.78 in the 30 years. Their explanations include the decline in infant and child mortality, support by religious leaders, and the increasing female literacy and higher female labour force participation, which had an empowering effect on women, especially in enhancing the negotiating capacity of women vis-à-vis their husbands. Two other factors are the shift in preference for a smaller family size and the availability and affordability, made possible through a “reorganization of political structures, modeled after military structures”, of the means to control fertility.

Nevertheless, although the book provides a comprehensive coverage of the FP programme — indeed abundant information is given about
its history, goals, context, structure, practice, results, and impacts — it does not address various criticisms of the programme. At best, it mentions a few critics (for example, Aripurnami and Smyth) but hastily dismisses their criticisms. This reviewer would have welcomed an in-depth analysis of at least some of the critiques, such as with regard to quality of care and reproductive rights. The “trade-off to quality of care” (p. 254) is mentioned but not analysed. For example, the critique of Norplant® would illustrate the dilemmas of efficacy versus safety, of coercion versus choice, of technology versus staff competence, and of accessibility versus affordability (Widyantoro 1994; Correa 1994; Fisher et al. 1997).

Also, the chapter by Hardee et al. about FP and women’s lives provides an overview from survey results about women wanting more information on FP (such as the side effects, reliability, safety, effectiveness, the various methods and how they work, follow-up) and suggestions for better services. The analytical part of this chapter would have benefited from using a framework that links quality of care (for example, Judith Bruce’s or Anita Hardon and Elizabeth Hayes’s work) with a reproductive health and rights agenda of the post-Cairo period. Some of the findings appear to be inconsistent: for example, we are informed that the FP programme’s strong focus on women had its positive effects — one such effect was as that fertility control could be empowering to women; yet we are also informed that women had complained about some side effects and the poor quality of care, and that the FP programme had not contributed to more gender equity in the household. As in Caroline Moser’s conceptualization (1993), this reviewer would say that FP might have addressed women’s practical needs but not their strategic needs. In fact, FP would have garnered greater support from women if it could also overcome gender inequity.

It appears that the various criticisms of the FP programme had influenced Kofifah, the young Minister of Women’s Empowerment of the Wahid government, to take up the issues of gender and morality seriously, and she brought the BKKBN under her authority. Her decision to take on the additional responsibility could be seen as a response to the critique of NGOs on the violation of human and
reproductive rights and deficiency in the quality of care provided in the FP programme. After the 1994 Cairo conference, NGOs had enthusiastically begun to focus on reproductive health as an approach that addresses fertility control from a health and rights perspective instead of the previous population control perspective. A scrutiny into shortcomings with regard to quality of care in the implementation of the FP programme, done with the same diligence as the other chapters, would have helped this book provide a more objective and balanced assessment of the FP programme.

Another important area not covered in the book is the role of the pharmaceutical industry. The Dutch’s sponsoring of the contraceptive pill Marvelon is mentioned, but not its production; neither is the origin of production of the intrauterine device (IUD) and its quality, of Depoprovera, of Norplant®, and of condom mentioned at all. Who were the producers, how was the marketing organized, and what were the profits made? Such information would have provided a better picture of the FP programme and the success it had achieved. We learn a lot about the logistic and administrative organization of the programme, which is truly impressive given the size of the country and its population, but we do not know about the economics of the programme. In this regard, a chapter on the political economy of the FP programme would have been an excellent addition.

Despite the above points of critique, the book is highly recommended for those who want to know the details of the Indonesian Family Planning Programme.

REFERENCES


Brigitte HOLZNER

Brigitte Holzner was Senior Lecturer at the Institute of Social Studies, The Netherlands, and is now Gender Advisor at the Austrian Development Agency, Vienna.