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JPODI
JARINGAN PEGIAT
DAN ORGANISASI DISABILITAS
INDONESIA

Ishak Salim, M. Joni Yulianto, dkk.

DISABILITY RIGHTS

A Guide to Monitoring Compliance

Kementerian PPN/
Bappenas

DISABILITY RIGHTS:
A GUIDE TO MONITORING COMPLIANCE

SENIOR ADVISOR TO THE MINISTER OF PLANNING
ON SOCIAL AFFAIRS AND POVERTY REDUCTION/BAPPENAS

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KANTOR STAF PRESIDEN

JPODI
JARINGAN PEGIAT DAN ORGANISASI DISABILITAS INDONESIA

AIPJ2
Australia Indonesia Partnership For Justice 2

DISABILITY RIGHTS

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ON SOCIAL AFFAIRS AND POVERTY REDUCTION/BAPPENAS

DISABILITY RIGHTS: A GUIDE TO MONITORING COMPLIANCE

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Cover Photo: At the students' graduation of the YAKKUM Rehabilitation Center (PRY) education unit in 2019. Mrs. Chatarina Sari, SE, the director of PRY handed over a certificate to Anissa Nugroho, a student of PRY's Cerebral Palsy children's education program (The photo use has been approved by PRY and Anissa's parents.)

FOREWORD

This is a guidebook to help monitor compliance in implementing activities which enable the rights of persons with disabilities in Indonesia to be realised. It was developed based on collective efforts to promote the mainstreaming, compliance, protection, and promotion of the rights of persons with disabilities.

First, to advance compliance in realising the Rights of Persons with Disabilities, monitoring and measurement tools or instruments are required that can be used to monitor progress. They can apply both at the regulatory, program implementation, achievements, and impacts levels. More importantly, measurement tools, referred in this book as indicators, must be easy to understand and use by all parties.

Second, the lack of an accurate baseline on the current level of compliance of the Rights of Persons with Disabilities. This absence of information and data subsequently has a serious impact in terms of inadequate policies, programs and resources, and political support. This is particularly evident in development priorities, both at the national and regional levels.

The preparation of this book was part of a long process in which persons with disabilities, civil society and government representatives discussed the importance of these indicators and monitoring tools. On May 14-16 2018, the *Organisasi Harapan Nusantara* (OHANA) and the Human Rights Working Group (HRWG) facilitated a workshop on human rights mechanisms supported by the Disability Rights Fund (DRF) and the Australia Indonesia Partnership (AIPJ2). In the workshop, the need to continue regular comprehensive monitoring of the rights of persons with disabilities compliance was agreed. It was considered necessary to develop a comprehensive measuring tool with reference to the CRPD, which can also be used to measure disability inclusion in other policy frameworks such as the Sustainable Development Goals (SDGs), and the New Urban Development Agenda (NUA). This awareness led to better comprehension on the significance of indicators for disability rights compliance.

Following up the workshop, the AIPJ2 disability team developed an initial framework of indicators for the rights of persons with disabilities compliance. Subsequently, it was discussed in a workshop attended by 35 disability organizations and activists, as well as representatives of the National Development Planning Agency (BAPPENAS) and the Ministry of Law and Human Rights (KEMKUMHAM) on March 26 – 27, 2019. This workshop generated critical input and agreement that indicators of compliance in implementing the rights of persons with disabilities should be continuously developed and become a joint monitoring tool by the government and civil society organizations. Based on these results and agreements, a small group of representatives of disability organizations and activists met again on May 28 – 30, 2019 in Sentul to refine indicators and develop a list of monitoring questions. This process continued with meetings to finalize indicators and monitoring questions, as well as writing a monitoring manual based on the indicators that had been developed. The meetings also included reflections on the experiences of disability organizations and activists. In this process, the team consulted BAPPENAS and KSP to gain their support during the preparation of this guidebook.

The joint processes of developing indicators and monitoring tools are expected to generate collaborative and participatory initiatives, as

mandated in Law number 8 of 2016 concerning Persons with Disabilities, and Government Regulation number 70 of 2019 concerning Planning, Implementation, and Evaluation of Protection of Rights of Persons with Disabilities Compliance. This exercise is also anticipated to make a real contribution towards an inclusive Indonesia.

The first part of this book provides basic information on the rights of Persons with Disabilities. An elementary comprehension of the rights of Persons with Disabilities and the significance of monitoring is very important for organizations of Persons with disabilities and the wider civil society. This book presents a mutual agreement that monitoring the implementation of public interest and rights compliance is a shared responsibility, both the government as the 'implementer', as well as organizations of Persons with disabilities and other civil society as rights holders. Only with consistent monitoring, accurate data and information, a more constructive dialogues at the national and regional levels in formulating policies and further implementation can proceed and generate appropriate and valuable plans.

The next section discusses a situation analysis of the rights of Persons with disabilities compliance in several aspects. Although this section doesn't comprehensively describe the Persons with disabilities situation analysis, the explanation provides an overview of cross-sectoral nature of disability inclusion, which cannot be confined to one particular sector.

The main part of this book introduces the reader to indicators to measure compliance in implementing the rights of Persons with disabilities compliance and monitoring tools. The indicators formulated and introduced in this book are developed based on each article in the Convention on the Rights of Persons with Disabilities (CRPD), which are further elaborated into compliance indicators, both in structure, process and outcomes. These indicators refer to the Human Rights Indicators prepared by OHCHR and other important references.

The subsequent section is a practical guide explaining the monitoring stages for organizations of Persons with disabilities. In this section, the authors present concrete steps in designing, preparing, implementing, analysing and disseminating monitoring results. In addition, it provides further information to help readers gain a deeper

understanding of disability from a human rights perspective.

These indicators and monitoring tools will evolve, given the need to go through a trial and application process to see their effectiveness in guiding initiatives to monitor the rights of Persons with disabilities compliance. They are open for further modification and development. In addition, the use of this guide can be customised further to monitor specific sectors.

The authors hope this guide can help organizations of Persons with disabilities, both national and regional ones, in carrying out monitoring and advocacy work, as well as strengthening collective initiatives to build sustainable monitoring efforts. This book is also expected to be a reference for monitoring and evaluation as well as reporting systems organized by the state, both at the national and regional levels, to continue improving more Persons with disabilities inclusive policies and their implementation.

Finally, the authors congratulate and express their deepest gratitude to the network of organizations of Persons with disabilities and civil society organizations, as well as government representatives who have invested their time and ideas in preparing this guide. Once again, we hope this will be a meaningful effort in fulfiling our dream of an inclusive Indonesia[].

M Joni Yulianto
On behalf of the Drafting Team

WELCOME
DEPUTY V OF THE PRESIDENTIAL STAFF OFFICE

Bismillahirrahmanirrahim,
Assalamu'alaikum Warahmatullahi Wabarakatuh,
Best wishes for all of us,
Om Swastyastu,
Namo Buddhaya,
Salam Kebajikan,

First of all, I as Deputy V of the Presidential Staff Office personally express my high appreciation to all those who have succeeded in compiling and publishing the book "Disability Rights Indicators". It is not only in line with the spirit of UNCRPD but also in accordance with the targets and indicators in the SDGs (Sustainable Development's Goals) and the New Urban Agenda (UN Habitat).

Our constitution explicitly recognizes and protects citizens who need special facilities and treatment to gain equal opportunities and benefits in terms of equality and justice.

Reflecting on the process of ensuring compliance in realising the rights of Persons with disabilities from the policy aspect, in 2006 the United Nations issued the UNCRPD, and in 2007 the government ratified the

UNCRPD which was later sanctioned through Law 19/2011. Under President Joko Widodo's administration, the enactment of Law 08/2016 on Persons with Disabilities as an amendment of Law 04/1997 on Persons with Impairments marked a new era of changing the state's paradigm towards persons with disabilities: shifting from a charity-based to a human rights-based paradigm.

So far, there have been seven government regulations and two presidential regulations as derivative regulations from Law number 8 of 2016. One government regulation is still in progress, namely concessions and incentives. In these various regulations, the Indonesian government requires accessibility and adequate accommodation in all areas of development to increase the participation of Persons with disabilities in development.

The President Joko Widodo government has also implemented affirmative politi as an entry point for inclusion of Persons with disabilities in the formal employment sector. It is enacted through a minimum quota of 2% for persons with disabilities in the recruitment of civil servants and employees of state-owned companies and a minimum of 1% for the recruitment of private company employees.

Currently, the government is in the process of preparing a national action plan (RAN) and a regional action plan (RAD) as an elaboration of the Master Plan for Persons with Disabilities (RIPD). It is mandated by Government Regulation number 70 of 2019 concerning Planning, Implementation and Evaluation of Respect, Protection and Compliance of Rights of Persons with Disabilities.

In other words, the Government continues consolidating state law and policies in the context of mainstreaming the rights of Persons with disabilities by integrating them in the national and regional development with a human rights perspective. This move is in accordance with President Joko Widodo's directive that the key to respecting, protecting and complying with the rights of Persons with disabilities is the implementation of all existing regulations. Thus, no persons with disabilities are left behind from central and local government programs.

Based on these points, I believe the current government of President Joko Widodo together with non-government development actors,

especially the network of organizations and advocacy for the rights of Persons with disabilities, are relatively progressive in the preparation and establishment of various regulations related to respect, protection and compliance of the rights of Persons with disabilities in human rights perspective.

This is in line with the UNCRPD which explicitly places disability as a rights issue and requires the state and anyone else to place Persons with disabilities as subjects on an equal footing with others. Full and meaningful active participation of Persons with disabilities in the planning, implementation and evaluation of respect, protection and compliance of the rights of Persons with disabilities is the heart of inclusion.

As a state actor and duty bearer, the Indonesian government is obliged to periodically report to the United Nations on the progress of UNCRPD implementation. Therefore, an instrument is needed to monitor and evaluate the implementation of UNCRPD and various regulations regarding respect, protection, compliance and promotion of the rights of Persons with disabilities in Indonesia.

I consider this book very important and strategic to compile and present qualitative and quantitative data related to progress of the rights of Persons with disabilities compliance in Indonesia. It can be used also as an instrument for monitoring and evaluation by the central and regional governments, monitoring institutions, development partners, and the monitoring network for the rights of Persons with disabilities.

Finally, I congratulate the publication of the book "Disability Rights Indicators". Keep working to encourage the fulfilment of a just and civilized Indonesia.

Thank you,
Wassalamu'alaikum Warahmatullahi Wabarakatuh

Jakarta, April 14, 2021,

Jaleswari Pramodhawardani
Deputy V of the Presidential Staff Office

MESSAGE FROM THE EXPERT STAFF OF THE MINISTER OF NATIONAL DEVELOPMENT PLANNING/BAPPENAS SOCIAL AND POVERTY REDUCTION AFFAIRS

Peace and God's mercy and blessings be upon you. Best wishes for all of us.

Achieving inclusive development for persons with disabilities is not easy. Limited data, analysis, funds and politics often prevent Persons with Disabilities from accessing education, health, employment, justice, and various public services, even in crisis or disaster situations. The Covid-19 pandemic has indeed taught a lesson that the protection system and public services have not been able to provide comprehensive protection for all citizens.

The enactment of Law Number 8 of 2016 concerning Persons with Disabilities marked a paradigm shift in relation to Persons with disabilities. The law transformed people from being considered as objects, into subjects whose rights must be protected and get equal opportunities. This is also a manifestation of the Government's commitment to ratify the United Nations convention on the rights of Persons with Disabilities compliance (CRPD) through Law Number 19 of 2011. The embodiment of respect, protection, and compliance of the rights of Persons with disabilities

requires the synergy of all development sectors. It cannot rely on certain sectors only.

There is room for improvement towards more inclusive, equitable and comprehensive policies. One of the indicators of a country's progress is also related to how well the country protects, respects, and comply the rights of vulnerable citizens, such as Persons with Disabilities. One way to pursue this is monitoring the rights of Persons with disabilities compliance on an ongoing basis. Government Regulation Number 70 of 2019 concerning Planning, Implementation, and Evaluation of the Compliance, Protection of the Rights of Persons with Disabilities is also the basis for monitoring the rights of persons with disabilities compliance.

In this regard, I welcome the initiative and collaboration of several organizations of Persons with disabilities to develop guidelines on indicators and monitoring instruments on the dynamics of the rights of Persons with disabilities compliance in Indonesia. This initial step should be appreciated because this guide can serve as a reference and help policy makers and implementers better understand efforts to protect, respect, and comply with the rights of Persons with disabilities. Thus, the governance of the various laws above can really be implemented and an inclusive Indonesia can be achieved.

Wassalamu alaikum wr.wb.

Dr. Vivi Yulaswati, MSc.
Expert Staff for Social Affairs and Poverty Reduction
Ministry of Development Planning/Bappenas

PREFACE FROM AIPJ2/DFAT

Disability inclusion has been a priority of the Australia Indonesia Partnership for Justice since we started in 2011. Since that time, we have been led by persons with disabilities to engage with government and civil society organizations on an amazing journey to shift Indonesia's relationship with persons with disabilities from a charity model to the rights-based model. Of course, it started well before the Disability Law, but that was important, and eventually led to a range of Disability Regulations last year and early this year. The policy base is in place now, and represents a significant achievement. Well done to all!

However, as we all acknowledge, disability inclusion policies will only make a difference if they are implemented and if there is proof of progress. Effective monitoring and follow-up are the key. This is where the Disability Rights Indicators come in. Again, this book has demonstrated the ability of persons with disabilities to be leaders of change and it has been incredibly well supported by Government of Indonesia partners, most notably from BAPPENAS and the Office of the Staff of the President (KSP). The indicators have been tested and

refined during surveys to assess the impact of COVID-19 on persons with disabilities. They will be tested again and will need to be improved over time, like all useful indicators.

The indicators are more than a "ticking the box" exercise for activities. Rights are ultimately realized when life experiences change for the better, so changes in the life experiences of persons with disabilities need to be covered in the indicators. These are essentially qualitative and personal, so need to be measured in a sensitive and participatory way using appropriate monitoring tools.

We commend all of the leaders in Indonesia's disability movement who developed these indicators, and we thank the people who commented on the indicators from academic and policy perspectives. It is a testament to the ability of persons with disabilities, once again, that they have delivered this capacity for their government, have delivered the first ever disability rights indicators, and have already formed a task force to ensure they are implemented and refined over time. We are proud to be your partners.

Craig Ewers
Team Leader, Australia Indonesia Partnership for Justice
April 2021.

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CHAPTER 1

INTRODUCTION

A. Background

Efforts to respect, protect and comply with the Rights of Persons with Disabilities have been part of social movements for decades, especially in the global North: from resistance to the dominance of the medical model of disability—also known as the individual model—to the social model of disability, until the recognition of the dignity, worth and rights of persons with disabilities as part of human rights. The culmination of this recognition was the publication of The Convention on the Rights of Persons with Disabilities (CRPD), whose history and contents will be discussed elsewhere in this handbook.

As a human rights instrument, the CRPD explicitly places disability as a rights issue. It requires the state and anyone else to place Persons with Disabilities as subjects equal to others. As a legally binding instrument for ratifying countries, the CRPD, with the monitoring instruments under the United Nations, must be implemented by every state actor. Throughout implementation and progress, the government is obliged to report periodically to the United Nations, which in this case is represented by the CRPD committee.

The ratification of the UN-CRPD was carried out after the Ad Hoc Committee of General Assembly succeeded in negotiating the convention draft which lasted from 2002 to 2006. Subsequently, the

General Assembly of the United Nations (UN) adopted it on December 13, 2006 in New York through Resolution Number A/61/106 concerning the Convention on the Rights of Persons with Disabilities (CRPD).

In its mandate, the treaty member countries are obliged to protect, promote, and guarantee the rights of Persons with disabilities compliance. They are also obliged to provide certainty of equality of Persons with disabilities before the law. Indonesia became the 9th country in the order of 82 countries signing the UN-CRPD on March 30, 2007. Furthermore, the Government of Indonesia ratified the UN-CRPD in 2011 through Law No.19 of 2011, which was followed by the enactment of Law No. 8 of 2016 regarding Persons with Disabilities or *Penyandang Disabilitas*.

It took nine years for the Republic of Indonesia to finally sign, ratify, and amend the organic law on disability as a derivative of the CRPD. This organic law at the same time changes the *'cacat* (impairment) conception' that had been used by the government since independence into a 'disability conception'.[1] This long period is a proof that mainstreaming the issues and interests of Persons with disabilities into policy was not something easily accepted by the government and the House of Representatives.

In addition to the CRPD, Indonesia has also committed to a number of global instruments such as the 'Sustainable Development Goals' (SDGs), and the New Urban Development Agenda, all of which are aiming to mainstream the rights and interests of Persons with disabilities. As a consequence, Indonesia is obliged to periodically report to the world on the achievements of the various global instruments above.

The long ratification process of the CRPD, until the issuance of Law Number 8/2016 concerning Persons with Disabilities, cannot be separated from the full encouragement and participation of various groups and organizations of Persons with disabilities[2] and other civil

[1] In the view of WHO, disability is referred to as *"an evolving concept and that disability results from the interaction between persons with impairments and attitudinal and environmental barriers that hinders their full and effective participation in society on an equal basis with others."* It means disability is an evolving concept and the result of the interaction between 'people with impairments' and 'attitudes and environments that hinder their full and effective participation' in society on an equal basis with others."

[2] According to Purwanta (2004), there are 5 types of Disabled Organizations in Indonesia, namely

society. The number of discrimination and inequality cases on the basis of disability has united the movement of individuals, groups and organizations of Persons with disabilities to jointly demand a more equitable policy.

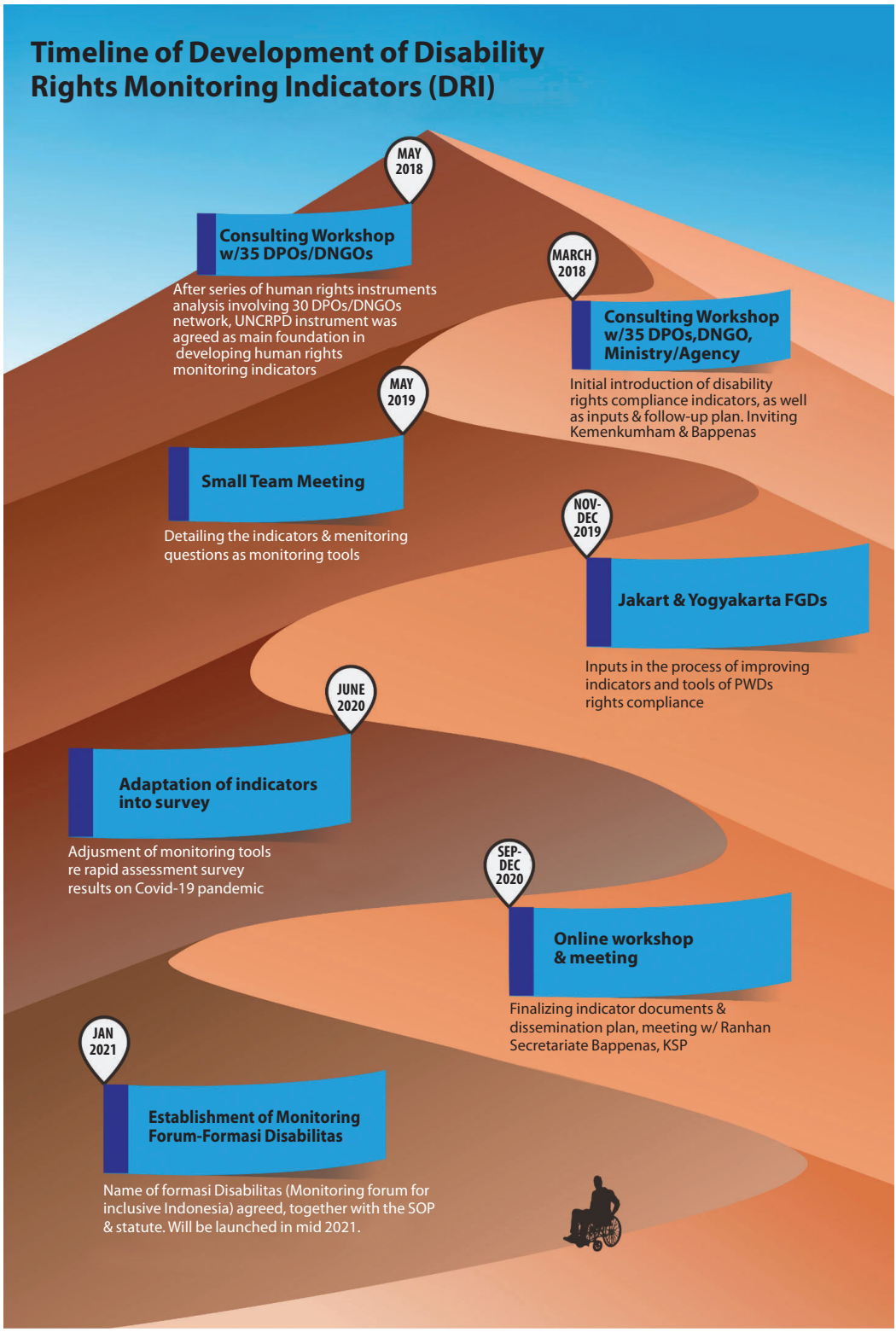
After the Law on Persons with Disabilities, the long work of the state has been to translate the human rights norms in the CRPD and the Law on Persons with Disabilities into more technical regulations, enforcement of the rules, and translation into development strategies and programs. All these lead to policies on respecting, protecting and complying with the rights of Persons with disabilities eventually prevail and benefit Persons with disabilities in Indonesia.

In addition to developing guidelines for the Rights of Persons with Disabilities compliance through government regulations and their derivatives such as Presidential Regulations, at the same time, systematic efforts are needed to monitor the progress of respect, protection, and compliance of the Rights of Persons with disabilities in a sustainable manner. To do this, a comprehensive monitoring framework that can be used by the government, organizations of Persons with disabilities, and other civil society is needed. Therefore, the indicator for the Rights of Persons with disabilities compliance and their monitoring tools have been prepared.

The drafting process took place in stages and was initially initiated by a network of Persons with disabilities organizations. Later on, the initiative was supported by various parties including the government through BAPPENAS and the Presidential Staff Office (KSP), linked through development partner organizations, especially AIPJ2. This is a contribution in accelerating the efforts to systematically monitor the government's commitment and performance in Rights of Persons with disabilities compliance.

With this instrument, the government as a 'duty bearer'—which will now be strengthened by the formation of the National Commission for Disabilities (KND), as well as organizations of Persons with disabilities as

organizations based on the similarity of types of impairment (or type of disability, the new meaning) namely: organizations supporting people with impairment/disabilities, federations of impairment/disability organizations, umbrella organizations for impairment/disability organizations and progressive organizations—which are more inclusive—in this case one of which has used the term diffable.


Timeline of Development of Disability Rights Monitoring Indicators (DRI)
MAY 2018
Consulting Workshop w/35 DPOs/DNGOs
After series of human rights instruments analysis involving 30 DPOs/DNGOs network, UNCRPD instrument was agreed as main foundation in developing human rights monitoring indicators
MARCH 2018
Consulting Workshop w/35 DPOs,DNGO, Ministry/Agency
Initial introduction of disability rights compliance indicators, as well as inputs & follow-up plan. Inviting Kemenkumham & Bappenas
MAY 2019
Small Team Meeting
Detailing the indicators & menitoring questions as monitoring tools
NOV-DEC 2019
Jakart & Yogyakarta FGDs
Inputs in the process of improving indicators and tools of PWDs rights compliance
JUNE 2020
Adaptation of indicators into survey
Adjusment of monitoring tools re rapid assessment survey results on Covid-19 pandemic
SEP-DEC 2020
Online workshop & meeting
Finalizing indicator documents & dissemination plan, meeting w/ Ranhan Secretariate Bappenas, KSP
JAN 2021
Establishment of Monitoring Forum-Formasi Disabilitas
Name of formasi Disabilitas (Monitoring forum for inclusive Indonesia) agreed, together with the SOP & statute. Will be launched in mid 2021.

institutions representing 'rights holders', can systematically monitor the progress of Rights of Persons with disabilities compliance. In addition, it can increase constructive dialogue for the advancement of policies on the protection of Persons with disabilities and implementation of the Rights of Persons with disabilities compliance.

B. Purpose and objectives

Purpose

This book is intended as one of the efforts to strengthen the initiative to monitor and document the progress of compliance in meeting the Rights of Persons with disabilities. Through this instrument, the stakeholders can prepare more mature and direct steps to monitor the progress of the rights of Persons with disabilities compliance on a regular basis. The results of the monitoring can provide an overview of the progress in various sectors.

Objectives

The objectives of this guide are:

1. Encouraging the active role of Persons with disabilities organizations to carry out systematic and continuous monitoring of the state's efforts in ensuring compliance in meeting the Rights of Persons with disabilities,
2. Encouraging mainstreaming of disability in the monitoring system organized by the state through existing ministries and state institutions,
3. Supporting the availability of data and information regarding the development of the situation of Persons with disabilities in Indonesia as a basis for dialogue, planning and modification of programs and policies that better address the needs of Persons with disabilities and are on target.

C. Target Audiences

1. National and regional Persons with disabilities organizations,
2. National and regional civil society organizations monitoring human rights,

3. Ministries and state institutions, especially state institutions that have a mandate to receive reports and complaints from sectors related to the needs of Persons with disabilities,
4. Local governments, both at the provincial and district/city levels, are responsible for the rights of Persons with disabilities compliance in their respective areas, and
5. Other parties conducting monitoring in sectors related to the Rights of Persons with disabilities compliance.

CHAPTER II

THE SIGNIFICANCE OF DISABILITY RIGHTS COMPLIANCE INDICATORS AND THEIR MONITORING TOOLS: SITUATION ANALYSIS

A. General description

Disability-inclusion discourse is increasingly present in the public space. The struggles of persons with disabilities groups in voicing their political rights and interests continue to resonate and gain the support of civil society organizations and even government officials. The participation of persons with disabilities in various social, national and state processes has developed slowly, starting from passive engagement to an active Persons with disabilities community movement. This change is driven by a variety of individuals and groups organized both at the village level to more complex persons with disabilities organizations, both single and multi-tiered organizations—with central to regional management.

Using a sociological approach, especially in the context of fighting against stigmatized ideas and treatment, these organized persons with disabilities groups are working towards de-stigmatization that include de-labeling, de-stereotification, de-segregation, and de-discrimination. Currently, we are familiar with the rights perspective on disability which has brought some changes, from terminology to regulation through public policies and development programs that are increasingly inclusive. Although it cannot be said to be ideally and broadly applicable, the direction of change is increasingly visible as envisioned by persons with disabilities, i.e., towards an inclusive Indonesian society.

The social perspective of disability—observing the phenomenon of disability in the context of structural power relations making persons with disabilities vulnerable- not only helps to identify and understand disability issues. It also facilitates the steps for empowering persons with disabilities both through state-based and community-based institutions. Several policies with disability perspective, especially based on human rights and empowerment programs at the base, family and village scale, have been promoted. A number of architectural designs, manufacturing, infrastructure, and literature began to adopt universal design, where the people's attention in producing inclusive works began to emerge one after another.

Although it can't be said to be complete by any means, these social changes are indeed encouraging. The ongoing work of changing perspectives, behavior and stigmatizing treatment of persons with disabilities still leaves humanitarian tasks to be completed. There are still many aspects that have not been touched and complaints or protests of persons with disabilities must still be voiced and heard. In this section, we will describe a number of these social realities, both in relation to the development of government policies and programs as well as good practices and future plans from a number of parties.

This presentation, with a situational analysis approach, will give us a number of portraits of conditions which are important to be resolved. As it is in a snapshot format, this presentation will not explain the overall reality faced by Persons with disabilities as citizens, nor the government as a party with an obligation to comply with the persons with disabilities rights.

B. Situation analysis

The following are some of the social situations faced by Persons with disabilities, namely:

1) Direction of disability governance in various policies and regulations;
2) The relationship between CRPD, SDGs and RIPD as a reference for social change;
3) Disability data collection and social protection programs for Persons with disabilities;

4) Political participation of persons with disabilities being more than the right to vote;
5) Vulnerability of women with disabilities and the right of access to justice;
6) Unravelling and reducing the vulnerability of persons with disabilities through the application of the inclusive village concept;
7) The vision of implementing an inclusive employment system;
8) Inclusive health services from basic health facilities to hospitals;
9) Improving infrastructure towards barrier-free persons with disabilities;
10) New Normal Era and challenges for persons with disabilities during the Covid-19 Pandemic

1. Directions for Disability Regulations in Policies and Various Regulations

The shift of the disability perspective from the individual model of disability to the social and rights model of disability has shaped policies and regulations. They move towards respecting, protecting and complying with the rights of persons with disabilities. The two most important regulations related to disability are Law no. 19 of 2011 concerning the ratification of the Convention on the Rights of Persons with Disabilities and Law no. 8 of 2016 concerning Persons with disabilities. The contents of these two laws are not much different, because the Law on Persons with Disabilities is an obligation for every country ratifying the convention. In addition, as a derivative of the Law on Persons with Disabilities, the government has passed several Government Regulations, Presidential Regulations and Ministerial Regulations as well as regional-scale policies.

Based on a review of the Law on Persons with Disabilities, it consists of 153 articles in 13 chapters, and mandates 18 provisions of implementing regulations to make it more operational at the government level. The 18 implementing regulations consist of 15 Government Regulations, 2 Presidential Regulations and 1 Ministerial Regulation. As for the government sectors regulating it, as mandated in the Law on Persons with Disabilities, there are 24

sectors (relevant ministries/agencies), 30 state institutions and 10 private entities.

To operationalize the two regulations, currently, the government has put into effect 7 Government Regulations and 2 presidential regulations, namely:

1. Government Regulation Number 70 of 2019 concerning Planning, Implementation, and Evaluation of the Respect, Protection, and Compliance of the Rights of Persons with Disabilities
2. Government Regulation Number 52 of 2019 concerning the Implementation of Social Welfare for Persons with disabilities
3. Government Regulation Number 13 of 2020 concerning Adequate Accommodation for Students with Disabilities
4. Government Regulation Number 39 of 2020 concerning Adequate Accommodation for Persons with Disabilities in Judicial Processes
5. Government Regulation Number 42 of 2020 concerning Accessibility to Housing, Public Services and Protection from Disasters for Persons with Disabilities
6. Government Regulation Number 60 of 2020 concerning the Disability Service Unit in the Employment Sector
7. Government Regulation Number 75 of 2020 concerning Habilitation and Rehabilitation Services for Persons with Disabilities
8. Presidential Regulation Number 67 of 2020 concerning Terms and Procedures for Giving Awards in Respect, Protection, and Compliance of the Rights of Persons with Disabilities
9. Presidential Regulation Number 68 of 2020 concerning the National Commission for Disabilities (KND)

As of today, one government regulation is still being drafted, i.e., the Government Regulation on Concessions and Incentives in the context of respecting, protecting and complying with rights of persons with disabilities. If this guideline is published before the government regulation is approved, the authors will adjust it at the later stage.

Disability policy in the regulations is not only based on the two disability laws and their derivatives, but also intersects with other regulations, for instance, those related to election affairs, criminal law, correctional facilities, road traffic and transportation, state-owned enterprises, disaster management, protection of domestic workers, civil servant, national sports, mother and child welfare, family resilience, psychology profession, job creation, personal data protection, national education system, state capital, and national development planning system.

Likewise, there are a number of government regulations intersecting with the issue of disability although they are not derivatives of the two laws above, such as Ratification of the International Agreement as regulated in Presidential Regulation Number 1 of 2020 concerning Ratification of the Marrakesh Treaty to Facilitate Access to Published Works for Persons with Blind, Visually Impaired, or Reading Disabilities in Printed Works.

In addition, it also includes population administration, implementation of work accident insurance programs and occupational health and death insurance.

Likewise, regulations at the ministry level, which relate to disability issues, namely population administration information systems, data collection and issuance of population documents for vulnerable residents, requirements and procedures for imposing museum entrance fees for research activities, state guests, persons with disabilities, orphans, and the elderly, guidelines for determining criteria for work accidents, disabilities, and occupational diseases as well as criteria for determining death for state civil servants, providing accessibility to public transportation services for service users with needs. Gradually, disability governance will become more complex and mainstream.

In the context of this policy intersection, the need for the government and other state apparatus to make adjustments or harmonization of the laws is urgent. This legal harmonization aims to ensure harmony, conformity, synchronization, and balance of legal norms in laws and regulations as a legal system within a unified framework of the national legal system. In the context of

the protection of persons with disabilities, harmonization of laws is very important considering the issue of disability is a cross-sectoral issue related to many aspects such as education, economy, politics, law and so on. Harmonization of law is carried out by making adjustments to the elements of the applicable legal order within the framework of the national legal system, which includes legal substance, legal structure, and legal culture components.

One of the government regulations closely related to the instrument for the Rights of Persons with Disabilities compliance is Government Regulation Number 70 of 2019 concerning Planning, Implementation, and Evaluation of the Respect, Protection, and Compliance of the Rights of Persons with Disabilities. In this regulation on Disability Planning, there is an attachment regarding the Master Plan for Persons with disabilities (RIPD), in which seven strategic targets become the government's focus on the Rights of Persons with Disabilities compliance, involvement of Disabled Persons' Organizations (DPOs) in the preparation of the RIPD, and supervision of DPOs on the process of implementing the RIPD.

RIPD is the government's 25-year long term plan. Currently, to prepare a more structured work plan, the central government is preparing a medium-term plan (5 years) based on the National Action Plan for Persons with Disabilities (RAN-PD 2020 - 2024). It will be followed by every province and district/city with Regional Action Plan for Persons with Disabilities (RAD).[3] Each government will then prepare a short-term (annual) plan drawn up in the programs and activities of ministries/agencies, as well as provincial and district/city regional apparatuses related to respecting, protecting, and complying with the Rights of Persons with Disabilities.

The seven strategic objectives in the RIPD consist of:

1. Inclusive Data Collection and Planning for persons with disabilities;
2. Providing a barrier-free environment for persons with disabilities;

[3] The Monitoring Society Forum for Indonesia with Disabilities Inclusive (FORMASI – Disabilitas) held a dialogue with BAPPENAS who prepared the draft RAN – PD 2021 – 2026 and provided input to strengthen this five-year plan for efforts to protect, respect and comply with disability rights. The meeting was held via zoom, on February 2, 2021.

3. Protection of rights and political access and justice for persons with disabilities;
4. Empowerment and independence of persons with disabilities;
5. Provision of an inclusive economy for persons with disabilities;
6. Education and skills for persons with disabilities; and
7. Access and equitable distribution of health services for persons with disabilities.

Currently, the preparation of the RAN – PD has involved many relevant ministries/agencies. According to Maliki (Director of Poverty Reduction and Social Welfare of BAPPENAS), the strategic objectives of the RAN for persons with disabilities are strengthening regulations and policies, increasing access to basic rights services, strengthening the complaint system, services and handling violations against persons with disabilities, providing legal aid services, integrating data on persons with disabilities and strengthening the supervision and monitoring system for social institutions for persons with disabilities.

The next challenge, then, is how the government ensures the involvement of individuals and groups as well as organizations of persons with disabilities in preparing the RAN and RAD. Without the involvement of persons with disabilities in planning, especially in the regions, it will weaken the quality of development plans.

2. Relationship between CRPD, SDGs and RIPD as a Reference for Social Change

The United Nations Convention on the Rights of Persons with Disabilities (CRPD) has provided the disability movement with a strong legal framework to advocate for the rights of Persons with disabilities. The thirty-three core articles of the CRPD, covering all areas of life, must be implemented and monitored. The Indonesian government and all state parties have a legal obligation to comply.

The 2030 Agenda for Sustainable Development provides political momentum to push for the realization of the CRPD. In fact, there are many links between the articles of the CRPD and the sustainable development goals as the 2030 Agenda also builds on existing international and national commitments such as the CRPD.

The Convention on the Rights of Persons with Disabilities (UN-CRPD) is legally binding on countries that have ratified it. While the development agenda in the SDGs is a political vision for a better world to be achieved in 2030. The 2030 Agenda (SDGs) and the UN-CRPD both clearly involve persons with disabilities. Also, both can be used as an advocacy platform to attract the attention of policy makers in making disability-inclusive policies and programs. The 2030 Agenda commits, in the same spirit as the CRPD, to empowering citizens at risk of vulnerability, including persons with disabilities. It also promotes universal respect for human rights, equality and non-discrimination—as stated in the slogan "No One Left Behind".

Given that currently the government has established RIPD as a political decision that prioritizes government actions to comply with the Rights of Persons with Disabilities (CRPD) into 7 strategic targets, these three legal instruments will intersect and reinforce each other.

Disability issues are referred to in various sections of the SDGs and in particular in sections related to education, growth and employment, inequality, accessibility of human settlements, and the collection and monitoring of SDGs data. For example: Goal 4 on inclusive and equitable quality education and promotion of lifelong learning opportunities for all focuses on eliminating gender disparities in education and ensuring equal access to all levels of

education and vocational training for the vulnerable, including Persons with disabilities. In addition, the goal calls for building and improving educational facilities that are sensitive to children, Persons with disabilities and gender and also provide a safe, non-violent, inclusive and effective learning environment for all.

In Goal 8, to promote inclusive and sustainable economic growth, full and productive employment and decent work for all, the international community aims to achieve this for women and men, including for Persons with disabilities, and equal pay for work which is the same value.

Closely related is Goal 10, seeks to reduce inequality within and between countries by empowering and promoting the social, economic and political inclusion of all, including Persons with disabilities.

Meanwhile, Goal 11 aims to make cities and human settlements inclusive, safe and sustainable. To achieve this goal, member states are called upon to provide access to safe, affordable, accessible and sustainable transport systems for all, enhancing road safety, in particular by expanding public transport, with particular attention to the needs of those in vulnerable situations, such as Persons with disabilities. The proposal calls for providing universal design to green spaces and public spaces that are safe, inclusive and accessible, especially for Persons with disabilities.

Goal 17 emphasizes that in order to strengthen the means of implementation and revitalize the global partnership for sustainable development, data collection and monitoring and accountability of the SDGs are critical. Member States are requested to increase capacity building support for developing countries, including least developed countries (LDCs) and small island developing states (SIDS), which will significantly increase the availability of high-quality, timely and reliable data, which are also disaggregated by disability.

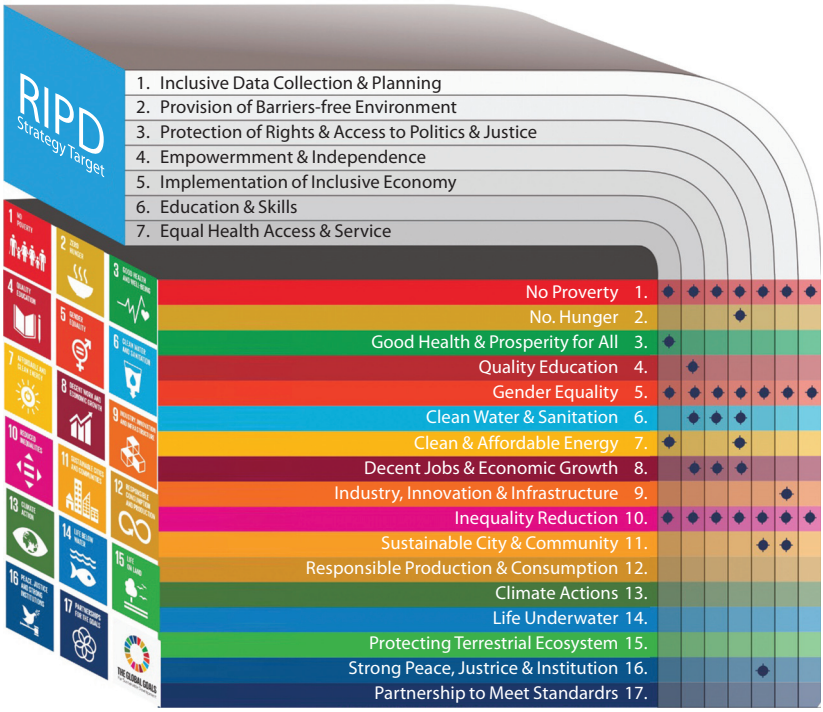
For further explanation, the relationship between the goals in SDGs, the articles in the CRPD, and the targets in the RIPD will be illustrated in the relationship as shown in the following table:

SDGs	CRPD	RIPD
Goal 1 No Poverty	Applies to all UN-CRPD articles	Applies to all strategic goals
Goal 2 No Hunger	Related to Article 28 - Decent standard of living and social protection	Related to the fourth strategic goal: Empowerment and self-reliance and realization of an inclusive economy
Goal 3 Good Health and Wellbeing for Everyone	Related to the CRPD Article 10 - Right to life, Article 11 - Risky situations and humanitarian emergencies, Article 23 - Respect for home and family, Article 25 - Right to Health and Article 26 - Habilitation and rehabilitation	Related to the seventh strategic goal: Access and equitable distribution of health services
Goal 4 Quality Education	Related to Article 24 – Education	Related to the sixth strategic goal: Education and skills
Goal 5 Gender Equality	Applies to all UN-CRPD articles	Applies to all strategic goals
Goal 6 Clean Water and Sanitation	Related to Article 28 - Decent standard of living and social protection	Related to the fourth and seventh strategic objectives: Empowerment and self-reliance; access and equitable distribution of health services
Goal 7 Clean and Affordable Energy	Also related to Article 28 - Decent standard of living and social protection	Related to the fourth and seventh strategic objectives: Empowerment and self-reliance; access and equitable distribution of health services

SDGs	CRPD	RIPD
Goal 8 Decent Work and Economic Growth	Related to Article 27 - Work and employment	Related to the fourth, fifth and sixth strategic objectives: Empowerment and self-reliance; Provision of an inclusive economy; Education and skills
Goal 9 Industry, Innovation and Infrastructure	Related to Article 9 - Accessibility, Article 20 - Personal mobility and Article 21 - Freedom of expression and opinion, as well as access to information	Related to the second strategic objectives of barriers-free environments
Goal 10 Reducing Inequality	Related to Article 5 - Equality and non-discrimination	Related to all strategic objectives: Inclusive Data Collection and Planning; unhindered environment; Protection of rights and access to politics and justice; Empowerment and independence; Provision of an inclusive economy; Education and skills; and access and equitable distribution of health services.
Goal 11 Sustainable Cities and Communities	Related to Article 9 - Accessibility, Article 11 - Risky situations and humanitarian emergencies, Article 19 - Independent living and inclusion in the community, Article 29 - Participation in political and public life and Article 30 - Participation in cultural life, recreation, leisure and sports	Related to the second and third strategic objectives: barriers-free environment, Protection of political rights and access and justice

SDGs	CRPD	RIPD
Goal 12 Responsible Production and Consumption	Not mentioned or stated in the UN-CRPD	Not mentioned
Goal 13 Climate Action	in accordance with Article 21 - Freedom of expression and opinion, as well as access to information and Article 25 – Health	Not mentioned
Goal 14 Life Under Water	Not mentioned or stated in the UN-CRPD	Not mentioned
Goal 15: Protecting Land Ecosystems	Not mentioned	Not mentioned
Goal 16 Peace, Justice and Strong Institutions'	Related to 7 Articles: Article 4 - General obligations, Article 10 - Right to life, Article 13 - Access to justice, Article 15 - Freedom from torture or other cruel, inhuman or degrading treatment or punishment, Article 16 - Freedom from exploitation, violence and harassment, Article 18 - Freedom of movement and nationality and Article 29 - Participation in political and public life	Related to the third strategic objective: Protection of political rights and access and justice
Goal 17 Partnership for Goal Achievement	related to Article 32 - International cooperation	Not mentioned

Linkage of UN-CRPD, SDGs, and RIPD



3. Disability Data Collection and Social Protection Program for Persons with disabilities

The quality of disability data in Indonesia continues to improve. In the disability data based on SUPAS 2015 and SUSENAS 2018, the data collection instrument used is no longer based on impairment or organ/body conditions but includes a wider social dimension. The instrument is known as the WGDS model, or Washington Group on Disability Statistics and the number of persons with disabilities in aggregate is getting significantly closer to the percentage of the world's number of persons with disabilities. Referring to SUPAS 2015, data on Persons with disabilities is 9% (21,107,575) of the total population (246,636,175). While using the 2018 SUSENAS data, the number of Persons with disabilities is 12% (30,385,772) of the total population (264,226,891).

Table
Comparison of World and Indonesian disability data

World Health Organization (WHO, 2011)	Indonesia
• 15% of the world's population are Persons with disabilities • 82% of Persons with disabilities are in developing countries • 70-80% of Persons with disabilities are of working age, but the majority are not working • 90 percent of children with disabilities in developing countries are not in school	• WHO (2011): 10% of Indonesia's population (24 million) are Persons with disabilities • Pusdatin Ministry of Social Affairs (2010): 11.6 million Persons with disabilities • Ministry of Manpower (2010): 7.1 million are Persons with disabilities • BPS, SP2010: 4.45 percent of the population aged 2 years and over are Persons with disabilities. • SUPAS 2015: 9% (21 million)

Unfortunately, both SUPAS and SUSENAS are surveys and not national censuses. Moreover, until now, the government does not yet have a disability information system that is easily accessible to find out the reality experienced by Persons with disabilities, with all its social aspects. Until now, activists of the Persons with disabilities movement are still advocating to the government to conduct a population census of Persons with disabilities using the Washington Group form and develop an Indonesian disability information system.

Linking disability data collection with the context of the social protection system, disability data is associated with Persons with disabilities who are entitled to social protection, i.e., those who are categorized as poor, disabled and permanently disabled (Law No. 40/2004 on the National Social Security System). In this context, through the Joint Decree (SKB) of the Minister of Finance, the Minister of Social Affairs and the Minister of Home Affairs regarding the Support for Accelerating the Updating of Integrated Social Welfare Data by Regency/City Governments set on July 28, 2020, the government continues to develop a data collection system called DTKS (Integrated Data on Social Welfare). DTKS is an electronic data

system containing social, economic and demographic information from approximately 99 million individuals with the lowest welfare status in Indonesia.

Thus, DTKS is not a total data of Persons with disabilities. The government must and is making efforts to prepare comprehensive disability data. If the disability census can be carried out in the coming years, it is hoped that the Indonesian government will have a National Data on Persons with disabilities (DNPD) and a Disability Information System (results of the DNPD analysis).

Regarding Persons with disabilities and social protection, there are differences in perspective between supporters of the targeting model and universal coverage one. The government, which follows the targeting concept of social security system, has prepared a social protection scheme for Persons with disabilities —i.e., Persons with disabilities under the poor or underprivileged households' category. Meanwhile, for supporters of the universal coverage model, all citizens, including Persons with disabilities, will be under the state's social protection scheme. There is another idea, as stated by Edy Supriyanto, director of the SEHATI Association, Sukoharjo, Central Java, which is that it is possible to keep targeting approach, but Persons with disabilities should be included as an indicator, in addition to poor, incapacitated and permanent total disability.

The TNP2K (National Team for the Acceleration of Poverty Reduction) who compiled a policy brief related to social protection for Persons with disabilities stated that 94.5% of people with severe disabilities have not yet benefited from social protection programs. The current social protection, however, is a separate source of income from around 9% of persons with severe disabilities of all Persons with disabilities in Indonesia. The social protection system for Persons with disabilities is enshrined in two legal umbrellas regarding Persons with disabilities in Indonesia: Law No. 19 of 2011 concerning Ratification of the Convention on the Rights of Persons with Disabilities and Law No. 8 of 2016 concerning Persons with Disabilities.

Quoting from the TNP2K Policy Brief, currently the social protection system for Persons with disabilities is covered in several schemes. The first scheme is through the Family Hope Program (PKH) for 118,382 people with severe disabilities and receiving cash assistance (2018 data). Then there is the Social Assistance for Persons with Severe Disabilities (ASPDB) which covers 22,500 persons with disabilities in the severe category (2017 data). The third scheme is social protection from BPJS Employment which provides guarantees to 112,490 persons with disabilities (2017 data) through the Work Accident Insurance (JKK), Death Security (JKM) and Old Age Security (JHT) schemes. The fourth scheme issued by PT. Taspen and PT Asabri which provide a pension system for Persons with disabilities to members of the TNI and Polri, although the exact number is unknown. The last scheme is through the PBI class of Health BPJS, health insurance scheme which covers around 1.2 million Persons with disabilities and 20,404 Persons with disabilities who received assistance with assistive devices from 2015 to 2017. According to this Policy Brief, there are still 4,358,766 Persons with disabilities in the severe category who are still not covered by the above social security and protection system. This figure is equivalent to 94.5% of the proportion of Persons with disabilities in the severe category. This means that only about 5.5% of people with severe disability are covered by the Indonesian social protection system.

According to this Policy Brief, the main issue faced by Persons with disabilities is the fact that Persons with disabilities, regardless of whether they are above or below the poverty line, need additional funds. Due to their disabilities, they are at the same time experiencing barriers to social participation. These issues make Persons with disabilities vulnerable to poverty and also prevent them from taking sustainable steps out of poverty.

On the other hand, the TNP2K team also presented an interesting idea by offering that the social protection system is implemented comprehensively for persons with disabilities. The team offers three levels of schemes. The first level is through a scheme that has been carried out through PKH, where the social assistance funds are directly handed over to Persons with

disabilities; and if this family is separated from the poor category, members with disabilities will still receive social funds in exchange for costs in carrying out their activities and participation. This social fund for Persons with disabilities should be managed as a disability grant. The second level, social protection that comes from Persons with disabilities funds for Persons with disabilities in the severe category at the age of children and adults.

This scheme emerged because only Persons with disabilities who came from poor families received social protection schemes from PKH and only Persons with disabilities received employment social protection from Employment BPJS. Therefore, there must be a social protection scheme originating from the disability fund. Disability funds can be set from IDR 300,000 per month per individual. This disability fund can also be given directly to Persons with disabilities who are affected by natural disasters.

Finally, level 3 is social protection for people who become disabled due to work. They can get social protection through the Work Accident Insurance (JKK) and Death Security (JKM) schemes, although the savings in the Old Age Security (JHT) can be claimed flexibly. This scheme can be in the form of periodic cash assistance, rehabilitation costs and access to return-to-work program.

Outside the three levels, there is one scheme that can be used for all Persons with disabilities, namely the concession scheme. This concession should be implemented for all Persons with disabilities. Concessions can be in form of free education, free public transportation, discounts on certain services, reservations on public housing programs, taxes, and subsidized health insurance. This concession is important as compensation for the additional funds spent by almost all persons with disabilities. This concession can also be a compensation for the termination of a person with disability from work due to a disability condition or the termination of a person caring for a person with disability (caregivers) from their previous job.

4. Political Participation of Persons with Disabilities is Not Just a Right to Vote

So far, political participation of persons with disabilities has been observed only in the electoral aspect. It narrows down the meaning of political participation of persons with disabilities that supposed to cover all aspects of power relations, not only in terms of electoral contestation. Several other political arenas are in the realm of the persons with disabilities movement where disability organizations carry out work on empowering Persons with disabilities, advocacy for persons with disabilities and public policy changes, and fighting for ideas in discourse arena.

The participation of persons with disabilities in elections is regulated in Law no. 7/2017 concerning Elections, namely article 5 which reads "Persons with disabilities who meet the requirements have the same opportunities as voters, as candidates for members of the DPR, as candidates for members of the DPD, as candidates for President/Vice President, as candidates for DPRD members, and as election organizers. Besides, Article 29 (Law No. 19/2011) states that persons with disabilities have the right to vote and be elected just like other people. From the article, it can be concluded that persons with disabilities have the same opportunities as voters and candidates who are elected. While, the notion of "equal opportunity" is a condition that provides opportunities and/or provides access to persons with disabilities to channel their potential in all aspects of state and community administration.

Based on data from the General Elections Center of Access for Disabilities (PPUA) (2019), the number of voters with disabilities in the 2019 Election Permanent Voters List (DPT) was 1,247,730 people. It consists of physical disabilities (7%, 83.1 thousand voters), visually impaired (13%, 166.3 thousand), deaf/speech disabilities (20%, 249.5 thousand), intellectual disabilities (27%, 332.7 thousand) and other disabilities (33%, 415.9 thousand). This figure is still very low.

This low political participation is caused by the common obstacles faced by persons with disabilities in voicing their political rights. Starting from structural barriers (weakening policies such as physical and mental health requirements), obstacles caused by

data collection technology, limited campaigns and voting, as well as strong thinking and stigmatic treatment not only among families with disabilities, but also the society in general.

In the implementation of elections to date, there have been a number of positive changes in an effort to accommodate the needs and interests of Persons with disabilities. For example, the Election Commission (KPU) has opened up opportunities for Persons with disabilities to participate in the selection process for the Provincial/District/City KPU, as well as KPU Ad Hoc Bodies such as District Election Committee (PPK), Voting Committee (PPS), Voting Organizing Group (KPPS). This is regulated in PKPU 36/2018 Article 36 paragraph (5): Persons with disabilities can be members of PPK, PPS and KPPS as long as they meet the requirements and are able to carry out their duties as members of PPK, PPS and KPPS. Furthermore, as stipulated in PKPU 20/2018 Article 7 paragraphs (2) and (3), the KPU does not limit Persons with disabilities as candidates for legislative or regional head candidates. The KPU also stated that Persons with disabilities are not included in category of people with health problems that can disqualify candidates.

Until now, apart from collecting data on voters with disabilities since 2014, KPU has also conducted voter socialization and education regarding the importance of participation of Persons with disabilities in exercising their voting rights. KPU also involves Persons with disabilities as one of the strategic groups in Volunteer Democracy, apart from: novice voters, young voters, women's groups, netizens, religious groups, marginalized groups, etc.

5. The Vulnerability of Women with Disabilities and the Right of Access of Persons with disabilities to Justice

The vulnerability of Persons with disabilities, especially women with disabilities, is still a big issue in this country. SUPAS 2015 data, as presented by the directorate of Family, Women, Children, Youth and Sports, Ministry of National Development Planning/BAPPENAS, 2020, shows that currently there are 10.3 million households with members with disabilities; there are 1.4 million persons with disabilities who do not have a NIK (Population Identification

Number)[4]; 8 million households with disabilities without proper sanitation, 384 thousand households with Persons with disabilities without electricity, 8.2 million households with Persons with disabilities without health insurance. Vulnerability in the household sphere will burden women with disabilities.

Meanwhile, data on women with disabilities who are the most victims of violence are women with intellectual disabilities (47%) followed by women with psychosocial disabilities (20.6%). In relation to persons with psychosocial disabilities, one of the problems that need to be addressed is the presence of thousands of persons with psychosocial disabilities confined to social institutions in Indonesia in conditions of inadequate or inhumane treatment.

According to Yenni Rosa Damayanti, activist for people with psychosocial disabilities (PJS Jakarta), the residents of the institution are placed in prison-like facilities for an indefinite period of time, from months to years. Furthermore, in many institutions, they are not only confined to the institution complex, they can't even leave the room/cell where they are, except to eat. They are locked in the room day and night and the length of time they are locked in the institution can be months to years. In addition, many residents of this institution were chained.

Apart from that, the problem that is often faced by the residents of the institution is the practice of forced treatment, where anti-psychotic drugs with the same type of drug with uniform doses are given without the consent of the person concerned. This means that there is no individual diagnosis, although not all residents are psychotic. The Human Rights Commission (Komnas HAM), which conducted the investigation, also found the same condition during a visit to six social institutions in West Java and Central Java.

In such a bad situation, women with psychosocial disabilities will lose their future. For this reason, two solutions proposed by the persons with disabilities movement are changing social institutions from closed forms such as prisons to open forms such as dormitories. Second, providing support so women with disabilities

[4] A NIK is required for free vaccination.

can get out of the institution and live inclusively in the community, such as the availability of social housing with full support to meet their daily needs.

Regarding the vulnerability of women with disabilities in general, according to disability activists, Nurul Saadah, director of SAPDA Yogyakarta, women with disabilities in their life cycle experience multiple vulnerabilities and discrimination. This conclusion was based on a research on the life cycle of women with disabilities in 2020. The vulnerability of women with disabilities can be seen in the frequent occurrence of women with disabilities experiencing violence and multiple discrimination, even more than people in general. Using a life cycle perspective, the results of SAPDA research described in detail the forms of vulnerability of women from birth to late adulthood.

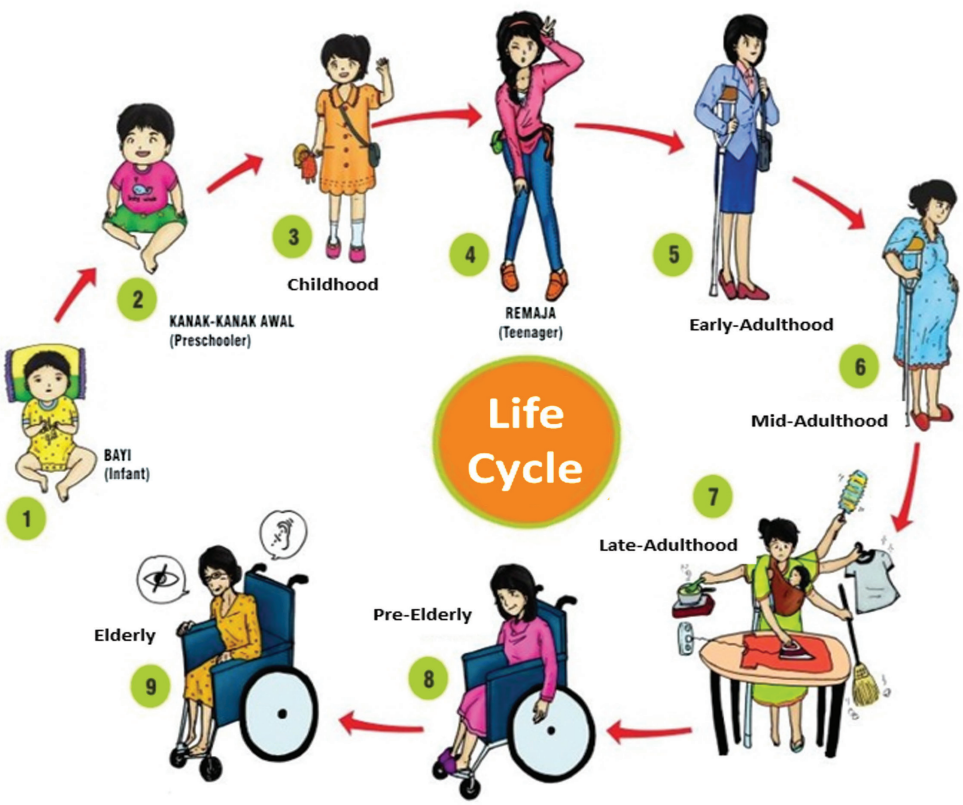


Illustration of the Persons with disabilities' Life Cycle (Source: SAPDA, 2021)

Efforts to fight for the rights of women with disabilities have strengthened among movement activists, both by disability organizations and legal aid organizations or institutions that care about Persons with disabilities issues dealing with the law or other public services. Support also came from various community organizations (religious and non-religious organizations) who began to voice the importance of mainstreaming disability inclusion. Now there is positive news regarding the development of regulations that allow the right of access to justice for persons with disabilities in dealing with the law, through Government Regulation No. 39 of 2020 concerning Adequate Accommodation in all judicial institutions and correctional institutions.

Before this regulation was ratified, a number of government law offices in the regions began to collaborate with disability organizations, such as in Yogyakarta and South Sulawesi. Efforts to streamline the perspective of disability through discussions or training with law enforcement officers in various agencies and the empowerment of paralegals and advocates have made judicial practice begin to embrace the perspective of disability inclusion. Small changes began to appear physically with the availability of ramps, guiding blocks, toilets, access parking lots, etc. If the consistency of this regulation is followed up internally by the legal institutions to work according to the mandate of Government Regulation 39/2020, then the stigmatic treatment (labeling, stereotyping, segregation and discrimination) against Persons with disabilities can be eliminated.

6. Unraveling and Reducing the Vulnerability of Persons with Disabilities through the Application of the Inclusive Village Concept

The majority of persons with disabilities live in rural areas and have low levels of education. Most public schools in the village do not accept persons with disabilities and the majority of Special Schools are located in the district capital. Only a small number of persons with disabilities can enjoy basic education, especially public schools and special schools. Based on the 2018 Education Statistics, the percentage of the population aged 5 years and over

with disabilities who are still in school is only 5.48%. This percentage is far from the population who are not persons with disabilities, which reached 25.83%. Most Persons with disabilities dominate at the low level of education, namely 25.83% elementary school/ equivalent, 30.54% did not finish elementary school, and some even did not/have never attended school, 21.22%. While those who completed their education up to university level were only 2, 8%. This figure is far when compared to non-disabled who reached 9.48% in completing college. Meanwhile, only 3.38% of those who did not/have never attended school.

The higher the age group of persons with disabilities, the lower the School Participation Rate (APS). The highest APS occurs in the age group 7-12 years, which is 91.12% for persons with disabilities and 99.29% for non-disabled persons. Meanwhile, the lowest APS occurred in the 19–24-year age group, namely 12.96% for persons with disabilities and 24.53% for non-persons with disabilities.

One of the reasons for the high number of persons with disabilities who are uneducated or have low education levels is because they live in remote rural villages with inaccessible architectural, infrastructure, manufacturing designs and social settings. That is why the process of empowering and advocating for persons with disabilities has begun to be voiced and carried out in villages.

Today, the Ministry of Villages, Development of Disadvantaged Regions, and Transmigration begun to raise concerns about building disability-inclusive villages. Early last year, before the Covid-19 pandemic hit Indonesia, the Ministry of Villages had ordered village governments throughout Indonesia to prioritize development budgeting sourced from the Village Fund to be used to build inclusive villages. Although it is only this year that the government through the Ministry of Village voices the inclusive villages, this idea has been around since the Village Law was passed in 2014. At the first Inclusion Gathering in Sendangtirto village, Sleman Regency, DIY, the persons with disabilities movement activists formulated nine indicators to develop inclusive village.

Recently, with the support of PEDULI Program funded by the Australian Government, the inclusive village concept was then put into practice in a number of districts, such as Sleman, Gunung Kidul, Kulon Progo, Gowa, Bone, Bulukumba, Sumba, Situbondo, etc. through various civil society organizations (CSOs). In addition to practicing the concepts and indicators of disability-inclusive villages, books on experiences in building inclusive villages and modules on the implementation of inclusive villages have been produced.

7. Vision of Implementing an Inclusive Employment System

Based on Sakernas data, BPS, August 2019, the TPAK or labor force participation rate for Persons with disabilities is lower than the TPAK for non-Persons with disabilities. This shows that most Persons with disabilities are not economically active. Meanwhile, the TPT or Open Unemployment Rate for productive age Persons with disabilities is lower than the TPAK and TPT for non-Persons with disabilities. That means it is easier for non-Persons with disabilities with education to get a job.

Apart from the low rate of TPT, the low rate of LFPR (labor force participation rate) is a crucial problem faced by persons with disabilities. Working, both in the formal and informal sectors, will enable a person to live independently and in certain contexts to assume responsibility for the family s/he is dependent on. For example, parents with disabilities with children, or persons with disabilities who are entering a productive age and want to be useful and play a role in socio-economic life.

Currently, the employment sector still has a number of obstacles for persons with disabilities. Disability inclusion in this sector is a challenge that must be solved. Some of the barriers identified are on the accessibility of the environment, transportation, products and services; unfavorable social protection designs; non-inclusive vocational education and training; lack of support for youth with disabilities in the school-to-work transition process; the absence of public employment services that support persons with disabilities; and the low awareness of employers to comply with the quota

obligations mandated by Law no. 8 of 2016 on persons with disabilities.

At the level of employers, both in government and the private sector, there is still a lack of awareness and confidence to involve persons with disabilities in the workplace. In addition, if persons with disabilities do work, they will face conditions where the available work places and equipment are difficult to reach and ICT facilities are not accessible. Then, there is still a lack of effort to adjust the workplace and lack of support to maintain jobs and develop careers for persons with disabilities in the long term; and the lack of support for MSMEs employing persons with disabilities.

Another aspect of employment identified as an obstacle for persons with disabilities to work is the limited attention of associations or trade unions and employers to them, both prospective workers and those who already work. Likewise, stigmatic thoughts and treatment are still rampant (labeled, stereotyped, segregated and discriminated) and persons with disabilities tend to be more exposed to violence and harassment, including in the workplace.

A research paper by Netherlands Leprosy Relief (NLR) on disability employment in South Sulawesi indicates a lack of comprehensive data on persons with disabilities that all stakeholders can use in preparing Persons with disabilities employment opportunity programs. The workforce preparation process through inclusive education or employment training programs is still far from adequate, which closes the opportunity for the persons with disabilities participation. If indeed an economic improvement program exists, it is usually delivered in a charity mode. The preparation for work program is usually related to entrepreneurship while still showing aspects of stereotypical treatment. They are rarely comprehensive. Typical examples are massage training for the visually impaired and sewing for the physically disabled. In the government sector, all disability issues, even those linked to employment, are always related to the social service department on a program for people with social welfare problems.

The root of the problem according to persons with disabilities views and some studies is the lack of knowledge about disability policies in the world of work and awareness of the importance of creating a disability-inclusive work environment, especially in the implementation process. Disability stigmatization also has a big influence on the emergence of difficulties for persons with disabilities at work. For example, there is an assumption that persons with disabilities are not productive and are seen as a burden in the family. Another issue identified was the lack of information about persons with disabilities who had potential to work, considering that most persons with disabilities were invisible, hidden and neglected citizens.

This is the challenge for the government and disability movement organizations today and in the future. Some of the offers made by the government are through the program of five key objectives of employment development for persons with disabilities to anticipate future employment. First, creating new forms of work and working relationships that can integrate inclusion for persons with disabilities. Second, skills development and inclusive life-long learning for persons with disabilities. Third, universal design is a reference for infrastructure development, as well as product and service development. Fourth, assistive technology that is affordable and available. Fifth, real efforts to include persons with disabilities in economic activities.

8. Inclusive Health Services of Basic Health Facilities to Hospitals

Disability inclusive health services cover many things, one of which is quite crucial is the services provided by the government both through Basic Health Facilities and hospitals. In a survey conducted by Indonesia Corruption Watch (ICW) with four Disability-related organizations (APPEK Workshop NTT, PPRBM Solo, Central Java, BILiC West Java and PerDIK South Sulawesi) regarding inclusive health services in four provinces, presented interesting results. The research was conducted in 2019 in four cities, i.e., Makassar, Surakarta, Bandung and Kupang.

Citing the results of the collaborative research, persons with

disabilities can access information related to access to health facilities, in general. The majority of respondents with disabilities use Puskesmas (43%) and RSUD/hospitals (27.6%). However, they experience difficulties with transportation (12.4%), or poor road quality (7.9%), difficult-to-reach locations (6.6%), and no assistance to health facilities (19%). Persons with disabilities assess health facilities as good enough. It's just that they assess the existing health facilities are not sufficient to accommodate the special needs of persons with disabilities. Many facilities are non-existent. The number of persons with disabilities who assessed the following facilities were not available are: handrails (58.4%), wheelchairs (34.5%), computer serial number readers (50.9%), braille (90.1%), toilets for persons with disabilities (72.2%) and special counters/ lanes for persons with disabilities (85%).

In addition to health facilities that have not accommodated the needs of persons with disabilities, health workers are also considered unable to handle their needs. The majority (74.1%) said health workers could not provide it, and only 25.9% said they could. Due to the limitations and vulnerable position of persons with disabilities, they need assistance including health insurance. In addition, 71.6% of persons with disabilities said they have a JKN card and 28.4% do not have any. The majority of those who did not have a JKN insurance card answered because they did not know (34.3%), had never been recorded (25.7%) and no one took care of it (14.8%). Regarding the experience in using the insurance card, they generally confirmed they had no problems.

The survey also found poor data collection on persons with disabilities. As many as 81.7% of persons with disabilities said they had never been recorded by the local government and 95.4% said they had never been recorded by the central government. The survey results also show that persons with disabilities have less access to information. They do not know how to find out if there is assistance or budget related to disability. Persons with disabilities do not have sufficient access to information regarding assistance, either from local or central governments. A total of 91.9% of persons with disabilities do not know how to access procurement

information from local governments and 96.7% from the central government.

Research on health issues but with different focuses is also carried out by a number of research institutions. For instance, the research conducted by PROSPERA (2021) on 'Extra Health Costs of Persons with disabilities'. The results of the study explain that the variation in added costs that must be incurred by persons with disabilities is mostly caused by the 'disabled environment' or an environment that hinders mobility. There are still many unfriendly persons with disabilities environments (stigmatic, no access, low availability of adequate accommodation) so they have to pay more when they want to access public services, including health services.

Moreover, using the diffable life cycle approach, the vulnerability or the process of cultivating the disabled has occurred since childhood, and continues in adolescence, adulthood and even the elderly. SAPDA research has confirmed that the conditions and efforts to fulfil the right to health for persons with disabilities will be constrained by a number of things: starting from the perspective, accessibility, capacity of service providers, specific needs of persons with disabilities (aids, personal assistants, etc.) and so on.

Under these conditions, if we use a twin-track approach, the participation of persons with disabilities is an important issue to put forward. As a rights holder, the government also needs to pay attention to the fulfilment of a number of prerequisites, namely matters relating to indicators of structure, process and outcome. Building an inclusive Indonesia must be a shared responsibility and collaborative work must continue.

Currently, the government has prepared a roadmap for inclusive health services. This roadmap will serve as a reference for the government to fulfil disability rights in the health sector. The following are the categories in these aspects.

First, strengthening advocacy and coordination across programs and sectors for the implementation of policies and regulations on inclusive health services; then, districts/cities have disability-friendly regulations. Second, strengthening community

participation including persons with disabilities and cooperation with the health sector; District/City that has at least 1 Community-Based Rehabilitation (RBM). Third, increasing access to inclusive health services by paying attention to accessibility of Persons with disabilities. Districts/Cities have at least 50% of Disability Friendly Health Centers and 1 Rehabilitation. Fourth, strengthening the surveillance system and monitoring and evaluation of activities; Districts/Cities have Disability Recording and Reporting. Fifth, providing resources capable of serving Persons with disabilities; Districts/Cities have health workers trained in sensitivity and interaction with Disability.

In the future, in addition to having a reference to the UN-CRPD, Disability Law, RIPD, RAN or even provincial and district RAD, this roadmap can also be a reference or source of information for local governments in conducting monitoring and evaluation efforts.

9. Improving Infrastructure Towards Barrier-Free Persons with Disabilities

One of the biggest obstacles for persons with disabilities is inaccessible infrastructure and public facilities. Many persons with disabilities find it difficult to access houses of worship, classrooms in public schools, public service centers, and so on. The government has not yet implemented 'universal design' standards, i.e., design standards that are accommodative to all users. The implementation of Government Regulation number 42 of 2020 concerning the accessibility of public facilities and settlements, and protection in disaster situations, for persons with disabilities, as well as a number of previously existing regulations need to be accelerated in their implementation.

Understanding of various aspects of accessibility is still lacking and has not been fully included in the IMB (building permit) requirements. Therefore, many public facilities projects are not accessible. Even if the accessibility aspect has been included in the Detail Engineering Design (DED), the work is often inconsistent/not up to standard so it endangers users and wastes money. The involvement of persons with disabilities often does not come

from planning. Instead, they are immediately asked to test for accessibility only when infrastructure development is complete. Thus, the accessibility often does not meet the standards. In addition, the procurement of goods and services has not been consistent with accessibility standards under the law.

At the 2020 Inclusion Gathering, this issue was discussed. Some regions shared good initiatives related to inclusive infrastructure. In exploring the challenges or obstacles, the government is still having difficulty meeting the 'less obstacle' situation for persons with disabilities, namely the lack of public involvement in overcoming this problem. To that end, the idea of developing an inclusive participation is planned so that all interest groups such as women, children, the elderly, persons with disabilities, youth, road users, professional organizations, media and other interest groups, can contribute to the success of the program. Full community participation as a partner of the local government starting from the planning, implementation to monitoring and evaluation processes must be planned and implemented.

In addition, the government also needs to consult persons with disabilities in the formulation of policies in all stages of the project from planning, design and contracting to construction and completion by identifying the need for disability-friendly infrastructure. Other actors that are also important to consider contributing are professional organizations, such as designers and architects, urban infrastructure planners, and construction companies. The knowledge and understanding of these actors on Accessibility Facilities in Buildings and the Environment should be increased as an inseparable part of the competence requirement as an architect, and for other actors from the private sector involved with the implementation of infrastructure accessibility.

Another opportunity that is also important to pursue is the establishment and strengthening of multi-stakeholder forums. This effort simultaneously coordinates the parties who are connected to each other in building inclusive infrastructure. For example, the establishment of the Road Traffic and Transportation Forum (FLLAJ), according to the mandate of the CRPD and Law No.

8/2016 to identify cross-interest and cross-user issues. FLLAJ is a vehicle for coordination between agencies administering traffic and road transportation to address the security and safety needs of road users. This effort can be continued through increased multi-stakeholder commitment especially in the public works sector, public housing, transportation, as well as all infrastructure planning and environmental security alignment in supporting the provision of accessibility facilities towards the creation of barrier-free, safe and comfortable environment and in the application of universal design principles. The culmination is the establishment of collaborations for sustainability and sharing good practices in implementing inclusive infrastructure, both at the policy and practice levels.

Expanding participation and developing collaborative work can build new awareness about architectural design, infrastructure, and manufacturing that are accessible and do not hinder Persons with disabilities in enabling equal capacity. To be sure, we need to use communication, information, and education media to ensure accessibility and mobility for Persons with disabilities, by all sectors dealing with the area of accessibility. In the future, there will be a strong understanding regarding the intersectionality of one's identity, like taking into account the group age (children, adults, the elderly), gender (male, female and other identities), region (city and village), etc. This can be done by accommodating the accessibility needs of facilities and utilities to accommodate identity-related vulnerabilities, as well as ensuring security in accessing facilities, such as bright street lights to ensure the safety of women, children, parents and Persons with disabilities on the road.

The above agenda can be implemented if the government is serious about implementing the existing regulations regarding accessibility. One of the institutions under the control of the President is the Presidential Staff Office (KSP). The Presidential Decree No. 83 of 2019 concerning the Office of the Presidential Staff mandates the KSP to provide support to the President and Vice President in carrying out control of national priority programs, political communication, and management of strategic issues. One of the strategic issues that become the priority of the Presidential

Staff Office is the supervision of the protection and compliance of the Human Rights of persons with disabilities. The President firmly and clearly stated that the paradigm of the state for citizens with disabilities must shift from a charity-based paradigm to a human rights-based paradigm.

Formal legal references, or in the context of this book, structural references to build accessibility, are indeed in place. From the policy aspect, it is stated in the 1945 Constitution Article 28 H Paragraph 2 that 'Everyone has the right to get special facilities and treatment to get the same opportunities and benefits in order to achieve equality and justice. Then there is Law number 28 of 2002 concerning Buildings, Article 27 paragraph 2. Also, Law number 8 of 2016 Article 2 (letter h), Article 5 (paragraph 1 letter m), Article 18 (Accessibility and Adequate Accommodation). There is also Government Regulation number 70 of 2019 concerning Planning, Implementation, and Evaluation of the Respect, Protection and Compliance of the Rights of Persons with disabilities (RIPD Strategic Target number 2). There is also Government Regulation number 42 of 2020 concerning Accessibility to Settlements, Public Services and Disaster Protection for persons with disabilities. Lastly, which is quite popular, is the Minister of Public Works and Public Housing Regulation number 14 of 2017 concerning Requirements for Ease of Building. If connected to each other, these policies have the potential to change conditions from *disabling* to *enabling* ones.

10. New Normal Era and challenges for Persons with disabilities during the Covid-19 Pandemic

Persons with disabilities during the Covid-19 outbreak have been left behind. Information related to Covid and its handling is abundant, but it is not accessible for persons with disabilities. The principle of *no one leave behind* has been largely ignored.

This condition encouraged disability activists to immediately consolidate and demonstrate their existence in public spaces. In mid-March 2020, disability organizations from various parts of Indonesia communicated with each other and started conducting online meetings. The plan was laid out and at that time, we agreed

to conduct a rapid assessment of the impact of the pandemic for persons with disabilities.

In May and June 2020 an online/offline assessment was carried out and disability organizations in the area worked together to collect data. At that time, 1683 respondents were collected after the *probono* enumerators reach them. Various parties then supported the data management and analysis.

Regarding the availability and affordability of information on handling the Covid-19 pandemic, data shows that access to information for persons with disabilities has been minimal. As many as 59.40% of respondents with sensory disabilities stated that the available media had not been sufficiently accessible for them. Accessibility occurs if access for screen reader application users and sign language interpreters are available, as well as subtitle or close captions on the presentation of information related to Covid-19, directly or indirectly.

As for the impact on the activities and social participation of persons with disabilities, data shows that more than 80% of persons with disabilities have been affected. Of the 1,362 respondents (80.9%) experienced various difficulties during the pandemic, namely mobility difficulties (30.25%), difficulty getting a disability companion (19.97%), difficulty accessing therapy services (11.89%), working (6.75%), reduced income (4.19%), economic difficulties (3.82%), activities outside the home (3.30%), meeting basic needs (1.76%), finances (1.62 %), selling and attending school (1.62%), and various other difficulties 8.59%.

As many as 90% of respondents choose to worship at home and 10% of respondents with disabilities choose to worship in places of worship, like mosques or churches. There are those who choose to stop completely activities related to *Arisan* (50%); party (54%); neighborhood meetings (42%); hamlet meetings (48%); *dasa wisma* meetings (34%), and PKK (local women's association) meetings (43%); visiting the sick (40%) and mourning the dead (40%); community service (38%); while for shopping only 18.5% want to shop online and the majority (66%) still choose to shop at the market.

From the education aspect, out of 1683 respondents, only 128 students with disabilities responded to questions related to education. The majority of respondents study at home via online, namely the application of teaching materials and follow teaching materials online. A total of 37.50% use WhatsApp Groups as an online learning medium. A total of 16.41% study independently/ with family due to limited internet access. Meanwhile, 3.13% did not do learning activities at home and 4.69% studied outside these methods.

Respondents in rural areas (47.6%) were learning independently with parents, because of the low level of digital literacy of students with disabilities and their teachers in rural areas. On the other hand, in urban and semi-urban areas, respondents with disabilities are more ready to use learning applications and online learning methods.

The online learning options are not accessible for most persons with disabilities. There are 67.97% of persons with disabilities stated that they had difficulty participating in learning using applications or online learning methods. Only 20.31% stated that the online learning system was easy to access and follow. Respondents with intellectual disabilities had the lowest level of accessibility to online learning and digital learning applications. They prefer to learn independently or not engage in learning at all.

Some of the reasons that make online learning system difficult are: not used to it so that it needs adaptation, the situation at home is not supportive, signal difficulties, difficulty in getting costs for data packages, learning systems that are not accessible, and there is no companion at home because parents are working.

As for the economic impact, research shows a decrease in income of 50-80%, especially for those who work in the informal sector, which is 86% of respondents. In fact, the data on the income decline became even more severe during the large-scale social restrictions (PSBB). Many persons with disabilities have lost their jobs and the economy of disabled families is deteriorating; the proportion of women with disabilities who are no longer working is higher than men and economic resilience has decreased drastically

where many persons with disabilities have no savings. At that time, the reach of the Social Safety Net and its influence had not yet spread among persons with disabilities.

We recommend that the central and local governments involve persons with disabilities in the response and recovery of COVID-19. Addressed to all policy makers and stakeholders, persons with disabilities and their representative organizations must be involved in every stage from planning, implementation, monitoring and evaluation. This is regulated in the Convention on the Protection of the Rights of Persons with Disabilities, Law no. 8 of 2016 on Persons with Disabilities, Government Regulation no. 70 of 2019, Head of BNPB Regulation no. 14 of 2014 and Head of BNPB Regulation no. 14 of 2014.

There are specific recommendations in the field of information, education and information and education support systems for Covid-19, as well as protocols and programs that are accessible to various media, involvement up to the village level, and collaboration with DPOs. Besides, the availability of a contact center for handling Covid-19 that is accessible, it is recommended reaching out to the village level and families of persons with disabilities, education by health service providers regarding co-morbidities and their vulnerabilities, and facilitation of the formation of peer group. Public service providers are encouraged to prioritize the disabled in accessing services such as special opening hours, special queues and so on.

During a pandemic, the expansion of social safety nets and inclusive economic recovery need to be developed and ensured to reach vulnerable families of persons with disabilities. For this reason, the government must include an element of disability as a criterion. Then it is necessary to extend and facilitate credit relaxation and the expansion of electricity subsidies. Meanwhile, in terms of increasing resilience and economic recovery, the government needs to prepare a new economic activity scenario during the 'new normal': an inclusive economic ecosystem

Capacity building in the informal sector and education for students with disabilities during the Pandemic and the New Normal needs attention. We recommend to the Ministry of Education and Culture and the education service providers, including in the religious-based education environment, to prepare learning guides that remain accessible during the pandemic and new normal, which are provided in various formats. Besides, innovate learning methods and media that are easily accepted for persons with disabilities according to their various abilities. To facilitate these innovative efforts, we recommend that ministries, education offices and other relevant parties cooperate with persons with disabilities organizations in developing and disseminating accessible learning platforms[].

CHAPTER III

INDICATORS FOR DISABILITY RIGHTS COMPLIANCE

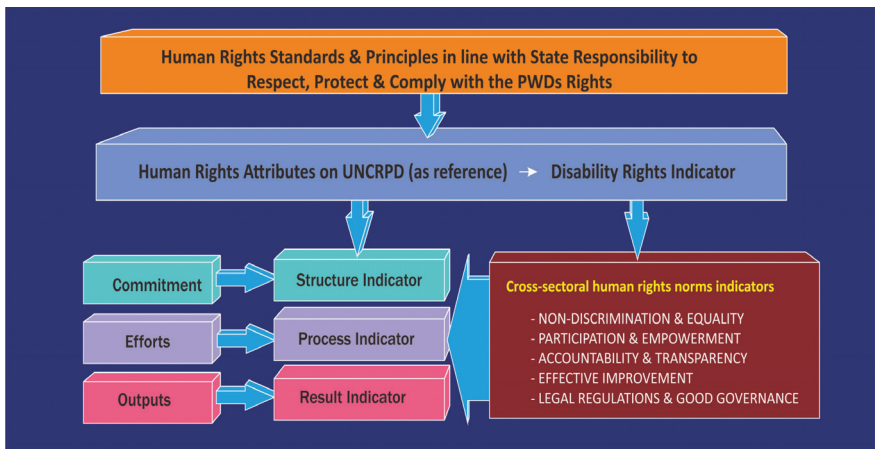
A. Definition and Concept

Human rights indicators are generally defined as specific information about the state or condition of an object, event, activity or result that can be linked to human rights norms and standards; which discusses and reflects human rights principles and concerns; and which can be used to assess and monitor the compliance, promotion and protection of human rights (OHCHR, Human Rights Indicators, p. 16).

The use of human rights indicators in this guideline is unique compared to the approach to performance indicators in government or development programs. As emphasized by OHCHR, compliance indicators in the context of the human rights compliance are explicitly based on human rights standards. This kind of indicator aims to determine the extent to which government obligations are progressively carried out and result in increased fulfilment of human rights. In contrast to performance indicators which are intended to assess program performance in achieving targeted results, human rights indicators are designed to collect information that can be analyzed to show the extent to which efforts to uphold and fulfil human rights have been carried out, to what extent existing policies are in line with human rights norm, and how the condition of human rights is felt by citizens.

Although they are different from human rights indicators, it does not mean that performance indicators cannot be used. In certain contexts, where programs have been designed to advance the realization of Human Rights, or contribute to the implementation of certain Human Rights obligations such as expanding free basic education programs, performance indicators specifically created to measure programs will also assist in assessing the program's compliance with human rights standards (OHCHR, Human Rights Indicators, p. 20). Likewise in the aspect of the Rights of Persons with Disabilities which are part of Human Rights.

Referring to the Human Rights indicator framework, the indicators for the Rights of Persons with Disabilities are developed by referring to three types of indicators, i.e., structure indicators, process indicators, and outcome indicators. The three types of indicators form a single unit, each of which looks at three different aspects of efforts to respect, comply and promote the Rights of Persons with disabilities.



B. Structure Indicator

After Indonesia ratifies the CRPD, the main obligation of the state is to build the basis for legislation and policy mechanisms that are in accordance with CRPD norms to be implemented. Among these efforts are:

Establishment of the main regulations needed to implement the norms for complying with the Rights of Persons with disabilities as stated in the CRPD. Harmonization and synchronization of regulations that have been issued prior to the ratification of the CRPD so they are in line

with the norms for the Rights of Persons with Disabilities compliance. Besides, systematically ensuring that after the ratification of the CRPD, any laws and other legal products issued afterward are in conformity with CRPD norms.

The structure indicators are designed to collect information and analyze the conformity of regulatory norms, both directly and indirectly related to the Rights of Persons with Disabilities, to the norms regulated in the CRPD. The following are examples of structure indicators taken from article 24 of the CRPD - the right to education:

> "The firmness of norms in legislation related to education and its derivative regulations regarding the prohibition of discrimination on the basis of disability in educational institutions, as well as support and acceptance for Persons with disabilities to study in every type, path and level of education."

To allow the above indicators to be measured, the data source needed is the regulatory text that controls the implementation of education at the national to regional levels. The regulation is analyzed for conformity of the norm to Article 24 of the CRPD. Quantitatively, analysis of data and information related to this indicator will describe the number of regulations that still do not have compliance with article 24 of the CRPD. As for qualitatively, the analysis of this article will provide an overview of the gap or incompatibility of existing regulatory norms.

C. Process Indicator

Process indicators are used to document and analyze the steps taken by stakeholders in transforming their commitment to complying with the Rights of Persons with Disabilities to achieve the enjoyment of rights. In contrast to structure indicators, process indicators consist of indicators that are determined to conduct an assessment of the policies that have been determined, as well as the actions that have been taken to implement these policies.

Implicitly, process indicators can be interpreted as intermediate indicators, which see the relationship between the commitments that have been confirmed and the results achieved. By monitoring the process of fulfiling rights, this will strengthen state accountability

in showing progress and improvement in fulfiling the rights to the commitments that have been set.

Indicators that are generally used to monitor processes include the following:

- Availability of budget allocations and their proportions,
- Program coverage on public services and targeted community groups,
- Number of complaints received and their resolutions.

The following are examples of process indicators taken from article 24 of the CRPD - the right to education:

- Availability of programs to increase the number of schools providing inclusive education as well as technical support provided to schools,
- The proportion of the budget to support the implementation of inclusive education in the education budget,
- Number of complaints related to discrimination in education and its resolution.

To measure process indicators, data sources that can be used include program documents of relevant ministries/agencies, planning and budget documents, as well as annual reports, as well as monitoring results from the Human Rights Action Plan, Disability Action Plan, both at national and regional levels. Qualitatively, monitoring and analysis of process indicators will provide exposure to qualitative information regarding the efforts being carried out in achieving better results of complying with the Rights of Persons with Disabilities. Quantitatively, this analysis will present the proportion of resource allocation, as well as other quantitative information that describes the process and efforts to comply with the Rights of Persons with Disabilities that are being carried out in the implementation of programs and policies as a whole.

D. Outcome Indicator

The outcome indicators collect information on the enjoyment of the rights of persons with disabilities, both individually and collectively, which reflect the development and progress of efforts to fulfil rights. The outcome is a consolidation of the impact of a number of contributing process indicators. If in process indicators, many things can be measured and documented, this is not the case for outcome indicators which

measure changes at the individual and community level of persons with disabilities collectively. Therefore, these outcome indicators are also known as slow moving indicators.

To establish outcome indicators, it is necessary to understand the basic features that distinguish it from process indicators. Process indicators focus on:

1. Resources allocated to run a particular process,
2. Direct output of the running process.

For example, the proportion of the budget for improving the quality and number of inclusive schools contributes to the addition of inclusive schools nationally to x schools. The proportion of the budget provided is the input allocated to run the process, while the addition of the number of inclusive schools is the output of the ongoing process. Both the budget proportion and the number of inclusive schools in this example are process indicators, because they are actually still in a series of ongoing processes. The measure of change that can be included in the outcome indicator is "percentage of children with disabilities attending school compared to children as a whole".

As described above, the three types of indicators (structure, process and outcome) are simultaneously used to measure each disability rights norm. Because the fulfilment of rights begins from commitments, the implementation process and outcomes are measured based on their achievements. The use of the three indicators above is seen as a way of measuring that will be able to describe the objective situation and provide stronger recommendations on monitoring results.

E. Indicators of Fulfilment of the Rights of Persons with disabilities (Table)

The following is a list of articles in the UN-CRPD

1. General obligations of the state (articles 1 - 4),
2. Equality and non-discrimination (article 5),
3. Women with disabilities (article 6),
4. Children with disabilities (article 7),
5. Awareness-raising (article 8),
6. Accessibility (article 9),
7. Right to life (article 10),

8. Situations of risk and humanitarian emergencies (article 11),
9. Recognition of equality before the law (article 12),
10. Access to justice (Article 13),
11. Liberty and security of persons (article 14),
12. Freedom of torture or cruel, inhuman or degrading treatment or punishment (article 15),
13. Freedom from exploitation, violence and abuse (article 16),
14. Protecting the integrity of the person (article 17)
15. Liberty of movement and nationality (article 18)
16. Living independently and being included in the community (article 19)
17. Personal mobility (article 20)
18. Freedom of expression and opinion, and access to information (article 21)
19. Respect for privacy (article 22)
20. Respect for home and the family (article 23)
21. Education (article 24)
22. Health (article 25)
23. Habilitation and rehabilitation (article 26)
24. Work and employment (article 27)
25. Adequate standard of living and social protection (article 28)
26. Participation in political and public life (article 29)
27. Participation in cultural life, recreation, leisure and sport (article 30)
28. Statistics and data collection (article 31)
29. International cooperation (article 32)
30. National implementation and monitoring (article 33)
31. Committee on the Rights of Persons with Disabilities (article 34)
32. Reports by States Parties (article 35)

Articles 1 - 4: General Obligations		
Structure indicator	**Process Indicator**	**Outcome indicator**
• Harmonization and synchronization that mainstream disability issues into laws and regulations, at the national and regional levels, based on Law No. 8 of 2016 and Law No. 19 of 2011.	• There are guidelines or action plans by Ministries/Agencies, as well as local governments and regional apparatus organizations, in ensuring the disability inclusion, as well as continuous implementation and monitoring efforts. • There are guidelines for mainstreaming disability issues in laws and regulations as well as progressive efforts in synchronizing policies at every level. • There is an allocation of resources and budgets for mainstreaming disability in policies and programs, including the availability of a disability-inclusive budget nomenclature as outlined in a disability-inclusive budgeting statement.	• Data related to laws and regulations that are in line with Law No. 19 of 2011 and Law No. 8 of 2016. • Data on the use of disability nomenclature in laws and regulations. • Data on the use of disability budgeting nomenclature in regulatory documents in government and local government programs.
Sources and Methods of Information Collection		
Review of policies to analyze the suitability of existing laws and regulations with the law that regulates the principle of the rights of Persons with disabilities compliance.	• Review of action plan and program documents, • Review and verify budgeting documents and disability inclusive budgeting statements,	• Review of policy data from KEMKUMHAM and other relevant agencies, • Interviews with relevant stakeholders,

Structure indicator	Process Indicator	Outcome indicator
	• Review guide document for policy formulation and the preparation process, • Interviews with related parties.	• Existing studies and research.

Article 5 Equality and Non-Discrimination		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of special legislation (lex specialist) that guarantees protection from discrimination on the basis of disability • The existence of regulations for the establishment of an independent institution, which functions to receive and follow up on complaints regarding discriminatory acts against Persons with disabilities.	• The establishment of an independent complaint and handling agency for discrimination on the basis of disability with a central to regional reach, • The existence of a mechanism for complaints and handling cases of discrimination on the basis of disability that is accessible, transparent, accountable and effective that is socialized nationally, • The existence of support for resources, authority, and budgeting and cooperation with state and government institutions for independent institutions that are responsible for providing protection against acts of discrimination on the basis of disability.	• Data on the number of cases of discrimination on the basis of disability, • Information on the perception of persons with disabilities on protection from acts of discrimination on the basis of disability, • Data on the number of reported cases of discrimination on the basis of disability and their resolution and outcomes.
Sources and Methods of Information Collection		

Structure indicator	Process Indicator	Outcome indicator
Review and analysis of the contents of the relevant laws and regulations.	• Interviews with relevant stakeholders such as KND, KEMSOS, KEMKUMHAM, KOMNASHAM and other appropriate institutions, • Review administrative documents and programs of institutions that have the task of supervising and receiving complaints.	• Media reporting tracking analysis, • Perception survey of Persons with disabilities, • Administrative data from institutions that carry out oversight of human rights and public services.

Article 6 Women with Disabilities		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations that ensure the mainstreaming of women with disabilities, both in general policies, policies related to women, and policies related to disability, • The existence of a regulation that guarantees full protection for women with disabilities, and does not cause a reduction in women's rights on the basis of disability, • The existence of regulations that ensure protection of the vulnerabilities	• The existence of mainstreaming of women with disabilities in SOPs, programs, and focal points aimed at mainstreaming gender in government programs and public services, • The existence of affirmative efforts in providing proportional protection for the vulnerabilities experienced by women with disabilities such as gender and disability-based violence and exploitation, including in the judicial process, • The existence of planning at the village to national level that includes the aspects and interests of women with disabilities,	• The existence of statistical data that describes the level of education and economic status of women with various types of disabilities, • The existence of statistical data describing the representation of women with disabilities in public office, • The existence of statistical data describing the emergence of cases of violence against women and girls with disabilities and their solutions,

Structure indicator	Process Indicator	Outcome indicator
experienced by women with disabilities, including its relation to protection against gender-based violence against women with disabilities.	• The existence of a support system for women and girls with disabilities including affordable counseling and mentoring in their communities aimed at ensuring the protection and enjoyment of rights for women and girls with disabilities.	• Perceptions of women and girls with disabilities regarding equality compared to non-disabled women.
Sources and Methods of Information Collection		
Analysis of regulations related to women, gender, and disability.	• Review of program and budgeting documents to the government, especially those responsible for the protection of women's rights (KPPPA), • Review of SOP on public service providers, related to women, • Interviews with parties related to the implementation of protection for women. • Review the number and contents of policies that are gender responsive and support women's empowerment in the context of women with disabilities (indicator 5.1.1 SDGs metadata)	• Review of SDGs metadata indicators 5.2.2 A and B for groups of women and girls with disabilities, • Perception survey of women with disabilities regarding the protection of women with disabilities, • Review of service provider administrative data on women, focusing on women and girls with disabilities, • Review the gross participation rate of women with disabilities at the secondary education level (SDGs indicator 5.3.1 C). • Media tracking regarding cases of violence against women with disabilities and their solutions,

Article 7 Children with Disabilities		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of a consistent policy in defending the interests of children with disabilities on an equal basis with other children. • Strict regulations regarding the protection of the best interests of children with disabilities; and participation and involvement of children with disabilities and their organizations in decision-making.	• The existence of technical regulations regarding the protection of the rights of children with disabilities, including law enforcement agencies and implementing court decisions, • The existence of an institution that is responsible for providing protection for children with disabilities whose rights are not fulfilled or threatened in situations such as not being in parental care, • The existence of community-based rehabilitation services in providing rehabilitation services for children with disabilities to minimize segregation patterns. • The existence of mechanisms to support the participation of children with disabilities in decision making.	• Availability of disaggregated data regarding children with disabilities, including age, type of disability, education level, need for support services and assistive devices, • Data on the level of participation of children with disabilities in decision-making forums at the village to district level, • Figures on children with disabilities accessing services for children, • Data on cases of violence that occur in children with disabilities, as well as their handling.
Sources and Methods of Information Collection		
Review of policies related to child protection both at the national and regional levels in the context of protection for children with disabilities.	• Review of SOPs and technical regulations regarding child protection and participation, • Interviews with related parties, national and regional levels,. • Review of administrative data on service delivery for children,	• Service provider administration data, • Perception survey of children with disabilities.

Structure indicator	Process Indicator	Outcome indicator
	• Observations on service providers regarding children with disabilities	

Article 8 Awareness-Raising		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations that mandate government institutions (national and regional), as well as institutions that play a role in educating the public to make efforts to increase awareness about disability.	• The existence of awareness-raising programs regarding disability in government institutions, regional apparatus organizations, and institutions that are responsible for conducting public education and the effectiveness of its implementation, • The existence of contents about disability in capacity building trainings for state apparatus which is verified through the number of civil servants who receive training every year, • The existence of guidelines for the media in reporting on disability issues, as well as for institutions in charge of supervising media coverage in ensuring reporting perspectives that increase awareness of disability equality.	• Data on the availability of trained staff related to disability and the provision of appropriate services for persons with disabilities in each service provider, • Data on the frequency of news coverage and its content in the media regarding disability, • Data on public perception on persons with disabilities.

Structure indicator	Process Indicator	Outcome indicator
Sources and Methods of Information Collection		
Regulatory reviews.	• Review of government programs related to efforts to increase awareness of disability and their implementation, • Interviews with appropriate parties such as KEMKOMINFO, Press Council, KPI, and so on.	• Staffing and service provider administrative data, • Media tracking, • Survey of public and Persons with disabilities perception.

Article 9 Accessibility		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of strict and consistent laws and regulations related to the obligation to provide physical and non-physical accessibility, guidelines for the accessibility of public facilities, institutions that are tasked and mandated to carry out supervision, as well as the allocation of budgeting and other resources to ensure the implementation of physical and non-physical accessibility. -physical for all public facilities, whether managed by the government or non-government.	• The existence of accessibility guidelines that are socialized and binding on implementers, providers, and supervisors of buildings and public facilities. • The existence of a building permit (IMB) procedure that requires accessibility to public buildings along with effective supervision, • The existence of a supervisory agency that consistently conducts monitoring along with monitoring data that periodically reports the number of buildings/facilities that have met the accessibility standards. • Availability of budget allocations that can be shown in the percentage allocated for the provision of accessibility, both for the renovation of physical facilities, as well as for new construction.	• Availability of data that periodically conveys the progress of the implementation of accessibility in buildings and public facilities. • Number or Percentage of SKPD (local government agencies) in local government/ municipal governments that have received and implemented the technical guidelines for accessible public services for persons with disabilities • Number/ percentage of transportation modes that are accessible for passengers with disabilities

Structure indicator	Process Indicator	Outcome indicator
	• Availability of budget allocations for advancing the design and distribution of the latest communication information technology and systems that make it easier for persons with disabilities to access information and communication (budget nomenclature for accessibility) • Prototype of accessible public facilities (for the case of cultural heritage buildings) • Accessibility training for accessibility service providers in public service institutions. • Number of Regions (Districts/Cities/Provinces that declare themselves as inclusive regions along with a plan framework to create an accessible environment.	• Data on perceptions and assessments of persons with disabilities on the implementation of accessibility in public spaces. • Data on the participation and contribution of persons with disabilities and/or their organizations in the monitoring system for the accessibility of public services
Sources and Methods of Information Collection		
• Review of regulations related to accessibility and derivative regulations. Specifically related to access to public facilities, comfort, services, buildings, public transportation, education, employment, information, communication, technology, cultural life, recreation, entertainment, and sports.	• Review of government programs and budgets (national and local) related to infrastructure, • Review of government reports related to the implementation of the 'Barriers-Free Environment' strategy in the RIPD and Disability RAN, • Interviews with parties responsible for infrastructure implementation and monitoring.	• Review of administrative data on Ministries/ Institutions responsible for infrastructure implementation and supervision of local government performance, • Perception survey of Persons with disabilities regarding accessibility.

Article 10 Right to Life		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of rules and legislation that guarantees the right to life and prohibits the deprivation of the right to life on the basis of disability for everyone • Review of regulations related to guarantees of the right to life and the prohibition of deprivation of the right to life on the basis of disability for everyone	• The existence of a code of ethics for doctors and other medical staff regarding the delivery of objective information about the possibility of a fetus that will experience a disability, as well as protection for independent decision-making to keep the life of a fetus detected as having a disability. • Existence of disability early detection programs and mechanisms as well as explanations to parents about possible disabilities experienced by the fetus, • Existence of efforts to prevent premature death, including mental and intellectual disabilities (abortion cases, prescription drugs have a negative impact on mental of persons with disabilities). • Availability of national, regional and village budgets to guarantee the right to life	• Number of complaints by persons with disabilities against violations of the right to life. • Number of cases of persons with disabilities who were sentenced to death • Cases of persons with disabilities who died by non-state actors and were not prosecuted • Review of data on complaints from persons with disabilities against violations of the right to life or subject to the death penalty. • Review data on cases of persons with intellectual disabilities (cases that died by non-state actors and were not prosecuted)
Sources and Methods of Information Collection		
	• Review of the implementation of the delivery of objective information on pre- and post-natal disability • Review of premature death prevention	

Structure indicator	Process Indicator	Outcome indicator
	programs, including mental and intellectual disabilities (abortion cases, prescription drugs adversely affect mental of persons with disabilities). • Review of national, regional and village budgets to guarantee the right to life	

Article 11 Situations of risk and humanitarian emergencies		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence and firmness of regulations regarding the protection of Persons with disabilities in situations of risk and humanitarian emergencies, as well as post-disaster recovery and restoration efforts that mainstream accessibility and interests, and prioritize the participation of Persons with disabilities	• Availability of SOPs, technical regulations, or guidelines related to the protection of persons with disabilities in risky situations and humanitarian emergencies. • Proportion of budget sensitive to adaptation and appropriate accommodation for persons with disabilities in humanitarian disaster and emergency programs. • The existence of an institution with the authority and function to supervise the implementation of disaster management programs and humanitarian emergencies that prioritizes protection for persons with disabilities. • Availability of hazard maps/disability data with various disabilities in disaster-prone areas (identification of	• The level of ease of obtaining information for persons with disabilities, including those with sensory and communication barriers, about disaster and disaster risk reduction, as well as assistance that can be obtained in an emergency. • Perceptions of persons with disabilities regarding the accessibility of basic needs and rights for persons with disabilities in disaster and humanitarian emergency response situations.

Structure indicator	Process Indicator	Outcome indicator
	disability needs), which includes hidden disabilities • The existence of a program to strengthen the capacity of local government officials from the lowest level (BPBD, Tagana). • The existence of disaster risk reduction efforts that are actively carried out by reaching out to Persons with disabilities. • The existence of SOPs for special handling of persons with disabilities who are confined such as in institutions, mental hospitals, homes, or shackles in order to get priority for rescue/evacuation • Availability of disaster information and an accessible early warning system for various disabilities (sound, light, text-based).	• Percentage of persons with disabilities who died compared to non-disabled victims. • Proportion of involvement of persons with disabilities (from all types of disabilities) in disaster risk prevention/ reduction programs, humanitarian emergency programs, and post-disaster rehabilitation and/ or humanitarian emergency situations.
Sources and Methods of Information Collection		
• Review of disaster policies and humanitarian risks, such as Law No. 24 of 2007 on Disaster Management • Review of Government Regulation Number 21 of 2008 concerning the implementation of disaster management	• Review of SOP documents/technical rules/guidelines for protection or disaster risk reduction for persons with disabilities in risky situations and humanitarian emergencies (including institutional-based: nursing homes, etc.).	• Interview Perceptions of persons with disabilities regarding the accessibility of basic needs and rights for persons with disabilities in disaster and humanitarian emergency response situations.

Structure indicator	Process Indicator	Outcome indicator
	• Review of the budget for humanitarian disaster and emergency programs with a disability perspective. • Interviews with stakeholders regarding the capacity of the apparatus and the availability of access early warning systems.	• Interviews/ FGDs with Disabled Persons Organizations (DPOs) regarding disasters and the involvement of DPOs in disaster risk prevention or reduction programs, humanitarian emergencies, and post-disaster rehabilitation and/ or humanitarian emergency situations.

Article 12 Equal Recognition before the Law		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence and firmness of regulations that guarantee equality of persons with disabilities before the law, including the recognition of skills as legal subjects, as well as a support system for making decisions on behalf of themselves and their own interests.	• The existence of a support mechanism for persons with disabilities in making decisions independently by taking into account the full legal capacity of persons with disabilities. • The existence of continuous training on disability perspectives and legal capacity of persons with disabilities among law enforcement agencies and advocate organizations. • The existence of an institution that is responsible for receiving complaints and	• Number and quality of response and handling of law enforcement agencies in ensuring the legal capacity of persons with disabilities for reports/complaints submitted by persons with disabilities and/or their families. • The number of cases of persons with disabilities being deprived of their legal skills without a fair process.

Structure indicator	Process Indicator	Outcome indicator
	providing support and assistance for persons with disabilities in making independent decisions.	• Number of cases of denial and discrimination on the basis of disability in financial or economic services. • Number of cases of persons with disabilities who were given action without consent (forced installation of contraceptives, medical treatment or institutionalization in institution, shackles, deprivation of liberty, treatment without consent and so on).
Sources and Methods of Information Collection		
• Review of regulations that ensure equality of persons with disabilities before the law and legal aid services. • Review policies related to the principle of equality and the right to own or inherit property, finance, bank loans, housing loans and other forms of financial credit.	• Review of judicial mechanisms in all Law Enforcement Agencies (APH). • Review of education/ training system and curriculum with a disability perspective for APH as well as LBH and OBH (legal aid). • Interview with APH and LBH and OBH regarding the treatment of persons with disabilities during the judicial process.	• Review of report documents on the response and handling of persons with disabilities in conflict with the law by APH • Review data on cases of Persons with disabilities that are detrimental to disability (deprivation of skills, coercion, denial, and discrimination in legal services) • Interviews with victims, OBH/LBH

Structure indicator	Process Indicator	Outcome indicator
		and OPDs as well as rehabilitation center managers.

Article 13 Access to Justice		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence and firmness of regulations that guarantee access for persons with disabilities to justice through the provision of facilities and services that accommodate the access and needs of persons with disabilities, the provision of legal aid and assistance for persons with disabilities, as well as an assessment of needs as a basis for establishing friendly and accessible judicial procedures for persons with disabilities.	• Availability of operational standards and procedures at law enforcement agencies to ensure the provision of adequate accommodation for persons with disabilities in accessing legal services. • Availability of accessibility and proper accommodation for law enforcement agencies, as well as proportional budget allocation for law enforcement agencies to provide accessible physical facilities and information. • Availability of needs assessment with support and referral of multidisciplinary experts for the purpose of determining appropriate accommodation for persons with disabilities who are in conflict with the law throughout the judicial process.	• Data on the number of law enforcement agencies that have met accessibility standards and inclusive judicial services, • Data on the number of persons with disabilities who access judicial services based on the type of disability, cases experienced, as well as decisions and their implementation, • Data on the provision of legal aid for persons with disabilities as well as the distribution of available legal aid services, • Perceptions of persons with disabilities on the provision of access and judicial services for persons with disabilities.

Structure indicator	Process Indicator	Outcome indicator
	• The existence of officers in every law enforcement agency who has the capacity to handle and assist persons with disabilities in dealing with the law. • The existence of standardization of the implementation of legal assistance for persons with disabilities by advocate organizations and in collaboration with DPOs. • Availability of disability paralegals and socialization regarding the availability of access and legal assistance, through accessible and easily accessible information facilities for persons with disabilities.	
Sources and Methods of Information Collection		
• Policy review of Government Regulation No. 39 of 2020 concerning Adequate Accommodation for Persons with disabilities in Judicial Processes and other regulations related to equality before the law (recognition of skills). • Review of regional/ governor/district/ city head regulation regarding inclusive treatment for Persons with disabilities in accessing legal aid.	• Review of SOPs for providing adequate accommodation for Persons with disabilities in accessing judicial/legal services; • Accessibility assessment of design and services and budget analysis. • Interview with APH and OBH related to legal assistance/support and social assistance for Persons with disabilities.	• Review of disability data accessing legal and judicial services; • Interview of APH and related agencies and OBH/ LBH that provide legal aid services for persons with disabilities. • Interview of victims with disabilities/ DPOs.

Article 14 Liberty and Security of Person		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of legal guarantees that protect persons with disabilities from deprivation of freedom without legal process, including shackles, confinement, institutionalization (entered into institutions or mental hospitals).	• The existence of systematic efforts by the state in reducing/ eliminating shackles, institutionalization and other forms of restraint on the basis of disability, especially those that often occur in people with psychosocial disabilities. • The establishment of a systematic and measurable complaint mechanism and handling (follow-up) on cases of deprivation of liberty on the basis of disability. • The existence of a rehabilitation and resocialization mechanism after a period of imprisonment or rehabilitation in institutions and other institutionalizations. Resocialization is an effort to restore social function and regain the role of ODGJ (people with mental illness) in society so they can return to being independent, creative, and productive individuals. • The existence of standardization in the management of rehabilitation homes and other forms of institutionalization to minimize restraint	• Data related to the forcible deprivation of liberty on the basis of disability, as well as the forms of settlement carried out by the state.

Structure indicator	Process Indicator	Outcome indicator
	and deprivation of the freedom of Persons with disabilities, as well as effective monitoring of their implementation.	
Sources and Methods of Information Collection		
• Review regulations on the protection of deprivation of liberty without due process, including regulations prohibiting shackles, confinement, and institutionalization; rehabilitation homes, especially for persons with psychosocial/mental disabilities • Review of policies related to economic security: employment, business opportunities, financial independence, financial support for the unemployed, and housing. • Review of Government Regulation No. 3 of 2001 on Aviation Security and Safety	• Review programs for handling shackles and institutionalization as well as restraints for people with psychosocial disabilities. • Review the complaint mechanism and handling cases of deprivation of liberty on the basis of disability. • Review the mechanism and standardization of social rehabilitation after a period of imprisonment or rehabilitation in institutions and other institutionalizations. • Interviews with managers of handling forms of coercion against Persons with disabilities. • Interview about flight security and safety SOPs for persons with disabilities	• Review of data on deprivation of disability rights • Interview of victims of deprivation of disability rights.

Article 15 Freedom of torture or cruel, inhuman or degrading treatment or punishment		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of laws and regulations that guarantee the freedom of Persons with disabilities from torture and cruel treatment or punishment as well as mechanisms for their protection.	• There is a minimum standard SOP for services that are humane, non-degrading, and prevent torture of persons with disabilities, especially in decision-implementing institutions, prisons, rehabilitation homes, and other rehabilitation institutions. • There is an increase in the capacity of law enforcement in preventing torture or inhumane treatment of Persons with disabilities. • The existence of internal institutional procedures to ensure that persons with disabilities are not deprived of their freedom and the prevention of torture and other painful acts. • There is a mechanism for complaints, handling, including temporary protection (safe houses) for victims who complain of acts of torture and cruel treatment or punishment. • There is a public education program not to do stigma, stereotyping, bullying, or other actions that demean the human dignity of persons with disabilities	• Data related to the number and details of cases of acts of torture and cruel acts against persons with disabilities. • Persons with disabilities satisfaction with handling of reported cases • Availability of safe houses for persons with disabilities who become victims and/or file their cases

Sources and Methods of Information Collection		
• Review of regulations on guaranteeing the freedom of persons with disabilities from torture/ cruel treatment/ punishment and their protection mechanisms.	• Review of MSMs (Minimum Service Standards) SOPs that are humane, not demeaning, and prevent the occurrence of torture for Persons with disabilities, especially in decision-implementing institutions, prisons, rehabilitation homes, and other rehabilitation institutions. • Interviews related to the legal apparatus capacity building process in preventing torture, etc. and the implementation of procedures for handling Persons with disabilities. • Review the implementation of the complaint mechanism, handling, and protection of victims with disabilities. • Review of socialization and public education for legal awareness and protection for Persons with disabilities	• Review Data on the number and details of cases of acts of torture and cruel acts against Persons with disabilities. • Interviews on perceptions of persons with disabilities satisfaction levels towards handling cases • Interviews on the effectiveness and efficiency of the shelter program

Article 16 Freedom from Exploitation, Violence and Abuse		
Structure indicator	**Process Indicator**	**Outcome indicator**
The existence and consistency of laws and regulations and their derivatives to ensure protection for persons with disabilities, especially women and children, from various	• The existence of systematic efforts made to prevent acts of exploitation, violence and abuse against Persons with disabilities, which are gender and child sensitive, both in	• Disaggregated data related to cases of exploitation, violence and abuse against persons with disabilities, based on gender,

Structure indicator	Process Indicator	Outcome indicator
forms of violence, exploitation, and abuse, both inside and outside the household.	the public and private sectors, in the form of education, campaigns, and training for relevant officers. • The existence of early identification of exploitation, violence and abuse against Persons with disabilities, dissemination of knowledge through accessible information to identify forms of violence, exploitation and abuse, as well as the availability of needed support and defense services. • The existence of efforts to convey information that is easily accessible and easily understood by various persons with disabilities related to complaints and protection efforts that can be carried out for acts of violence, exploitation and abuse experienced by Persons with disabilities. • The existence of capacity building that guarantees the protection and prevention of violence and exploitation for persons with disabilities based on community/ community to apparatus and organizations at the village level, including the resolution of cases that favor the victims	type of disability and age. • Data on the resolution of cases of violence, exploitation and abuse of Persons with disabilities by the state • Number of reported cases related to sexual harassment and violence against persons with disabilities

Structure indicator	Process Indicator	Outcome indicator
	• The existence of SOPs and guidelines for preventing violence and sexual harassment of persons with disabilities in places of disability services (such as special schools, nursing homes).	
Sources and Methods of Information Collection		
Review of policies related to protection for persons with disabilities (especially women and children) from various forms of violence, exploitation and abuse.	• Review of programs to prevent exploitation, violence and abuse against persons with disabilities • Review/interview of the apparatus capacity building program and the provision of support and advocacy services for persons with disabilities. • Review/interview of information and complaint service mechanisms and protection of persons with disabilities • Review of the performance of case settlement in favor of the victim • Review of SOPs and guidelines for preventing violence and sexual harassment of persons with disabilities in places of disability service	• Disaggregated data related to cases of exploitation, violence and abuse against persons with disabilities, based on gender, type of disability and age. • Review of data on the settlement of cases of violence, exploitation and abuse against persons with disabilities by the state • Review the number of reported cases related to sexual harassment and violence against persons with disabilities

Article 17 Protecting the Integrity of the Person		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of statutory guarantees and their derivatives for the protection of the physical and mental integrity of persons with disabilities on an equal basis with other people, especially for medical treatment, and other actions that are carried out without the knowledge and consent of persons with disabilities, and violate their physical integrity, including forced institutionalization, and abortion and forced sterilization in the case of women with disabilities.	• The existence of a shackle-free program and a more humane follow-up for handling disability. • The existence of SOPs at service provider institutions managed by the state or private sector regarding the implementation of information delivery and requests for consent of persons with disabilities before conducting research, trials or medical actions or certain actions that violate the integrity of persons with disabilities. • Capacity building for state and private social service officials and officers regarding the integrity of persons with disabilities.	• Data related to the response and handling of complaints in cases of violations of the Integrity rights of persons with disabilities.
Sources and Methods of Information Collection		
• Review of regulations that guarantee the protection of the physical and mental integrity of persons with disabilities, especially for medical actions, and other actions without knowledge and consent and violating the integrity of persons with disabilities and forced	• Review of shackle-free programs and more humane handling of disabilities. • Review of SOPs on the provision of information delivery services and requests for consent of persons with disabilities prior to conducting research, trials or medical procedures.	• Review of response data and handling of complaints in cases of violations of the integrity rights of persons with disabilities.

Structure indicator	Process Indicator	Outcome indicator
institutionalization, as well as forced abortion and sterilization in the case of women with disabilities. • Legal apparatus interview regarding the protection of the integrity of persons with disabilities.	• Review of programs to increase the capacity of state/private social service officers or officers related to the integrity of persons with disabilities. • Interview with related parties	

Article 18 Liberty of Movement and Nationality		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of guarantees of laws and regulations and their derivatives on freedom of movement, including determining the place of residence, as well as citizenship status equally and without discrimination for persons with disabilities. • The existence of laws and regulations that guarantee equality and non-discrimination in the process and procedure for changing citizenship, obtaining a passport, and obtaining a residence permit in Indonesia for persons with disabilities.	• The existence of regulations in immigration procedures that ensure an accessible process and provide appropriate accommodation in the processing of immigration documents, including for refugees and asylum seekers with disabilities. • Active efforts to ensure that persons with disabilities, including those living in remote areas, living in nursing homes or other rehabilitation institutions, as well as infants born with disabilities, obtain a legal identity and residence document.	• Disaggregated data related to persons with disabilities using immigration services. • The number of births of babies with disabilities in the last 12 months who obtained a citizenship identity (Birth Certificate). • Number of cases of refusal or delay in the process of persons with disabilities taking care of residence documents and immigration documents. • Perception/satisfaction index of persons with disabilities related to population and immigration services.

Sources and Methods of Information Collection		
• Review regulations related to freedom of movement, including determining residence, as well as citizenship status without discrimination for Persons with disabilities. • Review of regulations that guarantee equality and non-discrimination in the process and procedure for changing citizenship, obtaining a passport, and obtaining a residence permit in Indonesia for persons with disabilities.	• Review of immigration procedures regarding accessibility and availability of adequate accommodation in the processing of immigration documents, refugees and self-employed persons with disabilities. • Interviews with related parties on active efforts to ensure that persons with disabilities obtain a resident identity • Review/interview on efforts to provide information and support to persons with disabilities to obtain citizenship status • Interview of officers providing assistance services for persons with disabilities at each immigration service office.	• Review of disaggregated data related to persons with disabilities using immigration services. • Review the number of births of babies with disabilities in the last 12 months who obtained a birth certificate. • Review the number of cases of refusal or delays in the processing of population/ immigration documents. • Interviews on the satisfaction of persons with disabilities related to population and immigration services.

Article 19 Living Independently and Being Included in the Community		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of laws and regulations that guarantee the rights of persons with disabilities, to be able to decide to live alone, to live with their family or closest people, and that institution/ institutionalization are not the main choice for persons with disabilities.	• The existence of a system that facilitates persons with disabilities to choose affordable and accessible housing, as well as the existence of services that support the independence of persons with disabilities.	• Availability of data on persons with disabilities who can access housing schemes • Availability of data on the number of beneficiaries of support services for independence

Structure indicator	Process Indicator	Outcome indicator
• The existence of policies that protect the participation of persons with disabilities in the community where they live, as well as access to adequate social protection to support the independence of persons with disabilities in the communities where they live.	• Availability of information to provide understanding to persons with disabilities and non-disabled people on the availability of systems and services aimed at supporting independence in their place of residence. • The existence of an accessible and effective system and mechanism for complaints and handling of violations or restrictions on independence, service delivery and participation of persons with disabilities. • The existence of systems/ procedures/programs/ budgets to ensure that there are services for persons with disabilities both at home, in the neighborhood, and other public services to achieve independence, including disability assessments and referrals for accessible services.	• Availability of data regarding the number of complaints of violations reported and handled • There is data on community services and facilitation that can be accessed by persons with disabilities.
Sources and Methods of Information Collection		
• Review the regulations that guarantee the right to decide to live alone, live with family or close people, and the institutions.	• Review/interview of parties related to systems that facilitate persons with disabilities to choose affordable and accessible housing, as well as services to support the independence of persons with disabilities.	• Review of data on persons with disabilities who can access housing schemes • Review the data on the number of beneficiaries of service support for independence

Structure indicator	Process Indicator	Outcome indicator
• Review of policies on participation of persons with disabilities in the community and access to social protection support.	• Review of information systems regarding the availability of systems and services aimed at supporting independence in their homes. • Review systems and mechanisms for complaints and accessible and effective handling of violations or restrictions on independence and service delivery. • Review/Interview on the implementation of systems/procedures/ programs/budgets that ensure services for persons with disabilities that build independence.	• Review data on the number of complaints and those handled • Review of service data and community facilitation that can be accessed by persons with disabilities.

Article 20 Personal Mobility		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of rules and regulations related to the provision of mobility aids and other aids, either through social security schemes or other schemes, as well as responsible institutions, as well as efforts to conduct research and development on the provision of assistive devices that are in accordance with the	• The existence of a scheme for providing mobility aids such as wheelchairs, canes and other assistive devices that are needed and easily accessible, at least at the village level or first-level health service providers. • The existence of budgetary allocations/ financing schemes for the provision, repair and maintenance of mobility aids for persons with disabilities as	• Data on the number of persons with disabilities who have received mobility aids and other disability aids in accordance with their barriers and needs, which is compared with data that have not received assistive devices. • Data on the number of research institutes developing

Structure indicator	Process Indicator	Outcome indicator
needs of persons with disabilities based on the type of disability.	needed which is integrated with social protection schemes, either through national, regional, and village and private funding sources • The existence of information and training related to mobility and the use of adaptive mobility aids for persons with disabilities, including children, at least at the village level. • The existence of standardization of assistive devices that are appropriate for the age and needs of persons with disabilities • Availability of training programs for professionals related to repair, adjustment, maintenance to the production of mobility equipment. • Availability of mobility aid technology development program	assistive technology and the initiatives undertaken.
Sources and Methods of Information Collection		
Review of regulations related to the provision of mobility aids and other aids, both through social protection schemes and research and development efforts on the provision of adaptive aids.	• Review/interview of the scheme for providing mobility aids in the area/ village. • Review/interview of budget allocations for the provision, repair and maintenance of mobility aids (its integration with national, regional and village social protection schemes).	• Review number of persons with disabilities who received mobility aids and disability aids. • Review number of research institutes developing assistive technology and initiatives undertaken.

Structure indicator	Process Indicator	Outcome indicator
	• Review the availability of information and training related to mobility and the use of adaptive mobility aids. • Review the standardization of assistive devices according to the age and needs of persons with disabilities • Review/interview on the implementation of training programs for professionals related to repair, adjustment, maintenance to the production of mobility equipment.	

Article 21 Freedom of expression and opinion and access to information		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations/laws that guarantee the freedom of persons with disabilities in expressing their opinions; with an emphasis on affirmations for persons with intellectual and psychosocial disabilities. • The existence of laws/regulations that require the provision of accessible digital communication	• Availability of sign language support services within public service providers; • Availability of support for the development of communication and information for persons with disabilities, including sign language research, as well as accessible information technology for various sensory disabilities. • Availability of budget allocations and programs aimed at strengthening the facilitation and	• Availability of live broadcasts and percentage of rebroadcasts on television, webinars, and other audio-visual information, equipped with sign language, audio descriptions, and quality subtitles or captions. • Availability of information on the percentage of website content that meets the

Structure indicator	Process Indicator	Outcome indicator
and information for various disabilities, as well as support for the provision and development of sign language interpreters in public services.	capacity of information providers in providing accessible forms of information for persons with disabilities. • The existence of guidelines and monitoring mechanisms regarding the provision of accessible information on various media. • There are SoPs for service providers, both government and private; there is a mechanism for receiving and handling complaints regarding violations of privacy and correspondence for persons with disabilities.	'Web Content Accessibility Guideline' or easily accessible website accessibility guidelines • Information on the compliance level of online mass media companies in providing accessibility for all types of disabilities • Data on the perception of persons with disabilities on the accessibility of information and freedom of expression and opinion.
Sources and Methods of Information Collection		
• Review of regulations that guarantee freedom of expression and opinion (emphasis affirmation for persons with intellectual and psychosocial disabilities) – Marrakech treaty derivatives. • Review the regulations for organizing accessible digital communication and information in public services.	• Review sign language support services in public service providers; • Review of communication and information development support including sign language research, as well as accessible information technology. • Review budget allocations and programs to strengthen the facilitation and capacity of information providers in providing other forms of access information. • Review of guidelines and monitoring mechanisms regarding the provision of accessible information on various media.	• Interview of satisfaction with access programs such as live broadcasts and percentage of rebroadcasts on television and all information service media. • Review the availability of information regarding the percentage of website content that meets the standards of the 'Web Content Accessibility Guideline' or website accessibility guidelines that are easily accessible

Structure indicator	Process Indicator	Outcome indicator
	• Review of SOPs for government/private service providers and mechanisms for receiving and handling complaints of violations of privacy and correspondence for persons with disabilities. • Interviews with parties related to access information services.	• Reviews or interviews with information service providers regarding the level of compliance of online mass media companies in providing accessibility. • Interviews with Persons with disabilities on the accessibility of information and freedom of expression and opinion.

Article 22 Respect for Privacy		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of laws/regulations that guarantee the privacy of Persons with disabilities (personal data; correspondence; medical and rehabilitation data, including data obtained for the purpose of providing adequate accommodation).	• The existence of the SoPs and internal regulations and socialization of their implementation related to the confidentiality of data and personal correspondence from Persons with disabilities. • The existence of a mechanism for receiving and handling complaints related to violations of privacy and correspondence for persons with disabilities.	• Data on the number of complaints received for violations of the right to privacy and the handling of these complaints.

Sources and Methods of Information Collection		
• Study/review of legislation related to the protection and confidentiality of personal data, as well as personal data related to persons with disabilities. • Law No.23 of 2013 concerning amendments to Law No.24 of 2006 on population administration, • Other related laws	• Review of the existence and management of the confidentiality of personal data at service providers and data management institutions, • Review of programs for public service providers related to efforts to protect the confidentiality of personal data, especially in institutions that are accessed by persons with disabilities.	• Survey of perceptions and beliefs of persons with disabilities regarding the confidentiality of personal data related to disability information, • Data from the complaint-receiving institution regarding the number of complaints received on the protection of the confidentiality of personal data, as well as the handling and results.

Article 23 Respect for Home and the Family		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations/ legislation that guarantees protection for persons with disabilities to obtain the right to marriage, reproductive rights, family and household building, as well as child care, on an equal basis with others and without discrimination	• Availability of affordable and accessible information and consultation services for persons with disabilities related to reproductive health, marriage and family planning, including the provision of sign language interpreters in marriages of persons with disabilities.	• Percentage of divorce cases involving persons with disabilities, and making one partner's disability the basis/reason for divorce. • Data on the number of violence experienced by Persons with disabilities in the household and its handling)

Structure indicator	Process Indicator	Outcome indicator
	• The existence of a system that strictly protects the right to fertility of Persons with disabilities, especially adolescents and adult women with disabilities, to forced abortion or infertility. • Availability of a support system up to the village level that ensures children with disabilities are not cared for separately from their families, for example counseling, referrals to schools	Data on the number of children with disabilities who are not cared for in the family and not with the child's consent
Sources and Methods of Information Collection		
• Review of laws and regulations related to marriage, reproduction, and parenting, such as the marriage law, and other related laws.	• Interviews with providers of counseling services for women regarding inclusiveness and accessibility for Persons with disabilities in accessing these services, • Administrative data on the number of persons with disabilities accessing services in P2TP2A • Review of SoPs (if any) regarding proper accommodation procedures in organizing weddings for Persons with disabilities, • Review other relevant government programs and service providers.	• Metadata review of SDGs on goal 5, points 1 - r, with disaggregation by disability • Perception survey of women with disabilities.

Article 24 Education		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of strict and consistent regulations/laws regarding the provision of non-discriminatory education and guarantees for the acceptance of Persons with disabilities in inclusive education settings, as well as the provision of adequate accessibility and accommodation at the primary, secondary, and higher education levels according to the choice of persons with disabilities, including support for increase participation and access to education for Persons with disabilities.	• Availability of training programs for teachers, lecturers, and other educational technical personnel related to the perspective of disability and inclusive education. • Availability of teaching staff, technical education staff, and officers who have technical competence in the implementation of inclusive education. • The proportion of schools that have adopted the provision of inclusive education and the availability of education personnel who have teaching competence for students with disabilities. • Availability of proportional budget allocation in the education sector to support the acceleration of expansion of inclusive education implementation • The existence of a detection and identification system, for the presence of candidates or students with disabilities and an overview of the involvement of Persons with disabilities in the implementation of the system.	• Data on the percentage of participation of persons with disabilities in education, compared to non-disabled children, at each level of education. • The prevalence of graduation for persons with disabilities at every level of education; • Data on complaints regarding discrimination in education for persons with disabilities, as well as the handling process and results.

Structure indicator	Process Indicator	Outcome indicator
	• Availability of accessible learning media at schools and universities. • Availability of support for the provision of adequate accessibility and accommodation, such as sign language interpreters and others, for schools and universities that implement inclusive education, from the ministry of education, ministry of religion, and the ministry of research and higher education. • Availability of technical policies related to disability service units and their establishment in every inclusive school. • Availability of disability data in student primary data (DAPODIK) • Availability of technical regulations that guide the preparation of a disability adaptive curriculum for inclusive education providers • The existence of an institution that is mandated to receive complaints related to discrimination on the right to education for Persons with disabilities and its handling. • Availability of scholarship programs for Persons with disabilities.	

Sources and Methods of Information Collection		
• Review of the existence and norms of laws and regulations related to the implementation of education.	• Review of Ministries/ Institutions programs related to the implementation of education (basic, secondary and higher) as well as the organizers of training programs, • Review the availability, allocation and absorption of budgets related to education, especially those aimed at the development of inclusive education, • Review of administrative data for education personnel who have competencies that support the implementation of inclusive education (its distribution compared to the number of schools), • Interviews with relevant Ministry/Agency and education service providers (basic, secondary and higher). • Review of administrative data on the number of schools that have implemented inclusive education in each district and their distribution.	• Review of administrative data on the participation rate of persons with disabilities who graduated from primary and secondary education, compared to non-disabled children (Added category for persons with disabilities to SDGs 4.1.1 metadata.) • Perception survey on satisfaction with the implementation of inclusive education for persons with disabilities, • Review of administrative data regarding the percentage of persons with disabilities who are currently pursuing higher education compared to non-disabled persons, • Review of complaint data regarding discrimination in education, as well as its handling and results. Data is obtained from institutions that play a role in supervising and receiving complaints.

Structure indicator	Process Indicator	Outcome indicator
		• Review the net participation rate of Persons with disabilities compared to non-disability according to the metadata of the SDGS 4.5 indicator by adding data categories based on disability.

Article 25 Health		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations/laws that guarantee the provision of affordable, accessible, quality, and disability-inclusive health services, including the provision of assistive technology to government and private health service providers, sexual and reproductive health services, as well as services and support for persons with mental and psychosocial disabilities. • The existence of regulations/ legislations that mandates health service providers to	• The existence of proportional allocation and financing schemes to ensure accessible health service facilities up to the PUSKESMAS level. • Availability of accessible information in braille format, signs, or other formats as needed, related to service delivery and health service flow. • Availability of an early identification system for disability, as well as an early service referral system related to disability, starting at the Integrated Service Post (POSYANDU) and PUSKESMAS as the first level health service provider. • The proportion of officers in health care providers	• Data on PUSKESMAS, hospitals, or other health service providers that are accessible and disability-friendly by considering the region, and are affordable to rural areas. • Accessible data for persons with disabilities in home visit and homecare services. • Data on the number of complaints, their handling and results, regarding discrimination in the provision of health services for persons with disabilities.

Structure indicator	Process Indicator	Outcome indicator
ensure the provision of easily accessible health service information in various formats. • The existence of regulations/ legislations that guarantees no discrimination on the basis of disability in the implementation of health insurance and life insurance, both for government and private insurance managers.	who have technical expertise and play a role in supporting the provision of adequate accommodation for persons with disabilities, including communication support using sign language. • The existence of a health service outreach system for persons with disabilities to the household level, including homecare and home visits, including in remote areas • The existence of training for health service providers related to the perspective of disability in the provision of health services. • The existence of a complaint mechanism for acts of discrimination in health services for Persons with disabilities • Availability of a system to ensure affordability of quality medicines without side effects covered in the national health insurance system • The existence of Minimum Service Standards for health services with a disability perspective.	• Perceptions of persons with disabilities regarding access to health insurance and services.

Structure indicator	Process Indicator	Outcome indicator
Sources and Methods of Information Collection		
• Review and analysis of related regulations/laws: • Implementation of health services, • Health Insurance, • Drug procurement rules, • Regulations for organizing assistive devices for Persons with disabilities.	• Review roadmaps and health sector programs in the delivery of inclusive health services, • Review and analysis of budgets related to service improvement and health insurance, • Review of implementing regulations and technical regulatory documents related to the provision of health services to health service providers • Interviews with ministries/agencies in the health sector and health service providers. • Review the achievement of SDGs targets and metadata indicators (indicator 3.3.4 and indicator 3.4) related to mental health services.	• Perception survey of Persons with disabilities on the ease of and access to health services, • Review of administrative data regarding ownership of assistive devices and health insurance by Persons with disabilities.

Article 26 Habilitation and Rehabilitation		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence, firmness and consistency of policies/ laws ensuring that the habilitation and rehabilitation of persons with disabilities are designed and implemented to enable them to obtain and maintain their independence to the fullest, as	• Availability of affordable and accessible habilitation and rehabilitation services for persons with disabilities and their families, and organized on a community-based system in the communities where they live. • The existence of technical regulations regarding the resocialization of	• Data Percentage of persons with disabilities who after receiving habilitation and rehabilitation services are able to be independent and integrated in the community. • Number of habilitation and rehabilitation service providers

Structure indicator	Process Indicator	Outcome indicator
well as to equip them with physical, mental, social and vocational abilities, and the existence of a support system for the purpose of realizing the full participation and inclusion of persons with disabilities in society in all aspects of life, taking full account of the human rights of Persons with disabilities.	persons with disabilities after the rehabilitation program in institutions, and that institution-based services are the last alternative. • The existence of a system for involving persons with disabilities in the planning and implementation of habilitation and rehabilitation) • The existence of a system of community involvement in the implementation of habilitation and rehabilitation	
Sources and Methods of Information Collection		
• Review and analysis of rules/ laws related to the implementation of social rehabilitation, including regulations related to the organization of institutions and social rehabilitation, whether organized by the government or the private sector.	• Interviews with Ministries/Institutions organizers/managers of habilitation and rehabilitation programs, • Review of planning and reports/ achievements as well as administrative data on the implementation of habilitation and rehabilitation of persons with disabilities.	• Reviewing administrative data on the results of the implementation of habilitation and rehabilitation, • Perception survey of persons with disabilities regarding the implementation of the habilitation and rehabilitation of persons with disabilities.

Article 27 Work and Employment		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations and legislation that guarantees no discrimination on the basis of disability	• The existence of a system that ensures the involvement of DPOs in the planning, implementation, monitoring and	• Data showing the comparison of unemployment rates for disabled and non-disabled workers.

Structure indicator	Process Indicator	Outcome indicator
in accessing job opportunities and entrepreneurship supported by accessible information services) • The existence of a policy that guarantees return to work for persons with disabilities due to work accidents	evaluation of work accessibility regulations/ policies and inclusive entrepreneurship • The existence of a work quota for Persons with disabilities. • The existence of an accessible complaint system for violations of labor rights for persons with disabilities and their handling • Availability of a return-to-work system/ programme, which allows access for Persons with disabilities, including those with disabilities during the period of work, to ensure they can return to retain their jobs, or obtain new jobs • The existence of a system at the ministry/ manpower office, to ensure workers with disabilities get proper accommodation and accessibility in the work environment. • The existence of disability-inclusive systems and mechanisms at the National and Regional Personnel Boards that ensure accessibility and proper accommodation for persons with disabilities to participate in the selection and development of their career paths as civil servant.	• Data on the comparison of opportunities for access to capital between disabled and non-disabled entrepreneurs. • Data on wage equality between disabled and non-disabled workers • The existence of data regarding complaints of discrimination in the world of work for Persons with disabilities and the results of their handling. • Data on the number of companies that employ Persons with disabilities and provide adequate accommodation. • Perceptions of Persons with disabilities regarding the right to work compliance. • Data on the number of employees with disabilities in the government, BUMN and BUMD (state and regional government owned companies).

Structure indicator	Process Indicator	Outcome indicator
	• Availability of accessible training and job placement information for persons with disabilities. • Availability of information and training for job providers and non-disabled workers on a disability-friendly work environment • The existence of a supervisory mechanism and sanctions for those who neglect the provision of accessibility and proper accommodation in the work environment for persons with disabilities. • The existence of systems and programs, to encourage independent business ownership, entrepreneurship, and access to capital for persons with disabilities, to the government and the private sector, including mentoring and marketing/promotional assistance. • The existence of a system that ensures the openness of trade unions to the participation of Persons with disabilities. • The existence of a disability service unit in employment.	

Sources and Methods of Information Collection		
• Review and analysis of regulations/ laws related to employment, job creation and entrepreneurship regulations.	• Review of Ministry/ Agency programs related to employment for persons with disabilities, • Reviewing administrative data and program implementation reports related to the implementation of employment programs for Persons with disabilities and their budget allocations, • Interview with Ministry/ Agency in charge of labor issues.	• Review of administrative data - metadata on SDGs indicators 8.3 and 8.2, with a focus on persons with disabilities, • Perception survey of persons with disabilities on the rights and access to employment compliance.

Article 28 Adequate Standard of Living and Social Protection		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations/ laws regarding social protection schemes for persons with disabilities as a form of state responsibility to support full participation in state and community life.	• The existence of a social protection system that guarantees a decent standard of living for persons with disabilities that takes into account the level of support and extra or additional costs of disability. • Availability of budget allocations for integrated social protection programs. • The existence of a system of involvement and active participation of persons with disabilities in the planning, implementation, and monitoring of social protection systems.	• Statistical data on poverty rates for persons with disabilities. • Statistical data on the number of persons with disabilities who are included in the social protection scheme. • Statistical data on changes in the decent life of persons with disabilities who are included in the social protection scheme.

Structure indicator	Process Indicator	Outcome indicator
	Percentage of budget allocation for social protection and percentage of total social protection budget allocated for persons with disabilities.	
Sources and Methods of Information Collection		
• Review of laws and regulations related to the implementation of social protection, including in the Health, Employment, Education sectors, as well as support for barriers to participation of persons with disabilities.	• Review of social protection programs, as well as distribution systems, • Review of SoPs on insurance providers and distributors of social protection assistance, • Interviews with Ministry/Agency and implementing institutions for social security/protection.	• Administrative data on the number of beneficiaries of social protection schemes. • Perception survey of Persons with disabilities regarding the quality of social protection programs for persons with disabilities. • Percentage of persons with disabilities enrolled in the SJSN program in the fields of education, employment, health and the conditional cash transfer program (PKH), • Percentage of ownership of assistive devices and inclusive support for persons with disabilities.

Article 29 Participation in Political and Public Life		
Structure indicator	**Process Indicator**	**Outcome indicator**
• Firmness of regulations/ laws regarding the guarantee of the political rights of persons with disabilities compliance, including for persons with intellectual and psychosocial disabilities, which ensures the removal of barriers for persons with disabilities in exercising their political rights. • The existence of rules/laws that regulate the affirmation of quotas for persons with disabilities as an effort to increase the representation of persons with disabilities in political positions	• The existence of implementing regulations, procedures, budgeting, as well as infrastructure and logistics that ensure that persons with disabilities can vote in general elections, both regional and national, secretly and independently, or by using a companion appointed on the basis of trust and without pressure. • The existence of mechanisms and procedures, including affirmative efforts to ensure that persons with disabilities have the right to vote, be elected, and carry out public office functions in government, both at the central and regional levels. • The existence of mechanisms and procedures to ensure the involvement of persons with disabilities, including women and children, in decision-making processes such as MUSRENBANG, including by ensuring the establishment of accessible and open decision-making forums.	• Percentage of persons with disabilities in public positions at all levels • Increasing the percentage of voter data and the number of disabled voters in elections and post-conflict local elections • Number of disabilities registered as civil servant • Number of persons with disabilities elected to parliament

Structure indicator	Process Indicator	Outcome indicator
	• There are efforts to promote the involvement of persons with disabilities in non-governmental organizations, political parties, and other institutions that aim to become a space for conveying political and non-political aspirations. • Availability of support for persons with disabilities in forming and running organizations to represent their aspirations at the local, regional, national and international levels. • There are efforts to improve the voter registration system for persons with disabilities that is more accessible and proactive from general election officials • Programs or actions to eliminate stigma against mental disabilities related to the right to vote in general elections	
Sources and Methods of Information Collection		
• Review and analysis of regulations/laws related to political participation with an emphasis on inclusiveness for persons with disabilities.	• Reviewing the technical policies of the election and the administration of public office, • Interviews with related Ministries/Agencies and political parties, as well as reviews of related programs,	• Review of administrative data on the participation of Persons with disabilities in public positions and political parties,

Structure indicator	Process Indicator	Outcome indicator
	• Review the availability of disability data to support the implementation of access in the General Elections (national and regional levels).	• Perception survey of Persons with disabilities regarding political participation of persons with disabilities.

Article 30 Participation in Cultural Life, Recreation, Leisure and Sport		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of regulations/laws regarding the guarantee of access and participation of Persons with disabilities in cultural, recreational and sporting activities, including support and access to be able to participate equally with non-disabled groups.	• Existence of programs and budget allocations to ensure adequate accommodation related to accessible sports, culture and recreation. • The existence of a program to ensure that literary content and cultural materials are easily accessible to Persons with disabilities, through the use of information technology. • Enforcement of regulation and supervision to ensure that cultural programs such as performances, whether held live or through television broadcasts and digital media, are accessible for persons with disabilities. • The existence of a program to recognize and promote persons with disabilities to participate in arts and cultural activities, including developing their intellectual and creative potential.	• Data on tourist attractions, sports halls, theaters that are accessible and provide concessions. • Data on the level of satisfaction of Persons with disabilities in accessing tourist attractions, sports and recreation. • Data on the number of athletes with disabilities/ paralympian • Data on the number of sports professionals who have received disability perspective training

Structure indicator	Process Indicator	Outcome indicator
	• The existence of a program of respect and recognition of the culture and linguistic identity of the deaf, including the recognition of sign language and deaf culture. • The existence of a program, including budget allocation, to open the participation of persons with disabilities in general sports activities at all levels. • The existence of a program for specific sports activities and development for persons with disabilities, including through the allocation of budgets, training, infrastructure facilities, as well as equal resources & rewards. • The existence of a program to ensure that children with disabilities have equal access to facilities and activities for play, tourism and sports, including in school systems and activities. • Availability of services with a disability perspective in tourist attractions, sports venues, performance halls, such as escorts, tour guides, sports coaches. • Programs for developing sports and classes that accommodate all types of disabilities.	

Sources and Methods of Information Collection		
• Review of regulation/ legislation related to culture, sports and recreation	• Review of technical regulation and programs of Ministries/Agencies and local governments related to culture, sports and recreation, • Review of programs and budget allocations for the fields of sports, culture and recreation, • Interviews with Ministry/ Agency and regional apparatus organizations in charge of culture, sports and recreation.	• Media tracking, • Perception survey of persons with disabilities related to the facilitation of cultural and recreational sports rights, • Administrative data related to cultural, recreational and sports facilities and participation.

Article 31 Statistics and data collection		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of strict and non-conflicting regulation/laws regarding disability data collection nationally. • The existence of measurable mechanisms and steps to involve organizations of persons with disabilities in planning, implementing, analyzing, and disseminating disability data.	• The existence of a road-map or strategy to realize a comprehensive disability data collection that is agreed upon by cross-ministerial and agencies. • The existence of efforts to prepare data collection tools for persons with disabilities by adopting the Human Rights principles, covering all types of disabilities, and focusing on mapping the conditions that hinder Persons with disabilities. • The existence of measurable mechanisms and steps to involve DPOs in planning, implementing, analyzing, and disseminating disability data.	• Disaggregated data obtained from censuses and surveys based on a variety of disabilities, environmental barriers, age group, gender and socio-economic conditions that are updated regularly as a reference for the formulation of policies and programs at the national and regional levels.

Structure indicator	Process Indicator	Outcome indicator
	• The existence of a coordination mechanism between institutions that carry out disability data collection, both at the regional and national level, to ensure data alignment and accuracy.	
Sources and Methods of Information Collection		
• Review of regulations/laws related to the responsibility for planning, implementing and managing data collection and population data on Persons with disabilities.	• Review of technical policies and their implementation, • Interview with Ministry/ Agency in charge of data collection.	• Review the consistency of disability data from various sources and trends in its development.

Article 32 International Cooperation		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The laws and regulations that underlie the Indonesian state can cooperate with other countries in efforts to respect, protect, and comply with the Rights of persons with disabilities.	• Preparation of mechanisms or tools that ensure the mainstreaming of disability issues in any international cooperation • Preparation of international cooperation mechanisms that facilitate the exchange of information and experiences, training, good practices, research, scholarships, and technology transfer between Indonesia and other countries.	• Number of international collaborations that have been initiated. • Number of DPOs involved in bilateral/ international cooperation initiatives, and their roles.

Article 33 National Implementation and Monitoring		
Structure indicator	**Process Indicator**	**Outcome indicator**
• The existence of a legal basis for monitoring the progress of the human rights of persons with disabilities by the community. • The issue of a presidential regulation on the National Commission for Disabilities.	• Monitoring and evaluation system for the implementation and progress of human rights for persons with disabilities. • Establishment of an independent monitoring mechanism for efforts to respect, protect, and comply with the Rights of persons with disabilities.	• Monitoring tool for the implementation of progress on human rights for persons with disabilities. • Report on the results of monitoring and evaluation of human rights progress. • Follow-up data on complaints and findings by KND.

F. Simulation of Monitoring the Rights of Persons with Disabilities Compliance from Various Sectors

1. Monitoring the Protection and Empowerment of Women with Disabilities (Article 6)

Women with disabilities have multiple vulnerabilities. Therefore, their existence should be considered by the government and the mainstream in the development of public policies. Relevant ministries/institutions dealing with women include the Ministry of Women's Empowerment and Child Protection (KPPPA) and at the regional level such as Office of Women's Empowerment and Child Protection (P3A), Ministry of Social Affairs, P2TP2A (District Police), and Social Service.

Monitoring the rights of women with disabilities compliance from structure indicators will be related to a number of regulations and other legal guidelines. For example, the availability of regulations at the level of Law, Government Regulation and Ministry Regulation and local regulations. Currently, for example, the KPPPA Regulation No. 23/2010 on guidelines for establishing an Information and Consultation Center for Women with Disabilities (PIK-PPD), also exists Integrated Service Center for Women and Children Empowerment or P2TP2A and Ministerial Regulation No. 3 of 2017 concerning women in conflict with the law. If traced carefully, the monitoring process allows the identification of this regulation to be widespread.

As for the process indicators of rights of women with disabilities compliance, this monitoring will explore how KPPPA and related institutions and agencies collect data or manage data sets into disaggregated data for women with disabilities, and provide public services to women with disabilities. Then, the monitoring can trace social and legal protection programs and women with disabilities empowerment programs and their budget availability. It includes monitoring how the mechanisms and budgeting are related to the protection of victims of sexual violence or the implementation of the Maternity Guarantee Program for reproductive health rights, installation of contraception, mechanisms for providing assistance

to women with disabilities who are in conflict with the law, etc (please refer to the DRIs instrument).

In terms of outcome indicators, this monitoring will track the availability and level of access to disaggregated data on women with disabilities in related sectors, such as education, health, employment, law and so on. The essence of monitoring the rights compliance from these outcome indicators is what has been programmed, has been completed, used or utilized, enjoyed, and so on. So, the more government service programs for women with disabilities are provided, the wider the scope of this monitoring will track the results of the government complying with disability rights.

2. Monitoring the Accessibility for Persons with Disabilities Compliance (Article 9)

Accessibility, both physical and non-physical, is one of the main prerequisites for overcoming barriers for Persons with disabilities to participate equally. The right to accessibility is affirmed in Article 18 of the Law on Persons with Disabilities which covers the accessibility of infrastructure as well as public facilities and infrastructure and is described in articles 97 – 108. More operational accessibility rules are contained in Government regulation No. 42 of 2020 concerning the accessibility of settlements and public services, as well as protection from disasters.

A number of the policies above are examples of structure indicators that can be further analyzed for their conformity with the norms of article 9 of the CRPD, as well as the effectiveness of their implementation. The implementation of accessibility also cannot be the sole responsibility of one Ministry/Agency. Other Ministries/ Agencies responsible for implementation and supervision have equally important role, and thus need to be monitored and provide relevant information related to the progress of accessibility of public services compliance.

To inform the extent of implementation efforts, Ministries/ Agencies, Local Governments, as well as public service providers and stakeholders implementing infrastructure development and other public services should provide information on how efforts

have been made to ensure accessibility. These are called process indicators. In the case of building permits, for example, the Ministry of PUPR needs to provide information on the accessibility standards of a building or infrastructure to be built, how many adhere to or do not comply with these accessibility standards and so on.

BAPPENAS and local governments can also periodically report the extent to which the proportion of the budget that has been allocated for infrastructure and public service development to support the development of more accessible services and facilities. Furthermore, to determine the extent to which the right to accessibility compliance has had an impact, it is necessary to measure the achievements or results, which in this monitoring tool are referred to as outcome indicator.

Ministry/Agency, OPD (local government organization), as well as government and private agencies that provide public services need to periodically submit information on how accessibility improvements have been carried out, how many service units have become more accessible, and how many accessibility units will still be improved. This data will provide an overview over time regarding the increase in the number of services and facilities that have become more accessible. This data can also be compared with survey data regarding the perceptions of Persons with disabilities and their organizations regarding the provision of accessibility to public services that they usually use.

3. Monitoring Risk Situations and Humanitarian Emergencies for Persons with Disabilities (Article 11)

BNPB or the National Disaster Management Agency is one of the official state agencies responsible for controlling emergency situations, such as natural disasters. In risky situations and humanitarian emergencies, the chances of Persons with disabilities being able to save themselves are generally low. One of the reasons is the vulnerability of persons with disabilities. The first vulnerability can come from persons with disabilities such as limited mobility due to the absence of mobility aids. The next vulnerability could be due to the inaccessibility of the home environment and its surroundings

so as to slow down the movement of self-rescue when a threat occurs. Vulnerability to disability is increasing, when the evacuation system implemented in the area does not take into account the needs of persons with disabilities.

In this context, efforts to ensure protection and safety for persons with disabilities in risky situations and humanitarian emergencies, the government needs to pay attention to aspects related to regulations, technical rules, service systems, and achievement targets. The government through the National Disaster Management Agency and BPBD and related Ministries/ Agencies needs to ensure the existence of special rules to ensure the protection and safety of persons with disabilities in conditions of armed conflict, social conflict, natural disasters and ensure that the procession of emergency response, recovery, and post-disaster development is accommodative to persons with disabilities.

Moreover, the government needs to ensure that in public places or spaces there are standard operating procedures, technical rules, guidelines related to the protection of persons with disabilities, both in situations of conflict and social disasters, armed conflicts and natural disasters. In addition, the government involves persons with disabilities in the overall risk reduction process and ensures the availability of an adaptation-sensitive budget and adequate accommodation for persons with disabilities. Likewise, persons with disabilities who are confined to their homes or shackles need to be considered when BNPB, BPBD or any related parties design a disaster evacuation management system.

In a disaster situation, data on the affected disability is often forgotten. This could be due to the absence of a disability vulnerability perspective in contingency plans or the low participation of persons with disabilities in the mitigation process, during emergency response, recovery, rehabilitation and reconstruction. As a result, in refugee camps, the conditions are often not accessible for survivors with disabilities and victims with disabilities do not receive special attention such as long-term physical and social rehabilitation.

Difficult situations will become even more difficult for persons with disabilities if the government does not provide protection. For this reason, monitoring using this instrument will ensure the quality of respect, protection and compliance of disability rights.

4. Monitoring Accessibility of Justice for Persons with Disabilities (Article 13)

Judicial institutions or law enforcement agencies such as the Police, the Prosecutor's Office, and the Supreme Court are the implementers of judicial services. However, to ensure the implementation of a fair and accessible judiciary for persons with disabilities, there are sections that are also the responsibility of other Ministries/Institutions.

For example, the Ministry of Law and Human Rights (KEMENKUMHAM) has responsibility for planning and managing the implementation of legal aid, including budgeting policies, issuance of supporting regulations, as well as control and harmonization of related regulations. Similarly, BAPPENAS has an important role in harmonization of planning to suit the objectives and policy directions and monitoring its implementation. Each of these ministries/agencies at least has a role that can be monitored using indicators of the rights of Persons with disabilities and their derivative questions.

The issuance of regulations such as Law 8/2016, Government Regulation 39/2020 concerning reasonable accommodation for persons with disabilities in the judicial process is an effort by the state to meet structure indicators related to access to justice. However, in the context of this monitoring, the question does not stop at whether there are regulations or not, but rather to be able to provide a deeper analysis of the extent to which the norms for the rights compliance, in this case access to justice, have been listed and regulated in the existing regulations. Such studies, as well as efforts to strengthen regulations as a follow-up, can be carried out by the Ministry of Law and Human Rights together with DPOs and other stakeholders.

Efforts to strengthen the accessibility of the judiciary are one of the priorities, namely the strategic goals of RIPD 4, and will

subsequently be translated into National Action Plans (RAN) and Regional Action Plans (RAD) in every Ministry/Agency and OPD. In an effort to monitor progress on the implementation of this right of judicial accessibility, the responsible Ministries/Agencies as well as implementers can refer to process indicators to be able to report data and progress consistently.

For example, the Police, Prosecutors and Courts, starting from the first level, can consistently report developments related to:

1) Number of officers who have received training and have the skills to provide assistance related to disability;
2) Number of facilities that have been physically accessible in law enforcement agencies, as well as efforts to make all of them accessible;
3) The existence of SOPs in law enforcement agencies in serving Persons with disabilities seeking justice;
4) Innovative efforts to overcome barriers to access of Persons with disabilities when seeking justice; and
5) Percentage of budget made for the above efforts. For further details, please refer to the process indicators in article 12 and the monitoring questions.

Finally, what is more important than the regulatory structure and implementation process is the extent of the impact felt by justice seekers with disabilities (outcome indicators). To measure it, the changes that must be seen are data or information that describes the number of Persons with disabilities who access legal and judicial services, their level of satisfaction with existing services, as well as the readiness of law enforcement agencies which can be read cumulatively in the assessment of process indicators. To obtain information on data of Persons with disabilities accessing services, of course, law enforcement agencies and other service institutions need to formulate a data collection or registration form by inserting questions about disability. For further details please refer to the outcome indicators for article 13.

In order to obtain consistent information regarding the indicators above, it is better if the questions and data requirements to measure the indicators of structure, process and outcome are

entered into the report format of each institution, for which reports and developments are submitted periodically.

5. Monitoring the Right to Personal Mobility of Persons with disabilities (Article 20)

Mobility is a need for everyone to be able to participate fully and effectively in various sectors of life. Persons with disabilities tend to have limited access to mobility freely and independently due to the absence of supporting factors such as an accessible environment, support systems such as personal companions, or the absence of mobility aids. The right to mobility compliance needs to start with the existence of regulations that guarantee the implementation of support for access and provision of mobility aids, including the implementation scheme and the responsible party. Countries need to periodically review and strengthen these regulations, which in this monitoring instrument are referred to as structure indicators.

After the regulatory aspect, what is very important to monitor is the implementation aspect (process indicators). For example, in the case of the provision of assistive devices, local governments can collect and present information on the scheme for the provision of aids and the allocated budget, as well as efforts to ensure that the aids needed by persons with disabilities are easily accessible and well-targeted.

The outcome indicator for the right to mobility compliance will assess the extent to which the implementation of a support system for the mobility of persons with disabilities has provided progress in access for persons with disabilities to move independently. One simple data that can be collected and presented is the number of persons with disabilities who need and have received mobility aids according to their needs. This data can be collected by the Village Government, Social Service, or other appropriate institutions.

Monitoring of the three indicators above will provide an overview of the progress of the assistive devices' compliance as part of the right to mobility compliance.

6. Monitoring the Right to Education (Article 24)

The right to education compliance, both formal and non-formal, is largely determined by the existence of firm and consistent regulations. For example, norms about equality for education at every level and type of education often have to be countered by regulations that free educational institutions to determine the requirements for prospective students. The inclusion of a requirement for not having a disability, for example, may result in the closure of access for persons with disabilities at certain levels and/or type of educational institutions. This is where the importance of monitoring structure indicators focusing on the existence and consistency of regulatory norms related to education. In this case, the scope of regulations analyzed as part of the structure indicators is not only regulations related to disability, but also regulations related to education in general, by looking at the potential for being counterproductive to the norms in Article 24 of the CRPD and the Law on Disabilities. This kind of analysis can be carried out by the Ministries/Agencies responsible for the administration of education.

After regulation, an important aspect of monitoring is to see how far it is being implemented (process indicators). The following are some examples of the information and data that can be collected, and the institutions responsible for providing this information:

1. Education ministry and offices: provide information on budget allocations, national and local, to strengthen capacity building and quality of inclusive education,
2. Education ministry/offices and Ministry of Research and Higher Education: providing information related to the number and distribution of schools/colleges that have accepted and facilitated students with disabilities,
3. Ministry of Manpower: collects and regularly updates data on the number of Vocational Training Centers that have accepted and accommodated persons with disabilities in the provision of job preparation education.

Because the regulatory analysis and information on the implementation process above have not been able to describe how

it affects the right to education compliance, the last part that needs to be monitored is the outcome indicators. One piece of information that is simple, but perhaps difficult to obtain accurately, is data on the percentage of children with disabilities who can access and pass basic education, compared to the percentage of non-disabled children who can access and graduate from basic education.

7. Monitoring Health Services (Article 25)

The Ministry of Health and health service centers both in cities and in villages play a role in maintaining the quality of life of the community. Some persons with disabilities are citizens who really need not only treatment, care, and therapy services, but also basic knowledge about the importance of healthy living. For this reason, the government must ensure that there are regulations that guarantee the provision of affordable, accessible health services, and the availability of access to health service information in various formats. In monitoring, this section becomes a **structure indicator**.

While process indicators, efforts to comply with disability rights in the health sector, are seen in the operation of health services for Persons with disabilities, from clinics, health centers to hospitals, service providers must ensure access for patients with disabilities. This certainty of access to services can occur when the Ministry and the Health Service have also received budget allocations to seek service accessibility to include aspects such as the availability of accessible information, an early identification system for disability, and an early service referral system related to disability. Another issue to ensure that access services are running is the availability of officers at health service providers who have technical expertise and support implementation of proper accommodation and running a health service outreach system for persons with disabilities down to the household level, including homecare and home-visit in remote areas.

For outcome indicators, monitoring can track how Puskesmas, hospitals, or other health service providers are accessible and disability-friendly to rural areas and their data collection system. The system and the results of data collection for health care centers

such as the availability of data on the number of complaints, their handling and results and if possible, obtain information on the perception of Persons with disabilities regarding access to health insurance and services.

8. Monitoring the Right to Work Compliance (Article 27)

Work for persons with disabilities is an urgent right as regulated in the Law on Persons with Disabilities. In the formal sector, there are regulation regarding quotas for disabled workers. For government offices, 2% of employees are Persons with disabilities and for private offices, 1% of employees are Persons with disabilities. In terms of structure indicators, the derivative of the Law on Persons with Disabilities is the Government Regulated related to the Disability Service Unit in the employment sector which is then managed by the manpower office. The purpose of providing Disability Service Unit in the employment sector is because in a number of cases persons with disabilities who work in a particular company do not get adequate accommodation. Without proper accommodation, persons with disabilities will experience a number of continuous obstacles while working. If this obstacle is not overcome, the employees many choose to leave and lose their job anytime.

In terms of process indicators, the efforts taken by the manpower office and other related agencies will be the focus of monitoring. Is there assistance for the manpower office in preparing the disability service unit (ULD) and coordination with the DPOs in carrying out the ULD function? In implementing or complying with the right to work, the government must accommodate if there are Persons with disabilities who are harmed in their employment relationship with the company or employer. The same applies to solving work-related accidents, returning to work, training, providing business capital assistance and so on.

From the aspect of outcome, this monitoring will target the availability of data on persons with disabilities who have received the benefits of fulfiling disability rights and the extent to which it is sustainable and how is the availability of data on disabilities who have not enjoyed justice for work: how many persons

with disabilities of productive age have not received training opportunities for work, etc. Also, the extent to which data is available, thus based on that data, the government can measure the empowerment or coaching actions that can be provided.

9. Monitoring the Right to Standard of Living and Social Protection (Article 28)

For persons with disabilities, social protection, as explained in article 28 of the CRPD, is oriented to two main issues, i.e., protection to be able to obtain and enjoy a decent standard of living (poverty and welfare oriented), and support for inclusive participation (oriented to disability needs). It is these two issues that the structure indicators will analyze for their existence by looking at the applicable regulations regarding social protection.

Furthermore, the process indicators of the right to social protection and their monitoring questions can be used to further analyze how social protection policies for persons with disabilities are implemented. Information from the Ministry and Social Services regarding the type of program, implementation and scope of implementation can be valuable information describing the progress of social protection implementation. In addition, the availability of data on persons with disabilities and the proportion of the social protection budget will provide an illustration of how serious the government is in allocating resources for the implementation of social protection, especially for persons with disabilities. The above data and information can be developed both nationally and regionally.

As for the outcome, the implementation of a social protection scheme for persons with disabilities is expected to provide changes in more effective persons with disabilities participation in various aspects of life. This can be seen by comparing the poverty rate and the welfare level of persons with disabilities, compared to the poverty rate and the general welfare level of the community which are usually issued by BPS. The challenge is that it is possible that this data cannot be obtained considering that there are no persons with disabilities disaggregated data in the population census. Thus, this

is a serious homework for Indonesia, and especially in the interest of a more inclusive social protection system.

10. Monitoring Disability Data Collection and Availability of National Data on Persons with Disabilities (Article 31)

Disability data collection is the responsibility of the Ministry of Social Affairs and the Central Statistics Agency. As part of the rights of citizens, data collection on Persons with disabilities must be carried out until disaggregated data is available based on certain categories. Some of these categories, when referring to the relational model of disability, include medical, social, and psycho-social aspects. For this reason, in the preparation of data collection, question and data analysis instruments must apply the concept and its derivatives as regulated by the UN-CRPD, namely with the provisions of the Washington Group on Disability Statistics (WGDS).

Monitoring the extent to which this right to data collection is enjoyed by persons with disabilities in Indonesia can be traced from the aspect of regulatory readiness, from implementation to results. In terms of regulation (which is part of the structure indicators), currently there are regulations that regulate data collection, namely Law no. 8 of 2016, Government Regulation No. 70 of 2019 (RIPD), and has been included in the National Action Plan (RAN) for Persons with Disabilities which is currently in the enactment process. To carry out monitoring, at least the structure indicators have been accommodated with the availability of these regulations. Furthermore, process indicators that emphasize the importance of implementing the regulation, namely the data collection process and the availability of National Data on Persons with Disabilities.

The disability data collection process was previously called SIMPD under the control of the Ministry of Social Affairs. However, currently there is a new decision, namely to transfer SIMPD to SIKS New Generation - PPKS for persons with disabilities. The Ministry of Social Affairs is also currently planning to synchronize and harmonize the concept of disability which will be used in the data collection process, the availability of a disability information

system and the embodiment of disability data for the purposes of preparing programs or public services for Persons with disabilities. In the context of this process indicator, monitoring will track the extent to which the above plans are running well at the responsible Ministry/Agency level, as well as supporting Ministry/Agency including provincial, district/city and village governments.

Furthermore, regarding outcome indicators, monitoring will track the availability of disability data, both when the government is still using DTKS or UDB for persons with disabilities or SIMPD and other disability data based on public service sectors. The availability of this data will be monitored to what extent it has implications for the public service process. Monitoring can still be expanded to include variations in the disaggregation of available disability data based on the public service sector and even the number of persons with disabilities receiving public services such as PKH recipients, ASPD and so on.

CHAPTER IV

MONITORING STAGES OF DISABILITY RIGHTS COMPLIANCE

IN THE PREVIOUS section, the indicators for the rights compliance based on the Convention on the Rights of Persons with Disabilities have been discussed. These indicators are a reference for planning and implementing monitoring of the Rights of Persons with Disabilities compliance. Furthermore, this section will briefly describe the stages of monitoring implementation based on indicators for the Rights of Persons with Disabilities compliance.

A. Determination of Monitoring Scope

The first step is to determine the scope of monitoring. Although the indicators for the Rights of Persons with Disabilities compliance are developed based on the Convention on the Rights of Persons with Disabilities, it does not mean that these indicators should be used as a whole in monitoring activities. Government agencies and civil society, according to their respective mandates and scope of work, can choose certain issues, or certain articles to be monitored. It means not all rights must be monitored in one monitoring activity. On the other hand, human rights monitoring institutions such as KOMNASHAM have an interest in conducting comprehensive monitoring, so it is recommended to use this instrument as a whole.

The Ministry of Education, for example, as an education provider, can collect data for monitoring purposes by using the indicators of article 24 related to education. As another example, the Ministry of Law and Human Rights and the Ministry of National Development Planning that work across sectors have broader interests in several sectors of rights, so they can refer to indicators for several articles of the CRPD.

For DPOs, ideally monitoring the Rights of Persons with Disabilities compliance can be carried out for all rights sectors as a whole. However, it must be understood that the use of this indicator has many consequences for collecting data, and therefore requires the mobilization of large resources. For this reason, the following points can be taken into consideration in determining the scope of monitoring:

1. Issues or rights sectors to be monitored

Before conducting monitoring, it is necessary to decide which issue or rights sector will be monitored. This will determine many things, starting from the choice of indicators and instruments to be used, the parties who will be involved and asked for assistance in collecting data and information, as well as the resources for data collection and analysis. Here are some questions that can be used to measure the capabilities of our organization and determine which sectors or rights issues to monitor:

a) What sector or issue does your organization work in?

If your organization is not in an ideal situation to monitor all rights, you should prioritize the issue or rights sector that is the main mandate and work of your organization. If your organization works on the issue of women and children with disabilities, for example, the experience of the organization working for a certain period has become the main capital for monitoring, where your organization has many sources of knowledge, data and information, and especially experience in understanding the context of the issue or right sector. Therefore, prioritize the issue or rights sector that are the main mandate or work of your organization in monitoring.

b) In which issue sectors does your organization have strong resources to collect and analyze data or information?

The next important consideration is knowing where the

expertise and strength of the resources available in your organization are. If your organization has excessive resource support and can monitor more than one rights sector, it is necessary to look at what issues or rights sector your organization has expertise in. Choosing an issue or rights sector where an organization has resources that have sufficient knowledge in the field will be an added value that makes it easier to carry out the monitoring process.

c) *For advocacy purposes in the rights sector or issues, will your organization take advantage of the monitoring results?*
The final consideration in determining the issue sector or rights to be monitored is what the purpose of monitoring is, and how the monitoring results will be utilized. Monitoring results should be oriented towards encouraging evidence-based change. For this reason, the accuracy of data and information, as well as the results of the analysis are very important. For this reason, focusing on the objectives, how to utilize the results, as well as obtaining in-depth and valid data and information are aspects that must be highly considered.

The answers to the three considerations above will guide your organization to determine the sector of issues or rights that need to be a priority for your organization in monitoring the Rights of Persons with Disabilities.

2. Scope of monitoring area

The choice of monitoring area will determine how much effort and resources are required. Monitoring nationally will certainly require greater efforts than monitoring a particular rights sector at the provincial or district/city level. Monitoring at the district level will obviously be simpler, because the stakeholders that will be met are within the scope of the district, sub-district, and village of the selected district. Meanwhile, monitoring at the provincial or national level will be more complex, because the stakeholders that must be met, as well as the data and information that need to be extracted not only come from the district, the selected province, as well as other districts.

The following are some of the questions that need to be considered in determining the monitoring area:

a) At what level does your organization work? District, Province, National?
b) To what extent does your organization have a network ready to support monitoring activities?
c) At which level of government will the monitoring results be used and followed up?

By mapping the scope of the monitoring area using the considerations above, the organization that will carry out the monitoring can ensure that the monitoring efforts will not require too much extra work, especially to build relationships and coordination with the data and information providers.

B. Formation of Monitoring Team

The second step is to form a team that will carry out the monitoring. Whether monitoring is carried out by the government, civil society, or joint monitoring by the government and civil society, the next step is the formation of a team based on the right composition as needed.

The core team, consisting of several people who will take full responsibility for preparing the monitoring design and process, overseeing the implementation of data and information collection needed in monitoring, and analyzing the data and information obtained until the monitoring report is compiled. Outside the core team, one or more technical teams can be formed as needed, for example a data collection team, data analysis team, and so on.

The following are some issues to consider in determining the composition of the monitoring team:

1. Consider the variety of skills that will be required.

Especially in the core team, it is necessary to have team members who can complement each other. Among the core skills that will be needed in a core team monitoring the Rights of Persons with Disabilities compliance are as follows:

a) Understanding and ability to analyze the issue sector or rights to be monitored,

b) Skills in understanding and designing monitoring instruments,
c) Ability to design and perform data collection,
d) Ability to analyze data based on the issue sector or rights to be monitored,
e) Ability to write reports on monitoring results, and
f) Ability to design follow-up from the monitoring results that have been obtained.

Ideally, all the required capacities are available in one organization that will carry out the monitoring. However, collaborative monitoring by two or more organizations can usually be very effective. For this reason, joint monitoring by two or more organizations with resources and expertise can complement each other is advisable.

2. Ensure gender balance, as well as representation of various disabilities.

It is very important that the monitoring of the Rights of Persons with Disabilities compliance has a balanced proportion of types of disability, and ensures gender mainstreaming in every sector of the issues or rights being monitored. One of the best ways to do this is to ensure representation of the diversity of disabilities and gender balance. The main objective is to ensure that aspects of disability diversity and gender mainstreaming always emerge as early as possible in the monitoring design. Therefore, the ideal team composition should accommodate this consideration.

3. Affirmations on under-represented disability issues.

This consideration may have been accommodated in the previous point. The essence is the need to ensure that the monitoring team ensures the representation of groups that have been underrepresented in the disability movement and policy. Among them are [1] people with psychosocial disabilities, [2] people with intellectual disabilities, or [3] persons with disabilities due to leprosy.

Involving them in the monitoring team is essential to ensure that the context of their issue becomes the object of analysis in

the monitoring. Another alternative, if this is not possible, is to ensure a mechanism for consulting the group, starting from the instrument design and monitoring design, as well as the results and recommendations generated.

C. Monitoring Instrument Adaptation

After the scope is determined, and the team is formed, the next step is to adapt the indicators for the Rights of Persons with Disabilities compliance into instruments that will be used in the particular monitoring. Depending on the scope defined in the first step, not all indicators may be suitable to adopt.

Following are the steps in adapting indicators and preparing monitoring instruments:

1. **Take and use the indicators in the article according to the monitoring scope.**

   This indicator is adjusted to the sector of the issue or rights to be monitored. Make sure the monitoring team understands the content and intent of the indicators in the rights or articles to be monitored. To ensure comprehensive monitoring of the sector of the issue or right that has been determined, this guide recommends that all indicators related to the rights that have been selected are used in their entirety and not reduced. Unless monitoring is carried out at the provincial or district level.

   Some 'process indicators' may not be appropriate to the province and district context, and thus can be modified according to the context of the existing implementation process in the district. From this process, the monitoring team has produced a list of indicators in the categories of structure, process and outcome that will be used as a reference in developing the instrument.

2. **Perform a simple analysis to identify the issue sector or other rights**

   The analysis is carried out to identify the issue sector or other rights that are closely related to the selected issue sector or rights to be monitored. For example, the right to education compliance (article 24) is always related to articles related to accessibility (article 9), and maybe some indicators related to women and children.

Therefore, a simple question that needs to be answered at this stage is: "what sector of issues or rights influence the rights compliance selected to be monitored?"

As a result, the monitoring team will obtain new articles that need to be added to the monitoring focus along with a list of indicators.

3. Set monitoring questions.

This guide has been completed with a list of questions compiled and grouped according to each indicator (see appendix). Take and use the list of questions in the appendix based on the sector of the issue or rights as well as the indicators that have been selected in stage 1 and 2. Do a simple analysis of each question to answer the following:

a) Is this question appropriate for use in the defined monitoring area? If the answer is 'yes' then the question can be used.

b) What or who are the appropriate sources of information? Map based on the context of the monitoring area that has been selected.

c) What are the methods for collecting this information?

At this stage, we have obtained a list of questions that will be used as a monitoring guide. This list of questions is then ready to be used as a reference in preparing survey instruments, interview guides, as well as guidelines for analyzing policies and program documents, budgets, and other required sources of information.

D. Data Collection Team Training

Depending on the area and sector of the issue or rights being monitored, monitoring activities on the Rights of Persons with disabilities may involve a completely different team from the core team that prepares the monitoring designs and instruments. Therefore, it is necessary to conduct training to ensure the understanding of the data collection team on the purpose and intent of monitoring, as well as data and information needed. This guide does not provide more detailed information about the training. However, this guide recommends that at a minimum, training for the teams that will collect data and information can consist of:

1) Basic perspectives on disability,
2) Knowledge and basic concepts on the Convention on the Rights of Persons with disabilities,
3) Understanding monitoring instruments,
4) Data collection technique,
5) Interacting with persons with disabilities (disability ethics/Do's and Don'ts).
6) The importance of preparing a 'statement of willingness' or informed consent in disability data collection.

E. Data and Information Collection

The fifth step is to collect data and information based on predefined instruments. It is at this stage that interviews, surveys, as well as data collection and other secondary information begin. At the same time, data management processes such as inputs also begun to be prepared, so as to streamline monitoring implementation time.

Interviews were conducted with the parties who have been mapped based on the issue or rights sector, as well as selected indicators and questions. Meanwhile, the survey in monitoring the Rights of Persons with Disabilities compliance is primarily aimed at persons with disabilities to measure outcome indicators.

Apart from the primary data collected, monitoring the Rights of Persons with Disabilities compliance should be supported by secondary data which at least consists of the following information:

1) Policy documents (national and local) on the issue or rights sector being monitored, as well as related issue sectors, budget documents in the monitoring area, especially on the issue or rights sector being monitored,
2) Internal documents of service providers and or program implementers in the issue or rights sector being monitored, such as SOPs, internal regulations, and so on.
3) Administrative data such as service access data, complaint data,
4) Data tracking of print and or electronic media reports, as well as
5) Other secondary data needed according to the developed instrument.

F. Analyzing the Collected Data and Information

After all data and information, as well as supporting documents have been collected, the next sixth step is to conduct analysis. Following the indicator scheme for the Rights of Persons with Disabilities compliance, the analysis is generally divided into three main parts.

The first is an analysis of 'structure indicators'. In this section, the existence of regulations related to the sector of issues or rights being monitored is tested and compared with the norms of rights as regulated in the Convention on the Rights of Persons with Disabilities as well as available general comments. Some key questions such as:

1) Are there any CRPD norms that have not been interpreted in regulatory norms in the rights sector being monitored?
2) Are there sector norms being monitored that conflict with and are not yet in harmony with the CRPD?
3) Are the regulations in the monitored rights sector synchronized or are there still differences in interpreting the CRPD?

The result of the analysis in this section is a qualitative description that examines the suitability of policies in the issue or rights sector that is monitored with the appropriate articles in the CRPD, based on structure indicators.

The next section is to analyze the 'process indicators', which means looking at the data findings on the efforts being made by the state, according to the designated monitoring area, in carrying out the responsibility for complying with the Rights of Persons with Disabilities. The focus analyzed in this section are:

1) approach shift,
2) improved resource allocation and program outreach,
3) service improvement,
4) increased budget allocation,
5) reduction of forms of discrimination and violations of rights, and
6) reduction of inequity and inequality.

In this section of the 'process indicators' analysis, various approaches should be used to read and interpret the findings, including:

1) A social and rights-based model approach,
2) The twin-track approach, as well as
3) Aspects of the Persons with disabilities participation.

The next section is 'outcome analysis', or a description of the achievements of efforts to comply with certain rights sectors. This section should not be too complex, as it will elaborate more on quantitative data describing progress in the enjoyment of the rights sector being monitored and, if any, cases that can help explain how this situation occurred. This section, wherever possible, should also describe the level of inequality between persons with disabilities and non-persons with disabilities in the enjoyment of certain sectors of rights.

At this stage, the monitoring team should have been able to provide an overview of the situation of the Rights of Persons with Disabilities compliance in the rights sector being monitored, the efforts of the state in carrying out rights compliance along with other actors, as well as the firmness of the regulations that govern them.

G. Prepare Monitoring Report

The last part of the monitoring process is the preparation of the monitoring report. After six long steps of monitoring carried out, compiling the findings and analysis into a report that is easy to understand and capture the message is a very important part. From there, perhaps, the direction of change can be voiced which triggers a series of dialogues and planning for greater change. good. Guidelines and report formats are provided in the appendix [].

APPENDIXES

1. Knowledge Supplement
   A. Disability and Diversity of Meaning in Policy
   B. Meaning of Disability as a Right in the UNCRPD Convention
   C. General Comments
   D. Disability Medical Model
   E. Social Model of Disability
   F. Rights Model

2. List of questions per chapter

[1]
Knowledge Supplement

A. Disability and Diversity of Meaning in Policy

The Convention on the Rights of Persons with disabilities (CRPD) provides a new perspective and approach to persons with disabilities that focuses on a rights approach rather than charity.

CRPD places persons with disabilities as 'subjects' of rights like other human beings, treated equally and non-discriminatory, not objects as in the charity approach. In the Indonesian context, this change in approach is confirmed through the revision of the Law no. 8/2016 on Persons with Disabilities. The human rights perspective places every human being as having basic rights that are inherent from birth or starting their life, including for persons with disabilities. Persons with disabilities, as citizens, have certain conditions that distinguish them from other citizens, especially non-persons with disabilities. As a prerequisite for respecting, protecting, and complying with the Rights of Persons with Disabilities, including the elimination of all forms of discrimination, it is important to provide a comprehensive understanding of disability.

Referring to the main ideas of the Convention on the Rights of Persons with Disabilities ratified by the Government of Indonesia, the definition of persons with disabilities is people who have physical, mental, intellectual, or sensory limitations for a long period of time. Besides, when interacting with the environment and attitudes of the

community, they may encounter significant obstacles, which make it difficult for them to participate fully and effectively on the basis of equal rights.

The definition of persons with disabilities above has become a reference for many governments or countries—especially those that have ratified this convention. But the definition of a persons with disabilities (in the convention) is not the only way of defining it nor is it the only naming that absolutely becomes a reference for every country. In fact, there are various names and definitions related to this. For example, persons with disabilities (United States), disabled people (UK), persons with disabilities or *Orang Kelainan Upaya* (Malaysia),Persons with Disabilities or *Penyandang Disabilitas* (Indonesia), and others.

In the definition above, the main emphasis is first placed on the word 'impairment' or 'body condition after illness' which can mean a condition of the body, mental and mind that is dysfunctional in the long term, substantial and can even worsen.

In Indonesia, naming and other definitions related to disability are accommodated, especially in the context of the disability movement or the movement of persons with disabilities. Disability for the movement of persons with disabilities is defined as an 'ability' that experiences barriers to development and maximum functioning caused by the absence or weakness of environmental support or social design in which these abilities exist and can be functioned optimally. Persons with disabilities, or in the context of regulations in Indonesia are called *penyandang disabilitas (*persons with disabilities) or in the movement context, they are called *difabel* or diffable, are people who have the ability but experience a "biomedical stigmatization" condition. Thus, their abilities are not recognized and are not identified as inherent in them.

For example, people with visual disabilities (also known as people with visual sensory disabilities, or people who do not see/blind/low vision-difficulty seeing clearly, or visual impairments) have the ability to read or write in Braille or use screen reader applications or laptop screen readers, and cell phones, and recognize the terrain in motion by using the white cane and echolocation methods.

Blindness makes a person use other ways of doing things, such as walking with a white cane—with all the techniques learned through Orientation and Mobilization (OM) techniques. Sign language users, such as people who are born deaf or hard of hearing or hard of speech also have different ways of communicating and developing Deaf knowledge and art.

Likewise, users of wheelchairs and various mobility aids, activities and social participation also have their own unique ways and are influenced by the assistive devices that have become part of them. As long as the design of infrastructure, architecture, manufacturing, and the design of education or art as well as other social designs do not accommodate this diversity of abilities, that's when a person experiences unfair treatment which is called an incapacity condition or also called a disability.

So, disability in terms of the persons with disabilities movement does not refer to aspects of a person's body medically where the physical and sensory organs experience dysfunction, but to aspects outside the body that cause disability—weakening ability.

However, returning to the context of the UNCRPD definition of 'disability' which has been accepted by many countries, "Disability is an evolving concept and disability is the result of the interaction between 'persons with disabilities' and 'attitudes and environments that hinder their full and effective participation' in society on an equal basis with others."

Disability is a condition of the relationship between 'persons with impairment' and society that ignores or marginalizes them (UPIAS, 1976, pp. 3-4). The neglect of society is part of social pressure or 'oppression'. This notion later became the ideological basis of the UPIAS (Union of the Physically Impaired Against Segregation) disability movement as in their slogan "disabled by society, not by our bodies". (Oliver, 1990, Thomas, 1999, p. 14).

When referring to the definition of Disability which was developed and used in France, the meaning of disability [situation] is placed in a clear 'political language'. Kumari Fiona Campbell, quoting Hamonet states that "...disability is a confrontation between a person's ability [condition] and the situation s/he faces in her/his life both at the macro

level (such as school, work, sports, etc.) typing with a braille computer, etc.). This disability situation does not only take place structurally, materially but also (especially) based on culture (Hamonet, 2006, p. 1, quoted from Campbell, FK (2009). Contours of ableism: The production of disability and abledness. New York: Palgrave Macmillan).

In the disability policy in Indonesia, persons with disabilities are defined as any person who experiences physical, intellectual, mental, and/or sensory limitations in the long term who in interacting with the environment can experience obstacles and difficulties to participate fully and effectively with other citizens based on equality rights (Law on Persons with Disabilities, 2016).

The effort to comply with the rights of persons with disabilities has actually been regulated in the constitution of the Republic of Indonesia (UUD 1945) and was later strengthened by various laws in the early days of the Republic and was further refined, especially after the government ratified the Convention on the Rights of Persons with Disabilities through Law no. 19 of 2011, and the Law on Persons with Disabilities (2016) along with technical regulations that support it, such as Government Regulations, Presidential Regulations, Ministerial Regulations, Local regulations, District Head Regulations, Mayor or Governor Regulation.

In Indonesia, many terms or 'disability neologisms' referring to people who have organ dysfunction or mental conditions have been made and legalized using the term, which until now is referred to as "persons with disabilities". The term Persons with Disabilities is an improvement from the old term that was considered wrong in embedding persons with disabilities, namely the term '*penyandang cacat*' (persons with impairment) and long before they were called '*penderita cacat*' (sufferer of impairment). However, because a number of these terms are considered negative for many Persons with disabilities and have a negative effect on their social life, the label and the accompanying stereotypical expressions are constantly being revised.

Until now, there have been many new terms that are considered to be more respectful of the dignity of persons with disabilities. Some such words are *tuli* (deaf) as a substitute for the term *tuna rungu* (not having ability to listen), persons with disabilities replace the word

disabled (where previously used the phrase *penderita cacat* (sufferer of impairment), crazy to be people with mental disorders, children with special needs, people with sensory disabilities, people with physical disabilities, people with intellectual disabilities and so on. For more details, the following table present the neologisms.

Disability Neologisms in Indonesian Policy (1945 – 2018)

TERMS USED	REGULATIONS REGARDING DISABILITY AND DISABILITY ISSUES
• handicapped/disabled; Body defects; People are unable to work after a work accident; mental illness; disabled child; Physically and spiritually deficient: blind, deaf, mute, imbecile, or other 'physical or spiritual beings'; Civil servants experience 'physical and/or spiritual disabilities'; Sufferers of impairment • persons with impairments; persons with physical impairments; *Bina daksa*; Rehabilitation; Disabled sports; Defect	• Announcement X as the basis for the formation of the Central National Committee. • Law no. 33/1947 concerning Work Accidents • Law no. 4/1950 on the basics of education and teaching in schools • Law no. 12/1954 on 'Statement of the enactment of Law no. 4 of 1950 concerning the basics of education and teaching in schools throughout Indonesia' • Decree of the Minister of Education and Culture No. 2/SK/B/III dated March 13, 1962, the first State Extraordinary School was officially established in Indonesia. • Government Regulation Number 52 of 1954 concerning Provision of Impairment Allowances to Civil Servants.
• 'Orang yang terganggu/ kehilangan kemampuan mempertahankan hidupnya'; Pelayanan Kesejahteraan Untuk Penderita Cacat; Penyandang Ketunaan; Pelarangan pemasungan.	• UU No. 6 Tahun 1974 tentang Tugas-tugas Prinsipil terkait Kesejahteraan Sosial. (UU No. 11 tahun 2009 terkait Kesejahteraan Sosial di mana istilah 'karena kecacatan' digunakan). • UU No. 6 tahun 1974 melalui PP No. 36 tahun 1980 tentang Pelayanan Kesejahteraan Untuk Penderita Cacat (Ketunaan).

TERMS USED	REGULATIONS REGARDING DISABILITY AND DISABILITY ISSUES
• 'People who are disturbed/ lost the ability to sustain life'; Welfare Services for Persons with impairments; Persons with impairments; Prohibition of shackles.	• Law no. 6 of 1974 concerning Principal Duties related to Social Welfare. (Law No. 11 of 2009 concerning Social Welfare where the term 'due to impairment' is used). • UU no. 6 of 1974 through Government Regulation No. 36 of 1980 concerning Welfare Services for People with Impairment (Disabled).
• People With Mental Disorders; Children with impairments; Children who experience spiritual and or physical barriers that interfere with their normal growth and development'; Disabled children are entitled to special services; Blind; Special education; Extraordinary Elementary School; Deaf	• Minister of Home Affairs Number PEM.29/6/15 dated November 11, 1977 concerning the prohibition of carrying out deprivation of ODGJ (People with Mental Disorders). • Law no. 4/1979 concerning Child Welfare. • Gov. Regulation No. 36 of 1980 which regulates Welfare Services for persons with disabilities who are referred to as 'Sufferer of Impairment (Disabled)' (a derivative of Law No. 6 of 1974 concerning the principal tasks of social welfare). • Gov. Regulation No. 43 of 1998 concerning Efforts to Improve Social Welfare for People with Impairment. • Decree of the Minister of Education and Culture No. 0413 dated December 9, 1981, the government established a new school, namely the Special School for the Blind (SLB-A) for National Level in Jakarta.

TERMS USED	REGULATIONS REGARDING DISABILITY AND DISABILITY ISSUES
• Students with impairments; Persons with Abnormalities: physical and/or mental disorders and/or behavioral disorders; Physical abnormalities include: blind; deaf; physically disabled; Mental disorders include: mild mental retardation; medium *tuna grahita* (mental retardation); Behavioral disorders include *tuna laras* (emotional disturbances); Student disorders can also manifest as multiple disorders; persons with impairments; Emotional Disorders; Intellectual Impairment; Social Impairment; Persons with Impairment; physical disability	• Ministry Decree 002/U/1986 on Integrated Education (including the appointment of GPK (special teacher)). • In 1989, a new Law on the National Education System was issued and still regulates the question of 'Exceptional Education' for students with 'impairment'. • Gov. Regulation No. 72 of 1991 on Special Education. the term used is 'Persons with Abnormalities' or Abnormal (confirmation through Gov. Regulation No. 17 of 2010 concerning Governance and implementation of Education • Law no. 14 1992 concerning Road Traffic and Transportation was enacted (still using the term 'sufferer of impairment)—revised into Law no. 15/2009 about Aviation
• Persons with impartments (everyone who has physical and/or mental disorders, which can interfere or become obstacles and barriers for them to perform properly); people with physical impairment; People with mental impairment; People with physical and mental impairment; the degree of impairment (the degree of severity of a person's impairment); people with visual impairment; impairment.	• Law no. 4/1997 Persons with Impairments • Gov. Regulation Number 43 of 1998 concerning 'efforts to improve the social welfare of persons with impairment' • The President of the Republic of Indonesia, KH Abdurrahman Wahid dissolved the Ministry of Social Affairs [and the ministry of information] in his cabinet, 1999. • Minister of Public Works Regulation No. 30/PRT/M/2006 concerning Technical Guidelines for Facilities and Accessibility in Buildings and the Environment.

TERMS USED	REGULATIONS REGARDING DISABILITY AND DISABILITY ISSUES
	• Decree of the Minister of Transportation No. KM 71 of 1999 concerning Accessibility for persons with impairments and sick people to transportation facilities and infrastructure, • Ministerial Circular Letter of Bappenas No. 3064/M.PPN/05/2006 concerning Development Planning that provides accessibility for persons with disabilities. • Law Number 28 of 2002 concerning Buildings (related to physical accessibility), • Law Number 20 of 2003 concerning the National Education System (improved in 2009) (regarding the inclusive education system), • Law Number 40 of 2004 concerning the National Social Security System, • Law Number 11 of 2005 concerning Ratification of the International Covenant on Economic, Social and Cultural Rights (International Covenant on Economic, Social and Cultural Rights), • Law Number 12 of 2005 concerning Ratification of the International Covenant on Civil and Political Rights, Law Number 24 of 2007 concerning Disaster Management. • Gov. Regulation Number 16 of 2007 concerning the Implementation of Sports and • Gov. Regulation No. 17 of 2007 concerning the Organizing of Sports Weeks and Championships, • Gov. Regulation Number 56 of 2007 concerning Compensation and Disability Allowances for TNI Soldiers.

TERMS USED	REGULATIONS REGARDING DISABILITY AND DISABILITY ISSUES
• Persons with Disabilities (with various variants) • Persons with physical disabilities (disordered movement function); • Persons with intellectual disabilities (impaired thinking functions, intelligence below average); • People with mental disabilities (impaired function of thought, emotion, and behavior); and/or • Persons with sensory disabilities (impaired one of the functions of the five senses); • People with multiple disabilities **Specific terms are also regulated in Law no. 8 of 2016 (Explanation).** • Amputation, paralyzed or stiff, paraplegic, cerebral palsy (CP), due to stroke, due to leprosy, and small people (Persons with Physical Disabilities) • Slow learning, mental disabilities and Down syndrome (Intellectual Disabilities) • Psychosocial [schizophrenia, bipolar, depression, anxiety, and personality disorders] and developmental	• Law no. 19/2011 on Ratification of the International Convention on the Rights of Persons with Disabilities • Provincial Regulation No. 4 of 2012 concerning the Protection and the Rights of Persons with Disabilities Compliance, Yogyakarta Province. • 2015, BPS trialled disability census instrument (Washington Group) • Law no. 8 of 2016 concerning Persons with Disabilities • The years 2017 and 2018 were a period of activists with disabilities fighting for the government to immediately issue the regulations under the Law on Persons with Disabilities with at least 8 Government Regulation Drafts. Initially the government only formulated 1 Government Regulation Draft for all government obligations, but it was opposed by activists with disabilities from various regions. • Now (2021) there are 7 Government Regulations and 2 Presidential Regulations which are derivatives of the Law on Persons with Disabilities, namely: • Government Regulation Number 70 of 2019 concerning Planning, Implementation, and Evaluation of the Respect, Protection, and Compliance of the Rights of Persons with disabilities • Government Regulation Number 52 of 2019 concerning the Implementation of Social Welfare for Persons with disabilities. • Government Regulation Number 13 of 2020 concerning Adequate Accommodation for Students with Disabilities.

TERMS USED	REGULATIONS REGARDING DISABILITY AND DISABILITY ISSUES
disabilities that affect social interaction skills [autism and hyperactivity] (Mental Disabilities) • Blind, deaf, and/or speech disabilities (Persons with Sensory Disabilities) • Deaf-speech and deaf-blind disabilities (multiple or multiple disabilities) • Persons with "long term" disability (> 6 years and permanent)	• Gov. Regulation No. 39 of 2020 concerning Adequate Accommodation for Persons with disabilities in Judicial Processes. • Gov. Regulation No. 42 of 2020 concerning Accessibility to Housing, Public Services and Protection from Disasters for Persons with disabilities • Gov. Regulation No. 60 of 2020 concerning the Disability Service Unit in the Employment Sector • Gov. Regulation 75 of 2020 concerning Habilitation and Rehabilitation Services for Persons with disabilities • Presidential Regulation Number 67 of 2020 concerning Terms and Procedures for Giving Awards in Respect, Protection, and Compliance of the Rights of Persons with Disabilities. • Presidential Regulation No. 68 of 2020 concerning the National Commission for Disabilities (KND)
• Diffable (During this period, the term: Diffable has also emerged. Diffable is a term used in a number of regions in local regulations, especially on the island of Java).	• Regulation with the term disabled: Local regulation Number 11 of 2002 concerning Provision of Facilities in Public Buildings and the Environment for Diffable, Sleman District, Yogyakarta), • Local regulation No. 2 of 2008 concerning Equality with Disabilities in Surakarta, Klaten Local regulation No. 2 of 2011 concerning Equality of Independence and Welfare of Disabilities.

Data source: Ishak Salim, Keluar dari Hegemoni Pencacatan (Out of Disability Hegemony), 2020

B. The Meaning of Disability as a Right in the UNCRPD Convention

This convention contains the recognition of dignity and value and equal rights of persons with disabilities, namely persons who have physical, mental, intellectual or sensory "limitations" for a long period of time who in interacting with their environment and community behaviour [may] encounter significant obstacles. make it difficult to participate fully and effectively on the basis of equal rights. Therefore, the recognition that discrimination based on disability is a violation of the inherent dignity and value of every person.

The conditions of these 'difficult barriers' are very diverse and vary depending on the condition of the individual 'ability' of a person with a disability. There are persons with disabilities who have a number of abilities with assistive devices or skills to use that support their activities and these abilities are also closely related to the accessible environment and availability of appropriate accommodation in which they are active: at school or at work. On the other hand, there are persons with disabilities who have little or even very minimal individual abilities due to low or no access to assistive devices, access to education, access to assistance and so on and are even left behind in the development process delivered by the government.

Respect, protection, and compliance of the Rights of Persons with Disabilities must be based on the recognition of the legal capacity of persons with disabilities. Legal capacity can be seen from two aspects, namely the recognition of persons with disabilities as legal subjects or rights holders; and recognition of the legal competence of persons with disabilities or the ability to exercise their rights. As a human being, Persons with disabilities are legal subjects. Persons with disabilities can be declared legally incompetent based on a procedure and expert judgment. If a person with disabilities is declared legally incompetent, then there must be a support mechanism for the persons with disabilities so they can make decisions independently, not being taken over by someone else.

The **convention purpose** is to promote, protect, and ensure equal rights and fundamental freedoms for all Persons with disabilities, as well as respect for the dignity of persons with disabilities as an integral part. Each country is obliged to realize the rights contained in the Convention,

through adjustments to the legislation, law and administration of each country, including changing laws and regulations, customs and practices that discriminate against persons with disabilities, both women and children, ensuring the participation of persons with disabilities in all aspects of life such as education, health, work, politics, sports, arts and culture, as well as the use of technology, information and communication.

The rights of persons with disabilities include freedom from torture or other cruel, inhuman or degrading treatment, freedom from exploitation, violence and arbitrary treatment, and the right to have respect for their mental and physical integrity on an equal basis with others. This includes the right to obtain protection and social services in the context of independence, as well as in an emergency.

In the implementation of the Rights of Persons with Disabilities compliance, States parties (signatories to the convention) must appoint government agencies dealing with disability issues that are responsible for the implementation of this Convention, and establish a coordination mechanism at the government level to facilitate these actions. Furthermore, the state party is obliged to make a report on the implementation of this Convention 2 (two) years after the convention enters into force, and a subsequent report no later than every 4 (four) years or whenever requested by the Committee for the Monitoring of the Convention on the Rights of Disabilities through the Secretary-General of the United Nations.

The Committee for the Oversight of the Convention on the Rights of Disabilities discusses reports submitted by States parties and provides considerations on ways and means of increasing national capacity for the implementation of this Convention. The Committee also undertakes international cooperation and coordination with the International Human Rights Instruments Monitoring Committee and other United Nations agencies.

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C. General Comments

According to OHCHR, general comments are the interpretation of the United Nations Human Rights Treaty Body[5] on the provisions of human rights treaties and thematic issues. Accordingly, the purpose of general comments is to interpret and clarify substantive provisions, not only with regard to the reporting tasks of States parties but also when they are going to provide guidance and suggest approaches to the implementation of treaty provisions or thematic issues in question. However, the General Comments can also address broader, cross-sectoral issues, such as the role of national human rights institutions, the Rights of Persons with disabilities, violence against women and minority rights, etc (Stig Langvad, CRPD Committee member (2010-2018), and Marite Decker, Human Rights Adviser).

As a Human Rights Treaty Body, the Committee on the Rights of Persons with disabilities since its establishment has adopted 7 general comments to date. These general comments are intended as an extension and explanation of the rights in the CRPD Convention, explaining somewhat abstract rights with a more detailed meaning. In other words, the General Comments of the CRPD Committee are not legally binding instruments, but rather highly authoritative interpretations of individual human rights or the legal nature of the human rights obligations enshrined in the Convention. The CRPD General Comment provides an orientation for the practical implementation of the rights in the CRPD Convention and establishes a set of criteria for evaluating progress.

5 Treaty Bodies is a committee consisting of independent professionals who oversee the implementation process of human rights agreements (conventions) such as ICCPR, ICESCR, ICEAFRD, CEAFDW and CRPD etc. Each convention has its own body as is the UN-CRPD with the Committee on the Rights of Persons with Disabilities.

Their highly authoritative character under the provisions of the Convention is recognized in international law in Article 31 of the 1965 Vienna Convention on the Law of Treaties, stipulating those treaties require ongoing contextual interpretation. Through the ratification of the Convention, States accept that the Treaty Bodies play a key role in the interpretation of enshrined rights and therefore also in monitoring their proper implementation in individual countries.

Referring to the General comments, as an authoritative interpretation of the rights of the Convention, arguments in lawsuits or complaints must be recognized by States as part of their obligations stemming from the CRPD Convention. As outlined in several of the CRPD General Comments, countries should establish a grievance mechanism that will enable this process to be facilitated. Policy makers, whether at the political or administrative level, have a duty to enforce to respect, protect and comply the rights of the Convention and which automatically includes interpretation by the treaty body of these rights, i.e., the General Comment.

However, due to the fact that international human rights law does not have an enforcement mechanism of its own, whether states parties ultimately respect, protect and comply the rights of the Convention, including the relevant general comments, will depend on the commitment to human rights in their respective countries. It is clear that using general commentary in lawsuits and complaints is likely to lead not only to increased awareness of the right itself but also to better implementation. (https://www.ohchr.org/en/hrbodies/pages/tbgeneralcomments.aspx).

D. Disability Medical Model

In understanding the relationship between impairment (dysfunction/limitation/body condition) and disability there are various approaches or models of disability. This view leads us to understand the reality of the lives of persons with disabilities. Here we describe three models of disability: the medical model of disability, the social model of disability and the disability rights model.

The Disability Medical Model is the model that conducts the most studies and the results influence the perspectives of various

parties regarding disability. The medical model sees the condition of 'impairment' or the condition of a person's body as a consequence of 'deviation' or damage to his 'normal' body function, not and does not even consider social aspects—for example the consequences of medicalization of persons with disabilities in their social life.

The medical perspective emphasizes that disability is related to a person's 'biological' or 'physiological' function (Silvers, 1998). Based on that perspective, the medical perspective classifies disability (or a person with a disability) wholly related to the individual's body—for example blind, deaf, cerebral palsy, spinal cord injury, polio, schizophrenia, autism, etc., such as the social aspect of a person being labeled slanted (stereotype) as 'sick', 'crazy', 'special needs', sufferers, and so on.

This perspective is also commonly referred to as a conservative perspective, where experts view that problems caused by 'disability' are considered to be and originate within the individual and independent of the social context, or simply identify persons with disabilities as biological problems (organs).

The problematization of disability as a medical problem aims to find solutions to the problems of bodily, mental and intellectual dysfunction of persons with disabilities—in this case, they are placed as patients. The goal is to find medical drugs and discover or modify health technologies to cure the "sickness" (Switzer, 2003) and rehabilitate the "impairment".

In linking this medical view with development practice, development actors consisting of policy makers, professionals, scientists and practitioners—who carry the medical model create various techniques for measuring a person's quality of life. To prepare the instrument, the focus was on "how to define and describe a person's disease/s, classify the pathology he or she has, and even provide discourse about the individual affected" (Huber & Gillaspy, 1998, p. 201). Medical perspective then compiled a lot of terminology and classifications of 'disability' along with the implications of that disability with the condition of their ability in daily activities.

As a mainstream approach, the medical perspective in observing 'disability' cannot be separated from criticism from other perspectives, especially from social scientists. One of the critics is Prof. Saad Nagi from Egypt who has served at 'Ohio State University' in the United States since

the 1950s. Prof. Nagi is a sociologist who studies Disability issues and Social Movements. Nagi's thinking that incorporates a social perspective in disability studies underlies the birth of the 'social model of disability' approach.

Based on a social perspective, within a decade Nagi (60 – 70's) developed an instrument for measuring disability which was later called 'The Nagi Scale Functionality'. The model developed by Nagi changed the perspective of the government and many Americans regarding disability and began to be used when the United States Government wanted to regulate policies on disability beginning in 1986. Then after being accepted, Nagi's theory finally underlies the regulation of The American with Disability Act (ADA) which was passed in 1990.

Table 2
Nagi Models (1956)

Istilah	Definisi
Pathology	Interruption in Body Process
Impairment	Anatomical or Physiological abnormalities and losses.
Functional Limitation	Restrictions on ability to perform normal role tasks and obligations
Disability	Pattern of Behavior

Source: Encyclopedia of Disability, Gary L. Albrecht [ed], 2006

Nagi's conception states that 'a person's limitations are not based on an impairment or medical disorder, but on a lack of adaptation in one's social environment.

Nagi's idea also influenced WHO to improve the instrument for measuring disability by starting to incorporate this social perspective. WHO commissioned Philip Wood, Elizabeth Badley, and Michael Bury to develop the instrument which was later named ICIDH-1 or (International Classification of Impairment, Disability, and Handicap) which was published in 1980 and was revised in 2001. This revision changed the term ' Handicap' became ICIDH-2's 'Health' which was criticized as an inappropriate term because it was considered as a form of incompetence or only able to beg for 'cap in hand'. (Shakespeare, 'models' in Encyclopedia of Disability, 2006, p.1105).

Along with the development of time and experience in applying this concept and terminology of disability in the realm of development policies and programs, as well as social criticism of the medical approach, efforts to improve the concept are still being carried out.

Table 3
ICIDH Models (1980)

Istilah	Definisi
Impairment	Loss or abnormality of psychological, physiological, or anatomical structure of function
Disability	Restriction or lack of ability caused by impairment
Handicap	Disadvantage for an individual in fulfiling appropriate roles

Source: processed from the Encyclopedia of Disability, Gary L. Albrecht [ed], 2006

IOM in 1997 and WHO in 2001 gave rise to new domains in an effort to understand human 'health conditions', namely the domains of 'environmental factors' and 'personal factors'. What was previously called impairment turns into body structure and function (level 1 [organ]). At level 2 (person) previously referred to functional limitations as 'activity capabilities'. Then, what is called 'disability' or 'handicap' is now understood as 'capability to participate' in the form of activities in the public/social sphere. This concept is called the International Classification of Functioning for Disability and Health (ICF).

Table 4
Perbandingan IOM dan WHO

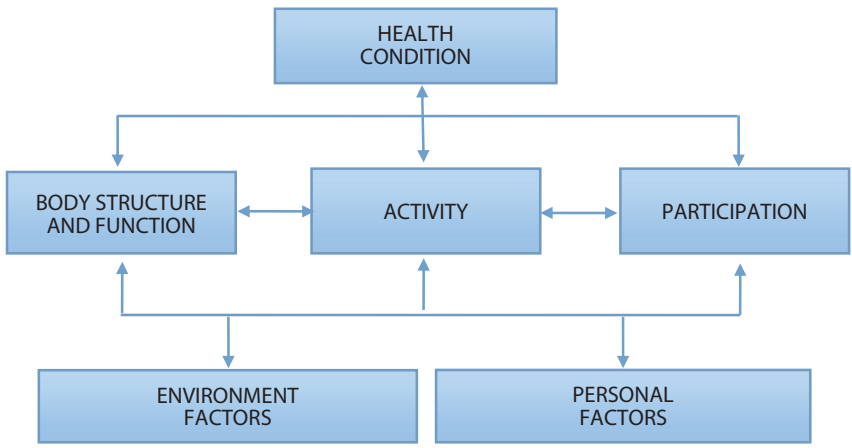
Level	IOM	WHO ICIDH-1 (ICIDH-2)	WHO (ICF)
Organ	Patologi/Impairment	Patologi/ Impairment)	Body structure and function
Personal	Functional limitations due to impairment conditions.	Disability	Activity Ability
Social	Disability	Handicap (Health)	Participation Ability

Source: processed from the Encyclopedia of Disability, Gary L. Albrecht [ed], 2006

The concept of Functioning in this instrument is strongly influenced by Amartya Sen's thoughts regarding Capabilities. Sen's conception of capability has even influenced the way the United Nations measures the quality of human development which is widely adopted throughout the world.

How the three conditions: body, activity, and participation work depend very much on how environmental factors such as knowledge systems, religious teachings, paradigms, and so on and one's personality factors related to age, gender, sexual orientation, personality and so on, treat a person.

Chart 4
ICF Disability Model



Source: WHO's International Classification of Functioning (ICF)

If one uses the WHO conception above where the health aspect is still one part in understanding the life of a disability, then the description of disability is more or less as follows.

The function and structure of the body of persons with disabilities includes the types of impairments or disorders of bodily and mental functions. For example, someone has just had an arm or leg amputation surgery. Then, when s/he is about to move, we will see from the aspect of his daily 'activity'. Aspects of this activity can include ways or methods of learning, how to eat, how to bathe, body care, and work at home and others. In this activity, Persons with disabilities need assistive devices such as crutches, prosthetic legs, or wheelchairs and of course a number

of designs that make it easier for them to do activities such as bathroom or toilet models, room door models, study desk models, and others related with the type of activity.

Another aspect is participation in the public sphere. The participation of Persons with disabilities includes the type and level of participation outside the home, how people then treat or accept it socially. For example, how s/he goes to the mosque or church to worship. How s/he gets to his office location when s/he wants to work, her/his office environment and treats her/his co-workers and of course office policies and so on with various types of participation, both economic participation, education, and politics. Afterward, pay attention to the environmental factors of persons with disabilities which include: environmental conditions, knowledge systems, culture, people's beliefs, and so on. While the Personal Factors of persons with disabilities will include factors of age, gender, sexual orientation, outlook on life, background knowledge and experience and so on.

Currently, the ICF approach to disability is undergoing a "globalization of ideas". The ICF was adopted by WHO and influenced a number of instruments for measuring disability welfare such as the World Health Survey 2002 – 2004. This survey is the largest multi-national household health and disability survey implemented by WHO. The survey was conducted in 70 countries, including Indonesia.

Recently, after the United Nations ratified the Convention on the Rights of Persons with disabilities and was ratified by the majority of UN members, efforts to globalize the measurement of disability began by the 'Washington Group (WG) on Disability Statistics' in preparing the 'disability statistics' instrument which is now beginning to be adopted by many countries (including Indonesia, which has started testing the instrument in Bekasi and Depok districts). BPS Indonesia is one of the 118 National Statistics Agencies that are members of this WG alliance. WG is part of the United Nations under the United Nations Statistical Commission.

E. Social Model of Disability

The INDIVIDUAL VIEW on disability in the Disability Medical Model has been criticized by disability activists/academics, particularly from the UK (the Union of Physically Impaired Against Segregation, UPIAS)

and the United States (the Disability Civil Rights/Independent Living Movement). Several academics/activists of the UPIAS movement for Persons with disabilities in the UK have generated the main ideas for the Persons with disabilities movement in the UK. Their ideas regarding disability—which are not based on impairment as in the medical model of disability—are stated in the UPIAS movement document. These ideas were developed by Vic Finkelstein (1980, 1981), Colin Barnes (1991) and Mike Oliver (1990, 1996). The UPIAS idea influenced disability policy in the UK and the disability movement in many countries, including Indonesia.

Disability is a condition of the relationship between 'persons with impairment' and society that ignores or marginalizes them (UPIAS, 1976, pp. 3-4). The neglect of society is part of social pressure or 'oppression'. This thought later became the ideological basis of the UPIAS disability movement as in their slogan "disabled by society, not by our bodies" (Oliver, 1990, Thomas, 1999, p. 14).

Disability, according to the 'Social Model of Disability' is the result of how a person's physical or mental characteristics affect their functioning in an environment and the expectations for their capacity-functioning efforts (Silvers 1998, 2000). The function in question is, for example, that although a person is blind, it does not mean that s/he is sick and cannot communicate properly. A visually impaired person will still be able to function with the support of communication facilities or tools, such as with a 'voice' laptop that has the JAWS program (screen reader) and with the support of DAMAYANTI software (for voice with Indonesian dialect).

Table 5
Social Models (1982)

Term	Definition
Impairment	Functional Limitation within an individual caused by physical, mental, or sensory impairment
Disability	Loss or Limitation of opportunities to participate in the normal life of the community on an equal level due to physical and social barriers

Source: processed from the Encyclopedia of Disability, Gary L. Albrecht [ed], 2006

In stark contrast to the individual-medical perspective, the social perspective views a person's disability (and not her/his body) more as a result of external factors imposed on a person than just the biological function of the persons with disability. The social perspective allows us to look at disability as an effect of the [external] environment that does not accommodate certain body shapes and conditions and nothing else, [and therefore] persons with disabilities need more progress in social justice and not [simply] medical progress (Siebers, 2001, p. 738). Beliefs and social functions that marginalize and weaken the role of persons with disabilities can be seen as obstacles to living fully depending on their ability [type]. So, in the perspective of the disability movement that carries this social model, it doesn't make the 'impairment' condition a problem, but rather on the social aspect that doesn't adjust to a person's impairment condition.

The social perspective states that understanding the social construction oppressing persons with disabilities so far must be used to reduce the various 'disadvantages' that have been created by the 'society view' that it is the individual who is unable to do so due to 'disorders of bodily and mental functions'. The social order must be changed through improving the perspective of disability to ensure the creation of accessibility and equality of social, political, economic, cultural and so on for all people (Silvers, 1998).

This social approach is growing rapidly and prominently, or at least most often discussed in the discussion about 'social classification of disability', especially by social movement/disability movement activists. In Indonesia, Mansour Fakih (academic/activist), Setyo Adi Purwanta (disabled movement activist) and subsequent generations of academics/disability activists such as Ro'fah, Suharto, Joni Yulianto, Slamet Thohari, Bahrul Fuad, Hari Kuniawan, Purwanti, Antoni Tsaputra etc have focused on disability issues specifically from a social [and rights] perspective as very important.

In the study of the Social Model of Disability, stigma (in society) in many areas with various cultural backgrounds, has contributed to marginalizing Persons with disabilities in social and political processes (see Riddell, 1996, p. 86). This perspective views disability as a direct creation of social exclusion or neglect through acts of 'labeling',

'stereotyping' 'segregating' and 'discriminating' either through legal, policy, as well as social standards or norms.

F. Rights Model

Academics, professionals, movement activists, policy makers, working in the field of disability and embracing the 'human rights model' are influenced by the spirit of the 1948 Human Rights Declaration. Their activities are getting stronger along with the struggle for civil rights, women (feminism), and child rights. A number of international conventions ratified by the United Nations Agency such United Nations - International Covenant on Economic, Social and Cultural Rights, 1976 and several conventions indicate a shift in improving the quality of humanity.

Previously, the principle of the needs-based approach was the basis for development, then the approach was strengthened again with the right-based approach. Discrimination as one of the roots of the decline in the quality of human life can be considered as a violation of the rights of individuals/persons with disabilities or as a crime.

In some countries, efforts to enforce the Rights of Persons with disabilities are regulated in a law-level regulation. In the United States, the Disability Rights Movement has succeeded in encouraging the government to draft and pass the American Disability Act (ADA). Five years later, in the UK, the government issued the Discrimination Disability Act in 1995 and then it was amended twice, in 2000 and 2010 to become the Equality Act 2010.

The beginning of the spread of disability issues globally began in the 1980s when the United Nations designated 1981 as the year of Persons with Disability—now every December 3 is celebrated as International Day of Persons with disabilities. The following year, 1982, the United Nations published the United Nations - World Program of Action Concerning Disabled Persons (www.independentliving.org/files/WPACDP.pdf, accessed January 2018) which aims to promote effective measures of disability prevention, rehabilitation and realization of the goals of ''full participation' and equality of Persons with disabilities in social life and development.

In the 1990s, the issue of disability was on the UN agenda. Efforts to encourage the Rights of Persons with disabilities to be regulated in the convention were continuously pursued. Entering 2006, the UN finally approved the CRPD. The CRPD was later approved by 172 UN member states (until 2018), including Indonesia which ratified the Convention in 2011.

Since then, the Disability Rights-based approach has become a strong foundation for academics and social movement activists. To strengthen the regulatory documents related to the enactment, activists of the movement of persons with disabilities from various organizations prepared academic texts and draft laws related to persons with disabilities as well as replacing the Law on Persons with Impairments (1997) which had individual and medical models—although in reality, the shadow of medicalization still remained in several articles, such as the categorization of impairment and the absence of an operational definition of 'disability'.

"Disability as an evolving concept and disability is the result of the interaction between 'persons with impairments' and 'attitudes and environments that hinder their full and effective participation' in society on an equal basis with others."

In addition to affirming the Rights of Persons with Disabilities, the CRPD also recognizes that persons with disabilities have diversity based on their physical condition and the types of social barriers they face.

In fact, this human rights perspective has indeed recognized equality for persons with disabilities in all sectors of their livelihood. The human rights of persons with disabilities as stipulated in the CRPD are also seen as one of the most innovative and extensive human rights instruments (United Nations. Convention on the Rights of Persons with Disabilities. New York, NY: United Nations; 2007).

Inclusiveness is also a hallmark of this model of the Rights of Persons with Disabilities. Inclusivity is especially emphasized on aspects of human development associated with the capabilities approach of Amartya Sen and Martha Nussbaum (see also, Baylies C. Disability and the notion of human development: questions of rights and capabilities, Disability & Society Vol. 17, Iss. 7, 2002). One of the criticisms raised by activists of the disability movement is that it does not accommodate

the involvement of persons with disabilities as targets for human development in the Millennium Development Goals (MDGs).[6] Now, thanks to continuous encouragement, activists of the movement for Persons with disabilities have succeeded in including the interests of persons with disabilities in the achievement of the Sustainable Development Goals (SDGs)—especially in 13 of the 17 targeted SDGs.

However, the rights in Law no. 19/2009 (UN-CRPD Ratification) have not been fully fulfiled since more than a decade of its ratification. Recognition of the rights of persons with disabilities as outlined in the regulation does not automatically enjoy these rights. The medical perspective still has a strong influence on the minds of people who are in the public interest. Persons with disabilities still experience inequity and even discrimination.

[6] See, United Nations, "Disability and the Millennium Development Goals: A Review of the MDG Process and Strategies for Inclusion of Disability Issues in Millennium Development Goal Efforts" (2011). Can be read at: http://www.un.org/disabilities/documents/review_of_disability_and_the_mdgs.pdf.

[2]
Question Guide by Article

Article	Indicator	Question Narrative
Article 1 - 4 General Obligations	Structure	• [RELATED TO GENERAL OBLIGATIONS, ESPECIALLY ON HARMONIZATION AND SYNCHRONIZATION, STRUCTURE INDICATORS] What policies, in the regions, have used the concept of disability or the term Persons with Disabilities after the establishment of the UN convention on the Rights of Persons with Disabilities 2011 and the enactment of the 2016 Persons with Disabilities Law? • Provincial Regulation, specify; District/ City Local regulation, mention; Village Regulation, specify. • Are there still policies in the regions, are there still those that use the concept of disability or disability or other terms that are not in accordance with the concept of disability? • Provincial Regulation, specify; Regency/ City Local regulation, mention; Village Regulations, state:

Article	Indicator	Question Narrative
	Process	• [RELATED TO GENERAL OBLIGATIONS, ESPECIALLY ON HARMONIZATION AND SYNCHRONIZATION, PROCESS INDICATORS] Are there any documents that are used as guidelines for implementing inclusion or compliance of disability rights, at: • Ministries/Institutions? • Local government organization or local government? • Are there any references in the form of documents or good practice examples? • Any documents or examples of good practice. • Are there documents that are used as guidelines for mainstreaming disability in laws and regulations? • Are there any references in the form of documents or good practice examples? • Mention good practice documents or examples! • Are there human resources who understand disability mainstreaming in policies and programs? • Is the distribution of human resources evenly distributed? • Are there any documents/strategies to improve human resources who understand disability mainstreaming? • Is there a budget to run disability mainstreaming programs? • How much budget is allocated for disability mainstreaming? • Give an example in one ministry/agency, certain offices in certain districts/cities. • [RELATED TO GENERAL OBLIGATIONS, ESPECIALLY ON HARMONIZATION AND SYNCHRONIZATION, OUTCOME INDICATORS] Are there laws and regulations that are in line with Law No. 19 of 2011 and Law No. 8 of 2016?

Article	Indicator	Question Narrative
	Outcome	• Has the use of disability nomenclature in the legislation mainstreamed disability issues? • Have the government and local governments used disability budgeting nomenclature in program regulatory documents? For example, at the ministry level, one example is the Village Ministry or the Ministry of Home Affairs regarding village development budgeting priorities related to disability/inclusion.
Article 5 Equality and Non-Discrimination	Structure	• [RELATED TO EQUALITY AND NON-DISCRIMINATION, STRUCTURE INDICATORS], Are there still laws and regulations that discriminate against persons with disabilities? Give an example. • Are there special laws and regulations (lex specialist) to eliminate discrimination against persons with disabilities? • Are there regulations for the establishment of an independent institution, which functions to receive and follow up on complaints of discriminatory actions against persons with disabilities in the government and local governments?
	Process	• [RELATED TO EQUALITY AND NON-DISCRIMINATION, PROCESS INDICATORS] Is there a study on evaluating discriminatory laws and regulations against persons with disabilities? Explain? • Is there a mechanism for evaluating discriminatory laws and regulations against persons with disabilities? Be more specific and give an example? • Has there been any socialization related to the evaluation mechanism of laws and regulations that are not discriminatory towards persons with disabilities? Explain why?

Article	Indicator	Question Narrative
		• Is there a plan for the formation of legislation that is anti-discriminatory against persons with disabilities? Explain? • Is there any involvement of persons with disabilities in the formation of anti-discriminatory legislation against persons with disabilities? Explain who is involved and what is the process and form of participation? • Is there a mechanism related to the process of submitting complaints, for forms of discrimination against the condition of persons with disabilities? • Is there any socialization regarding the mechanism for submitting complaints regarding forms of discrimination against the condition of persons with disabilities? • If so, is the mechanism for handling cases of discrimination against disability accessible, transparent, and accountable?
	Outcome	• [RELATED TO EQUALITY AND NON-DISCRIMINATION, OUTCOME INDICATORS] How many discriminatory and non-discriminatory laws and regulations against persons with disabilities were found through the evaluation monitoring mechanism? • What kind of evaluation data is generated from the mechanism? • Can disability involvement and participation produce anti-discriminatory legislation drafts against persons with disabilities? • Are the guidelines for the mechanism for reporting the performance of independent institutions accessible, transparent and accountable? • Has the performance data of independent institutions been disseminated in an accessible, transparent and accountable manner?

Article	Indicator	Question Narrative
		• Is there data on monitoring and evaluation of the performance of independent institutions at the central and regional levels? • If so, what are the evaluation results obtained from the monitoring and evaluation mechanism? • Is there data on complaints and follow-up on cases of discrimination against persons with disabilities? • If so, what is the implementation process of the follow-up mechanism that has been implemented? • How many persons with disabilities can access the mechanism?
Article 6 Women with Disabilities	Structure	• [RELATED TO WOMEN WITH DISABILITIES, STRUCTURE INDICATORS], According to you, are there any guidelines that can be used by the government/regional governments to formulate policies that mainstream women and disabilities? • Have current public policies mainstreamed disability and women? If yes/no, please explain further? • Are there human resources who master the issues of women and disability in the implementation of RAN/RAD (if any, especially in the national/regional government)? • Do existing policies regulate the participation of women with disabilities? If so, give an example, in what field and in what form the participation was.
	Process	• [Regarding WOMEN WITH DISABILITY, PROCESS INDICATORS] Are there programs or activities to collect data on women with disabilities using disaggregated data?

Article	Indicator	Question Narrative
		• If so, does the data collection use an instrument with disaggregated data on women with disabilities related to age, education, potential, etc.? (e.g., using the Washington Group format) • Is there an education curriculum that mainstreams issues of disability and gender? • Are there programs that provide protection for women? If so, what kind of program? • Is there a budget allocation for the protection of women with disabilities who experience violence, neglect, and/or discrimination? • Is the implementation of Permen KPPPA No. 23/2010 on guidelines for establishing an Information and Consultation Center for Women with Disabilities (PIK PPD) and ensuring that P2TP2A services have effective PIK PPD? • Is there an implementation mechanism and technical guidelines for policies (Health Law, Gov. Regulation on Reproductive Health) regarding abortion for women victims of rape? • How is the implementation of the Maternity Insurance/*Jampersal* program for reproductive health rights and contraceptive installation? • What are the results of the evaluation of the implementation of the *Jampersal* program for reproductive health rights and contraceptive installation? • Has the issue of women and children with disabilities been included in development planning from village to national level? • Is the implementation of Regulation No. 3 of 2017 concerning women dealing with the law going well?

Article	Indicator	Question Narrative
		• Is there a budget available for the protection of women with disabilities who experience violence, neglect and/or discrimination? • If so, how much? • How many women with disabilities have access to the fund? • Is the issue of women and children with disabilities included in development planning from village to national? • Has there been an analysis of Regulation No. 3 of 2017 concerning women in conflict with the law? • If so, what are the results of the analysis of Ministerial Regulation No. 3 of 2017 concerning women in conflict with the law? • Is there a budget for women with disabilities who experience violence, neglect and/or discrimination? • If so, how many women with disabilities can access the budget? • How is the implementation of the program based on the budget? • Can women with disabilities who experience violence, neglect and/or discrimination have easy access to the program? • Is the issue of women and children with disabilities included in development planning from village to national?
	Outcome	• [Regarding WOMEN WITH DISABILITIES, OUTCOME INDICATORS], do the data collection mechanisms and instruments produce disaggregated data on women with disabilities according to age, education, potential, etc.? • Apakah mekanisme dan instrumen pendataan menghasilkan data terpilah pada perempuan dengan disabilitas sesuai dengan usia, pendidikan, potensi, dll?

Article	Indicator	Question Narrative
		• Do the data collection mechanisms and instruments produce disaggregated data on women with disabilities according to age, education, potential, etc.? • Does the current pre-service education and training curriculum mainstream gender and disability issues? • Have public service SOPs mainstreamed gender and disability issues? • If so, how is the implementation of the SOPs? • Are there programs and budgets for the assistance and recovery of women with disabilities • Have there been operational guidelines and technical guidelines on abortion for women victims of rape? • If so, have the technical and operational guidelines mainstreamed the issue of disability? • How many women with disabilities who become pregnant as a result of rape victims are served and receive justice with the technical guidelines? • What are the support and recovery strategies for pregnant women who are rape victims and their children? • Is there P2TP2A in every province and district/city in Indonesia? • Have there been operational guidelines and technical guidelines on abortion for women victims of rape? • If so, have the technical and operational guidelines mainstreamed the issue of disability? • What are the results of the evaluation report on the implementation of the *Jampersal* program for reproductive health rights and contraceptive installation?

Article	Indicator	Question Narrative
		• Has sectoral planning included the issue of women and children with disabilities in village development planning to the national level? • Are persons with disabilities involved in village development planning to the national level that mainstreams the issue of women and children with disabilities in village development planning to the national level? • Have there been results of Ministry Regulation Analysis and implementation of Regulation No. 3 of 2017 concerning women in conflict with the law? • If so, what are the results of the Ministry Regulation Analysis and the implementation of Regulation No. 3 of 2017 concerning women dealing with the law? • Have there been any recommendations and handling in accordance with the results of budget analysis and programs for women who have experienced violence, neglect and/or discrimination? • If so, what are the recommendations? • Is the handling of women who experience violence, neglect and/or discrimination in accordance with the needs and conditions of the victims? • Has sectoral planning included the issue of women and children with disabilities in village development planning to the national level? • Are persons with disabilities involved in village development planning to the national level that mainstreams the issue of women and children with disabilities in village development planning to the national level? • Is there data for family assistants and children's institutions that receive counseling services? • How many family assistants and children's institutions receive counseling services?

Article	Indicator	Question Narrative
		• Is there any data on parents who have or are pregnant with children with disabilities who receive counseling services? • How many parents who have or are pregnant with children with disabilities receive counseling services? • Is there any data on the implementation of counseling services? • How is the implementation of the counseling service? • Are the counseling services easily accessible to persons with disabilities?
Article 7 Children with Disabilities	Structure	• [Regarding CHILDREN WITH DISABILITY, STRUCTURE INDICATORS], according to you, are there still policies at the central and regional levels that discriminate against children with disabilities? • Are there regulations that protect the interests of children with disabilities? • Have children with disabilities and their organizations had the opportunity to participate in disability rights compliance programs in this area? If so, what is the name of the organization and provide an explanation in what sector and what form of participation it takes. • Are there regulations regarding counseling services for children with disabilities? If so, give an example.
	Process	• [Regarding CHILDREN WITH DISABILITIES, PROCESS INDICATORS], is there a consistent policy review on the protection of children with disabilities? • Do you have operational guidelines and technical guidelines for the implementation of policies for the protection of children with disabilities? • Has the process of placing children with disabilities through a community-based rehabilitation scheme (RBM) prioritized the role of the community?

Article	Indicator	Question Narrative
	Outcome	• [Regarding CHILDREN WITH DISABILITIES, OUTCOME INDICATORS], do the data collection mechanisms and instruments produce disaggregated data on children with disabilities including various disabilities, multiple disabilities? • Has there been an analysis of safeguard policies? • What are the recommendations from the results of the analysis? • Have the technical guidelines and technical guidelines for the implementation of policies on protecting children with disabilities mainstreamed the issue of children with disabilities? • Are community-based service programs inclusive for children with disabilities? • How many children with disabilities have been served by an inclusive community-based rehabilitation program? • How many children attend and participate in the forum? • What is the form of children's participation in the forum? • How many children attend and participate in the forum? • What is the form of children's participation in the forum?
Article 8 Awareness Raising	Structure	• [Regarding AWARENESS RAISING, STRUCTURE INDICATORS], are there still laws and regulations that do not guarantee the human rights and dignity of persons with disabilities? • Law/Regulation, please state: • Government Regulation, specify: • Presidential Regulation, state: • Provincial Regulation, state: • District /City Local regulation, please specify • Village Regulations, state:

Article	Indicator	Question Narrative
		• Are there still laws and regulations that do not recognize the ability of persons with disabilities to be promoted at all levels of society and in all areas of life? If there is, explain? • Is there still a concept of disability in the latest regulations or policies, what is the cause?
	Process	• [RELATED TO INCREASING AWARENESS, PROCESS INDICATORS] Has RANHAM (Human Rights National Action Plan) ensured public awareness and mainstreaming of the recognition and respect for the human rights and dignity of Persons with disabilities in every preparation of planning and implementation of development both at the National, Regional and Village levels: • RPJM? • RPJMD? • RPJMDes? • Do you think that in every preparation of development planning and implementation is appropriate—supporting the Rights of Persons with Disabilities compliance? • Does the description of the RANHAM programs involve Persons with Disabilities? • Does the description of the Regional RANHAM of SKPD programs involve Persons with disabilities? • How about the elaboration of Village Government Programs in the RPJMDesa, is it correct? • Do the RANHAM programs involve persons with disabilities in the description? • In the government, central or local, are there human resources who understand 'mainstreaming disability' in producing non-discriminatory information on disability?

Article	Indicator	Question Narrative
		• Among journalists, is there any journalistic training to increase the capacity of journalists on disability issues?
	Outcome	• [RELATED TO INCREASING AWARENESS, OUTCOME INDICATORS], are persons with disabilities involved in activities (starting from planning, budgeting, implementation, monitoring and evaluation) carried out by the central, regional and village governments in an effort to increase public awareness in recognizing and respecting human rights and dignity of persons with disabilities, implemented at all levels of society and in all sectors/fields of public services? • What is the role of disability in this engagement? • What are the impacts resulting from these activities? • How many Persons with disabilities and DPOs participate in the preparation of public policies, planning and implementation of development at the National, Provincial, City/District to rural areas? • What is the type of disability role in the engagement? • What are the impacts resulting from these activities? • Is there any data related to disability who has worked using disaggregated data (gender, variety of disability, latest education, ability, etc.)? • If so, how many persons with disabilities have worked in the government or the private sector? • Is there a curriculum in the education unit that mainstreams issues of recognition, respect and protection of human rights and the dignity of persons with disabilities?

Article	Indicator	Question Narrative
		• Is there any data on the implementation of counseling services? • How is the implementation of the counseling service going? • Are the counseling services easily accessible to persons with disabilities? • Are there still media that do not recognize and respect and even encourage the compliance of the human rights and dignity of Persons with disabilities? • Are there still media that use language that discriminates against disability when spreading news in the media?
Article 9 Accessibility	Structure	• [RELATED TO ACCESSIBILITY, STRUCTURE INDICATORS], is there a law or its derivatives such as the Government Regulation that explicitly and consistently regulates the obligation to provide physical and non-physical accessibility? Explain? • Are there guidelines for the accessibility of public facilities, institutions that are tasked and mandated to supervise, and allocate resources such as finance and other resources in order to ensure the implementation of physical and non-physical accessibility for all public facilities, whether managed by the government or non-government? • Are persons with disabilities involved in the drafting of the Law? • Has the government ratified the Marrakech Treaty? • If so, what are the next steps so far?
	Process	• [RELATED TO ACCESSIBILITY, PROCESS INDICATORS], have the accessibility guidelines been properly disseminated to all implementers, providers, and supervisors of buildings and public facilities?

Article	Indicator	Question Narrative
		• Are accessibility guidelines binding on implementers, providers, and supervisors of buildings and public facilities? • Have the accessibility guidelines become one of the requirements for the establishment of public buildings/public services (government or private) at the building permit granting institution (IMB)? • Is there a supervisory agency that consistently conducts monitoring along with monitoring data that periodically reports on the number of buildings/facilities that have met the accessibility standards? • Has there been a budget allocation that can be shown in the percentage allocated for the provision of accessibility, both for the renovation of physical facilities, as well as for new construction? • What is the percentage of the budget? • Which areas are still having difficulty accessing the budget? • Why? • Has there been a budget allocation for the promotion of the design and distribution of the latest communication information technology and systems that make it easier for persons with disabilities to access information and communication (budget nomenclature for accessibility)? • What is the percentage of the budget? • Which areas are still having difficulty accessing the budget? Why? • Is there a monitoring and evaluation system for public services, infrastructure, information and services? • Is there a prototype of accessible public facilities (for the case of cultural heritage buildings)? • Is there training on accessibility of service providers in public service institutions?

Article	Indicator	Question Narrative
	Outcome	• [RELATED TO ACCESSIBILITY, OUTCOME INDICATORS], is there any data that periodically conveys the percentage of public facilities and services that have met the accessibility standards (including the provision of reasonable accommodation services)? • If so, what is the percentage of public facilities and services that have met the accessibility standards? • How many SKPDs in the Local Government/ City Government have received and implemented circulars regarding the technical guidelines for accessible public services for persons with disabilities? • What are the impacts when the SKPD in the Local Government/City Government receives and implements a circular letter regarding the technical guidelines for accessible public services for Persons with disabilities? • How many modes of transportation do passengers with disabilities have access to? • How many persons with disabilities can access public facilities and services, including public and private transportation? • How many persons with disabilities are satisfied with public facilities and services including transportation provided by the government or the private sector? • How many persons with disabilities are satisfied with public facilities and services including transportation provided by the government or the private sector? • How many persons with disabilities participate and contribute to the monitoring system for the accessibility of public services? • What are the contributions made by persons with disabilities who participate in and contribute to the monitoring system for the accessibility of public services?

Article	Indicator	Question Narrative
		• If there is an effort, what is the form of advancing the design, development, production and distribution of the latest communication information technology and systems that make it easier for persons with disabilities to access information and communicate? • If so, how many cities/districts have declared themselves inclusive cities/districts? • What is the shape or form of the inclusive city/regency? • If so, how many new city/district development projects have adopted accessibility guidelines in the planning, implementation, monitoring and evaluation processes within a certain period of time? • What is the form of new city/district development projects that have adopted accessibility guidelines in the planning, implementation, monitoring and evaluation processes within a certain period of time? • If so, how many new development projects have been declared accessible for persons with disabilities? • What is the form of a new development project that is declared to be accessible for persons with disabilities? • What is the percentage of ULD that is built and running well in the city/region? • Are persons with disabilities involved in the process (planning, budgeting, implementation, monitoring and evaluation) of ULD development? • What are the contributions made by persons with disabilities who participate and contribute to the ULD development process? • How many trainings on accessibility of public services have been carried out at both government and private public service institutions?

Article	Indicator	Question Narrative
		• What is the follow-up plan and application of the training?
Article 10 Right to Life	Structure	• [RELATED RIGHT TO LIFE, STRUCTURE INDICATORS] According to you, is there any special law or regulation that guarantees the right to life for persons with disabilities? • Are there still laws or regulations under it that discriminate against or violate the right to life of persons with disabilities? For example, about abortion on the grounds of disability? Are there any other examples? • Are there legislative efforts to strengthen the protection of the right to life of persons with disabilities? If so in what form? Where? • Are there judicial efforts to strengthen the protection of the right to life of persons with disabilities? If so in what form? Where?
	Process	• [RELATED RIGHTS TO LIFE, PROCESS INDICATORS] is there any attempt to view/review the information provided to prospective mothers whose fetuses are detected to have impairment/disability (especially related to the code of ethics for doctors and/or medical professions)? • If so, what is the form of this effort, whether through counseling or providing understanding to families regarding early detection of disability? • If so, where was this effort made? • Is this effort carried out by certain doctors independently or through health service policies such as in the MSS or SOP format? • Are there any studies on this practice or policy? • Are there efforts to prevent premature death, including (in particular) people or patients with mental and intellectual disabilities such as abortion cases, prescribed drugs have a negative impact on mental of persons with disabilities?

Article	Indicator	Question Narrative
		• If so, where was the report or information known, whether through mass media, research reports, hospital reports? • Are there reports of premature deaths, including mental and intellectual disabilities occurring? • If so, where was the information known? Is the mass media, research reports, medical reports, or families concerned? • Is there an early detection system for disability related to practices and regulations or SOPs used by medical personnel to help pregnant women? • If there is a program carried out by the government, how is the practice carried out? When, where, and what are the implications for pregnant women? • Where does the government allocate budget resources to guarantee a person's right to life? Is it contained in the National/Regional/Village Budget? • If there is a program carried out by the government, how is the practice carried out? When where?
	Outcome	• [RELATED RIGHT TO LIFE, OUTCOME INDICATORS] If so, how many disability complaints have been filed for violations of the right to life? • If so, how many complaints of disability cases are subject to the death penalty? • If so, how many cases of disability died due to violation of the right to life by non-state actors and were not prosecuted?
Article 11 Risk situations and humanitarian emergencies	Structure	• [RELATED TO RISK SITUATIONS AND HUMANITARIAN EMERGENCY, STRUCTURE INDICATORS], is there any special law/regulation that guarantees the Protection and Safety of persons with disabilities in conditions of armed conflict? If so, give an example?

Article	Indicator	Question Narrative
		• Is there a special law/regulation that guarantees the Protection and Safety of persons with disabilities in conditions of social conflict? If so, give an example? • Has there been a special law/regulation that guarantees the Protection and Safety of persons with disabilities in the event of a natural disaster? If so, give an example? • Is there a special law/regulation that ensures emergency response, recovery, and post-disaster development that is accommodating to disability? If so, give an example? • Are there any special laws/regulations that ensure the participation of Persons with disabilities in disaster prevention, response, and recovery (mitigation and preparedness)? If so, give an example?
	Process	• [ON RISK SITUATIONS AND HUMANITARIAN EMERGENCY, PROCESS INDICATORS], are there SOPs or technical regulations or guidelines regarding the protection of persons with disabilities in situations of armed conflict? • Are there SOPs or technical rules or guidelines regarding the protection of persons with disabilities in natural disaster situations? • Is there a budget post that is sensitive to adaptation and adequate accommodation for persons with disabilities in dealing with natural disasters in the National/Provincial/District/City Budget? • Is there involvement of various disabilities in disaster risk reduction, mitigation and rehabilitation and post-natural disaster reconstruction programs starting from planning, implementation, and evaluation and supervision?

Article	Indicator	Question Narrative
		• Is there an institution that has the authority and has a supervisory function on the handling and protection of persons with disabilities in situations of natural disasters? • Is there a hazard map-making training program involving various disabilities in natural disaster-prone areas that includes identification of disability needs? • Are there SOPs or technical regulations or guidelines regarding the protection of persons with disabilities in social disaster situations? • Is there a budget post that is sensitive to adaptation and adequate accommodation for persons with disabilities in handling social conflicts in the National/Provincial/District/City Budget? • Are there prevention, mitigation and rehabilitation and reconstruction programs in handling social conflicts involving various disabilities, starting from planning, implementation, and evaluation and supervision? • Is there an institution that has the authority and has a supervisory function over the handling and protection of persons with disabilities in situations of social conflict? • Is there a hazard map-making training program that involves a variety of disabilities in areas prone to social conflict that includes identification of disability needs? • Is there an availability of a budget that is sensitive to adaptation and adequate accommodation for persons with disabilities in handling armed conflicts in the National/Provincial/District/City Budget? • Are there prevention, mitigation and rehabilitation and reconstruction programs in handling armed conflicts involving various disabilities, starting from planning, implementation, and evaluation and monitoring?

Article	Indicator	Question Narrative
		• Is there an institution that has the authority and has a supervisory function over the handling and protection of persons with disabilities in situations of armed conflict? • Is there a hazard map-making training program involving various disabilities in areas prone to armed conflict that includes identification of disability needs? • Is there a program to procure/produce hazard maps/data on disability with various disabilities in disaster-prone areas (natural disasters, social conflicts, armed conflicts) that also includes hidden disabilities? • Is there a disability sensitivity training program for government officials from the lowest level (BPBD, Tagana) in handling persons with disabilities as victims in disaster situations and humanitarian emergencies? • How many times a year are disability sensitivity training for government officials from the lowest level (BPBD, Tagana) in handling persons with disabilities as victims in disaster situations and humanitarian emergencies? • Is there a training program for handling disaster and emergency situations for persons with disabilities? • Is there a special handling SOP for Persons with disabilities who are confined in nursing homes related to handling evacuations during disaster situations (natural and social) as well as humanitarian emergencies? • Is there a special handling SOP for Persons with disabilities who are confined in mental hospitals related to handling evacuations during disaster situations (natural and social) and humanitarian emergencies?

Article	Indicator	Question Narrative
		• Are there SOPs issued by the central government to lower levels with regard to special handling for Persons with disabilities who are confined to their homes or shacks related to handling evacuations during disaster situations (natural and social) and humanitarian emergencies?
	Outcome	• [RELATED TO RISK SITUATIONS AND HUMANITARIAN EMERGENCY, OUTCOME INDICATORS] is there data available on the number of Persons with disabilities including those with sensory and communication barriers, regarding disaster and disaster risk reduction, as well as assistance that can be obtained in an emergency? • Are there a number of refugee camps that are accessible for persons with disabilities living in areas prone to natural disasters? • Are there a number of refugee camps that are accessible for persons with disabilities living in areas prone to social conflict and armed conflict? • Is there a number of refugee camps that are accessible to persons with disabilities living in areas prone to armed conflict? • How many persons with disabilities are involved in the planning, implementation and evaluation of the post-natural disaster rehabilitation/reconstruction stage? • How many persons with disabilities are involved in the planning, implementation and evaluation of the post-social conflict rehabilitation/reconstruction stage? • How many persons with disabilities are involved in the planning, implementation and evaluation of the post-armed conflict rehabilitation/reconstruction stage? • How many shelters and temporary shelters are accessible for persons with disabilities in refugee camps in areas prone to natural disasters?

Article	Indicator	Question Narrative
		• How many shelters and temporary shelters are accessible for persons with disabilities in refugee camps in areas prone to social conflict? • How many shelters and temporary shelters are accessible for persons with disabilities in refugee camps in areas prone to armed conflict? • How many officers and the availability of volunteers from the lower level to the central level who are capable of handling natural disasters? • How many officers and the availability of volunteers from the lower level to the central level who are capable of handling social conflict conditions? • How many officers and the availability of volunteers from the lower level to the central level who are capable of handling in conditions of armed conflict? • How many persons with disabilities live in natural disaster-prone areas? • How many persons with disabilities live in social conflict prone areas? • How many persons with disabilities live in areas prone to armed conflict? • How many persons with disabilities died during a natural disaster? • How many persons with disabilities died during the social conflict? • How many persons with disabilities died during armed conflict? • How many early warning systems are accessible for various disabilities in natural disaster areas? • How many early warning systems are accessible for various disabilities in social conflict areas? • How many early warning systems are accessible for various disabilities in armed conflict areas?

Article	Indicator	Question Narrative
		• berapakah jumlah disabilitas yang tinggal di daerah rawan konlik sosial? • berapakah jumlah disabilitas yang tinggal di daerah rawan konflik bersenjata? • berapakah jumlah disabilitas yang meninggal pada saat bencana alam terjadi? • berapakah jumlah disabilitas yang meninggal pada saat konflik sosial terjadi? • berapakah jumlah disabilitas yang meninggal pada saat konflik besenjata terjadi? • berapakah jumlah *early warning system* yang aksesibel terhadap ragam disabilitas di wilayah bencana alam? • berapakah jumlah early warning system yang aksesibel terhadap ragam disabilitas di wilayah konflik sosial? • berapakah jumlah early warning system yang aksesibel terhadap ragam disabilitas di wilayah konflik bersenjata?
Article 12 Equality of Recognition before the Law	Structure	• [REGARDING EQUAL RECOGNITION BEFORE THE LAW, STRUCTURE INDICATORS], is there any special law/regulation that guarantees equal recognition of persons with disabilities before the law? Can you give a case example? • Are there still laws/regulations that discriminate against or guarantee equal recognition of persons with disabilities before the law? Give an example? • Are there legislative efforts to strengthen the equal recognition of persons with disabilities before the law? • Has there been a special law/regulation that provides full support to persons with disabilities who are in the process of adjudicating amnesty cases? • Are there still laws/regulations that discriminate against or violate the right to life of persons with disabilities?

Article	Indicator	Question Narrative
		• Has there been a special law/regulation that guarantees access for persons with disabilities to revoke judicial decisions that deprive them of the right to legal competence? • Are there still laws/regulations that discriminate against or violate the right to life of persons with disabilities? • Has there been a special law/regulation regarding disability legal guarantees to be able to own property freely? • Are there still laws/regulations that discriminate against or violate the legal guarantee that persons with disabilities can own property freely? • Has there been a special law/regulation regarding legal guarantees to be recognized as legal subjects in economic and financial transactions? • Are there legislative efforts to strengthen legal guarantees to be recognized as legal subjects in economic and financial transactions? • Are there legislative efforts to harmonize and conform to the regulatory framework in perceiving norms of 'legal capacity' for persons with disabilities?
	Process	• [RELATED TO EQUAL RECOGNITION BEFORE THE LAW, PROCESS INDICATORS] Is there a program to strengthen legal capacity for persons with disabilities? • Are there SOPs or internal regulations in legal apparatus (APH) in handling cases of disability in conflict with the law? • Are there SOPs or technical guidelines at the internal level in handling cases of disability in conflict with the law for APH? • Is there a program of socialization and dissemination of regulations related to persons with disabilities as legal subjects dealing with the law enforcement officers, such as:

Article	Indicator	Question Narrative
		• Social worker? • Health? • Institution manager? • Disability curriculum in law faculties related to disability perspective? • Are there Law and Disability Courses as mandatory courses for Law Students in the first semester of study?
	Outcome	• [RELATED TO EQUAL RECOGNITION BEFORE THE LAW, OUTCOME INDICATORS] what is the value of the community satisfaction index with the police's performance in handling cases involving persons with disabilities dealing with the law from reporting/complaints to investigations? • What is the value of the community satisfaction index on the performance of the prosecutor's office in handling cases involving persons with disabilities in conflict with the law? • What is the value of the community's satisfaction index on the performance of the Supreme Court to the District Court/ Religious Court in handling cases involving persons with disabilities dealing with the law, starting from case administration issues to the decision level? • How many decisions in criminal cases involving persons with disabilities are in conflict with the law? • How many decisions in civil cases involving persons with disabilities are in conflict with the law? • How many cases of persons with disabilities were deprived of legal skills without a fair process? • How many cases of denial and discrimination in financial or economic services?

Article	Indicator	Question Narrative
		• How many cases of persons with disabilities were given action without consent in the installation of contraception? • How many cases of persons with disabilities were given action without consent in the choice of admission to a mental hospital or institution? • How many cases of persons with disabilities were given action without consent in shackles? • How many cases of persons with disabilities were given action without consent in deprivation of liberty? • How many cases of persons with disabilities were given action without consent in the choice of treatment and the determination of the drug to be consumed?
Article 13 Right of Access to Justice	Structure	• [RELATED RIGHT TO ACCESS TO JUSTICE, STRUCTURE INDICATORS], is there a master regulation in the Police, and implementation of decisions related to proper accommodation, as well as procedures that are friendly to persons with disabilities in accessing legal and judicial services, including [compiling and examining] profile assessments? Give an example? • At the prosecutor's office, are there master regulation and implementation of decisions related to the provision of adequate accommodation, as well as friendly procedures for persons with disabilities in accessing legal and judicial services, including [compilation and examination] of profile assessments? Give an example of a case or good practice? • In court, are there master regulations, and implementation of decisions related to the provision of adequate accommodation, as well as procedures that are friendly for persons with disabilities in accessing legal and judicial services, including [the preparation and examination of] profile assessments?

Article	Indicator	Question Narrative
		• In the Supreme Court, are there master regulations, and implementation of decisions related to the provision of adequate accommodation, as well as procedures that are friendly for persons with disabilities in accessing legal and judicial services, including [compilation and examination] of profile assessments? • Is there a policy (law or local regulation) regarding inclusive treatment for persons with disabilities in accessing legal aid? • [RELATED TO ACCESS TO JUSTICE RIGHTS, PROCESS INDICATORS], is there availability of operational standards and procedures to ensure proper accommodation for persons with disabilities in accessing legal and
	Process	judicial services, including the Police, Prosecutor's Office, courts and the Supreme Court? • Is there availability of accessible physical and non-physical facilities for persons with disabilities in the Police, Prosecutors, Courts and decision-making institutions? • Is there an available budget allocated to realize physical facilities, information services, and resources in providing inclusive services for persons with disabilities in every judicial process? • Are there special regulations at the level of law enforcement agencies to guarantee legal assistance for persons with disabilities? • Are there and how many DPOs are involved as expert witnesses in the process of law enforcement for persons with disabilities in the City/District? • Is there and how is the process of legal assistance to persons with disabilities related to cases of amplification of legal subjects carried out?

Article	Indicator	Question Narrative
		• Is there a program or training for paralegals to assist person with disability cases in dealing with the law before the litigation or non-litigation process is carried out? • Is there any socialization or dissemination related to the need for disability social assistants in the judicial process starting from the initial examination to implementing the decision and what is the process?
	Outcome	• [Regarding ACCESS TO JUSTICE, OUTCOME INDICATORS], is there any disaggregated data on access to legal and judicial services that gives rise to disability data? • How is the quality of judges' decisions in cases involving persons with disabilities who are litigating? • What is the level of satisfaction of persons with disabilities, their families and/or companions regarding the services of law enforcement agencies in cases of persons with disabilities in conflict with the law? • If so, how many law enforcement institutions do not have access to persons with disabilities, both physical and non-physical? • If so, how many law enforcement officers have the capacity to handle cases of persons with disabilities dealing with the law in the police, prosecutors, courts, and decision-implementing institutions? • If so, how much legal aid is provided to persons with disabilities with various disabilities? • If so, how many cases of disability support were accompanied by legal counsel/assistance? • If so, how many cases of violation of disability rights in amnesty cases were processed by independent state institutions? • How to increase the number of paralegals who accompany disability cases before the litigation process?

Article	Indicator	Question Narrative
		• If so, how many cases of persons with disabilities have come into conflict with the law accompanied by paralegals and/or disability assistants?
Article 14 Freedom and Security of Persons with Disabilities	Structure	• [RELATED TO THE FREEDOM AND SECURITY OF PERSONS WITH DISABILITIES, STRUCTURE INDICATORS], are there any special laws/regulations to protect persons with disabilities from depriving people of their liberty without due process, including shackles, confinement, institutionalization (incarcerated into institution or mental hospitals) for people with mental, intellectual and leprosy disabilities? (DESCRIBE THE ANSWERS SPECIFICALLY) • a. shackles? Give an example • b. Confinement? Give an example • Institutionalization or Mental Hospital? Give an example • Other? Give an example • Are there still laws/regulations that discriminate against or do not protect persons with disabilities from depriving people of their liberty without due process, including shackles, confinement, institutionalization (incarcerated in orphanages or mental hospitals) for persons with mental, intellectual and leprosy disabilities? Give an example? • So far, have there been any legislative efforts to strengthen legal protection to ensure that there are no acts of deprivation of liberty without due process, including shackles, confinement, institutionalization (incarcerated into institution or mental hospitals) for persons with mental, intellectual and leprosy disabilities? Give an example • Has there been a special law/regulation related to legal guarantees where there is freedom for persons with disabilities in making decisions for themselves?

Article	Indicator	Question Narrative
		• Is there a special law/regulation that ensures complaints and handling procedures for persons with disabilities related to cases of deprivation of freedom of persons with disabilities? • Is there any legislative effort that prohibits deprivation of freedom of persons with disabilities as stated in Article 14 of Law 19/2011 on the Ratification of the CRPD?
	Process	• RELATED TO THE FREEDOM AND SECURITY OF PERSONS WITH DISABILITIES, PROCESS INDICATORS], how many persons with disabilities experience forced deprivation of liberty on the basis of disability? • How many persons with disabilities have been handled by the government and the private sector as a result of forcible deprivation of liberty on the basis of disability? (Note: KND, Komnas HAM, Komnas Perempuan, Ombudsman, KPAI; National prevention mechanism by Komnas HAM) • How many persons with disabilities per year experience shackles? • How many persons with disabilities per year experience confinement in institution? • How many persons with disabilities per year are institutionalized?
	Outcome	• [RELATED TO THE FREEDOM AND SECURITY OF PERSONS WITH DISABILITIES, OUTCOME INDICATORS] Are there any affirmative programs and steps taken by the central government or regional governments to reduce/eliminate shackles, institutionalization and other forms of restraint/confinement on the basis of disability, especially those that often happen to people with psychosocial disabilities?

Article	Indicator	Question Narrative
		• Has there been a systematic and measurable complaint mechanism and handling (follow-up) on cases of deprivation of liberty in the name of disability? • Is there a systematic and measurable mechanism for handling (follow-up) after the release of: • Shackles? • Institutionalization? • Restraint/confinement? • Have there been socialization programs and campaigns related to the removal of stigma against people who are or have or suffer from leprosy? Including for example intellectual disability, autism and other chronic/rare diseases? • Has there been a directed and measurable monitoring mechanism on a regular basis for places of confinement for persons with disabilities, especially those with intellectual disability, autism, who have or are currently experiencing leprosy?
Article 15 Freedom from Torture and Other Cruel Treatment or Punish-ment	Structure	• [RELATED WITH FREEDOM FROM TORTURE AND OTHER CRUEL, INHUMAN, OR DESTROYING TREATMENT OR PUNISHMENT OR DESTROYING HUMAN DIGNITY, STRUCTURE INDICATORS] Are there laws and regulations relating to protection or freedom from torture or other cruel, inhuman or degrading treatment or punishment of persons with disabilities? Explain and give examples (can be related to the practice of shackles, confinement, institutionalization and mental hospitals) • Are there any regulations or SOPs that guarantee the freedom of persons with disabilities in making decisions regarding their treatment options?

Article	Indicator	Question Narrative
		• Are procedures for complaints and handling of persons with disabilities by Law Enforcement Officials (APH) in relation to cases of deprivation of liberty available? Give an example?
	Process	• [RELATED WITH FREEDOM FROM TORTURE AND OTHER CRUEL, INHUMAN, OR DESTROYING TREATMENT OR PUNISHMENT OR DESTRUCTION OF HUMAN DIGNITY, PROCESS INDICATORS] any measures taken by the government to stop acts of torture and degrading acts against persons with disabilities, and what kind of effort? • Who does what in what way? (Mention Ministry/Agency) • What are the challenges facing the government in stopping torture, and reducing it? • Are there SOPs for MSS that are humane (without torture), not degrading, and prevent torture of persons with disabilities and how are these SOPs implemented? • Is there a capacity building program for APH to prevent torture? Who implements? Where? and how many times in a year? • Does APH implement a program that ensures that persons with disabilities are not deprived of their liberty based on the program cycle: Prevention, torture, and rehabilitation? • Is there a complaint mechanism, handling, including (safe house) for victims/ complainants? • Does the government have an anti-stigmatization/bullying campaign program in the community? • Is there a public education program not to stigmatize, stereotyping, bullying, or other actions that demean human dignity for Persons with disabilities?

Article	Indicator	Question Narrative
	Outcome	• [RELATED WITH FREEDOM FROM TORTURE AND OTHER CRUEL, INHUMAN, OR DESTROYING TREATMENT OR PUNISHMENT OR DESTRUCTION OF HUMAN DIGNITY, OUTCOME INDICATORS] Are there data on the number and details of cases of torture and cruel acts against persons with disabilities? • Is there a program to improve the quality of handling actions taken by the state (APH) against persons with disabilities in conflict with the law, especially victims of torture and inhumane treatment? • Are there data related to the level of satisfaction of persons with disabilities with handling cases reported by persons with disabilities? • Who does the data collection? • Does the government provide a safe house for the persons with disabilities (victim) who is reporting her/his case?
Article 16 Freedom from Exploitation, Violence and Harassment	Structure	• [RELATED TO FREEDOM FROM EXPLOITATION, VIOLENCE, AND HARASSMENT, STRUCTURE INDICATORS] Are there laws (and their derivatives) that guarantee protection for persons with disabilities, especially women and children, from various forms of violence, exploitation, and abuse, both occurring in inside and outside the household?
	Process	• [RELATED TO FREEDOM FROM EXPLOITATION, VIOLENCE, AND HARASSMENT, PROCESS INDICATORS], is there a program to prevent exploitation, violence and abuse against persons with disabilities, which is gender and child sensitive, both in the public and private sectors, in the form of education, campaigns, and trainings for relevant officers? • Who are the Ministries/Agencies that implement it? • Is there an implementation report available?

Article	Indicator	Question Narrative
		• Is there an early identification program for acts of exploitation, violence and abuse against persons with disabilities? • Is the transmission of knowledge through the information accessible for persons with disabilities? • Is there a legal aid center that is managed or fully supported by the government? • Are there available sources of information (easy to reach and understand) regarding the complaint process and the protection of persons with disabilities from acts of violence, exploitation and abuse experienced by persons with disabilities? • What is the level of accessibility? Has the government prepared information media that can be accessed by persons with disabilities? • Is there a capacity building program for APH to guarantee the function of protection and prevention of violence and exploitation to persons with disabilities? • Are there programs to prevent or recover from the impact of violence on persons with disabilities that are run on a community/village basis? • Is there any data related to the resolution of cases in favor of persons with disabilities victims? • Are there SOP documents and guidelines for preventing violence and sexual harassment of persons with disabilities in places of disability services (such as special schools, nursing homes, Mental Health Hospital)?
	Outcome	• [Regarding FREEDOM FROM EXPLOITATION, VIOLENCE, AND HARASSMENT, OUTCOME INDICATORS], is there data on cases of exploitation, violence and abuse against persons with disabilities, based on gender, type of disability and age? If so, what are they?

Article	Indicator	Question Narrative
		• Are there data related to the methods of resolving cases of violence, exploitation and abuse against PWD, carried out by the state? • Are there reports on the number of reported cases related to sexual harassment and violence against persons with disabilities? How many cases were reported related to sexual harassment and violence? How is it spread geographically?
Article 17 Protecting the Integrity of Persons with disabilities	Structure	• [RELATED TO PROTECTING THE INTEGRITY OF Persons with disabilities, STRUCTURE INDICATORS] Are there laws and regulations related to the protection of the physical and mental integrity of persons with disabilities? • Regarding medical action in the case of women with disabilities, does the government or the hospital have regulations that respect the ability of persons with disabilities to maintain their physical integrity, including for example: • Ability to refuse abortion? • Ability to resist forced institutionalization? • Ability to refuse abortion? • Ability to resist forced sterilization? Be specific. • Are there any statutory provisions regarding the protection of children with disabilities from exploitation?
	Process	• [RELATED TO PROTECTING THE INTEGRITY OF Persons with disabilities, PROCESS INDICATORS] How is the Indonesia Free of Shackle program running? • Who is the organizer? • How is the process? • How is the result?

Article	Indicator	Question Narrative
		• What programs does the government plan in 2019/2020 regarding information systems and requests for persons with disabilities approval before conducting research, experiments, or medical actions that violate the integrity of persons with disabilities? Are there SOPs (internal rules, technical guidelines, etc.)? • What programs are related to strengthening the capacity of institutional actors (Ministry/ Agency) carried out by the government in carrying out the function of protecting the integrity of persons with disabilities? • Are there documents or reports related to the Capacity of Ministries/Agencies and local governments regarding respect for the right to integrity of persons with disabilities?
	Outcome	• [RELATED TO PROTECTING THE INTEGRITY OF PERSONS WITH DISABILITIES, OUTCOME INDICATORS] is there any data available regarding the handling of complaints of violations of the integrity rights of persons with disabilities? • What are the conditions for fulfiling the Integrity Rights of Persons with Disabilities in the last 2 years (2019/2020)?
Article 18 Freedom of Movement and Nationality	Structure	• [REGARDING FREEDOM OF MOVEMENT AND CITIZENSHIP, STRUCTURE INDICATORS] Are there laws and regulations related to the right to freedom of movement, including determining residence, as well as equal citizenship status without discrimination? • Are there any regulations regarding the process or procedure for changing citizenship, obtaining a passport, and having a residence permit in Indonesia? If there, describe!

Article	Indicator	Question Narrative
	Process	• [RELATED TO FREEDOM OF MOVEMENT AND CITIZENSHIP, PROCESS INDICATORS] give some examples in certain ministries or agencies related to programs that ensure immigration processes and procedures provide adequate accommodation and accessibility for persons with disabilities in managing immigration matters? • How is the availability of data in the form of program plans and reports on the implementation of government programs that guarantee registration, as well as obtaining birth certificates and citizenship documents for those born with disabilities, including those born/residing in remote areas, as well as in institutions/ orphanages? • How are government programs related to the dissemination of information and support to parents of children with disabilities, the right of children to obtain citizenship status, and to know and be cared for by their parents? • What is the description of the accessibility of facilities and infrastructure of relevant ministries/institutions (including at the regional level) regarding facilities and infrastructure that are accessible to various disabilities, physical and non-physical (such as photos, finger prints, etc.)? • What are the government's efforts in mainstreaming the principle of accessibility of facilities and infrastructure in relevant ministries/institutions (including at the regional level) regarding the availability of adequate accommodation for government institutional staff?

Article	Indicator	Question Narrative
	Outcome	• [REGARDING FREEDOM OF MOVEMENT AND CITIZENSHIP, OUTCOME INDICATORS] Are disaggregated data available on users of immigration services, including describing types of disability and gender? How does the data describe or explain the capacity of the Ministries/Agencies to conduct and prepare the data? • Is data available on the number of births of babies with disabilities in the last 12 months and who obtained a citizenship identity (KTP)? • What is the level of understanding and awareness of population and immigration (Dukcapil) officers towards proper accommodation? • Number of Persons with disabilities who have ID cards, Family Card, and Marriage Certificates, and other demographic identities? • How is the perception/satisfaction index of persons with disabilities related to population and immigration services? • What is the Public Service Satisfaction Index of the Ministry of Law and Human Rights? • If so, attach independent agency reports and assessments? • If so, attach a photo of immigration preventing persons with disabilities from getting a passport, including finger prints for persons with leprosy?
Article 19 Living Independently and Involved in Society	Structure	• [RELATED TO LIVING INDEPENDENTLY AND INVOLVING IN THE COMMUNITY, STRUCTURE INDICATORS], any regulations that contain matters related to Persons with disabilities being able to live independently, have their own house, with family or closest people, and live-in orphanages/institutionalization without any coercion from other people?

Article	Indicator	Question Narrative
		• Are there regulations that provide opportunities for persons with disabilities to determine accessible and affordable housing? If so, please explain? • Are there regulations that involve persons with disabilities participating in local community life? If so, please explain?
	Process	• [RELATED LIVING INDEPENDENTLY AND INVOLVING IN THE COMMUNITY, PROCESS INDICATORS] What are some programs from the government or private sector that provide services to get decent housing for persons with disabilities? • Does the program involve stakeholders with disabilities as planners, implementers and monitors? • Does this program pay attention to accessibility for persons with disabilities/mechanisms for easy access to services (bureaucracy)? • Is there a program from the government/ private sector that builds public facilities aiming to support independence for persons with disabilities? • Is there a local budget that allocates independence program services for persons with disabilities? • Is there any socialization from the government or the private sector for the community that provides opportunities for persons with disabilities on how to get independence services? • Is there a system or mechanism that is easily accessible for persons with disabilities in terms of complaints about services, participation in society? • Are there mechanisms (systems/procedures/programs/budgets) from where persons with disabilities are located (at home, neighborhood, and other public services) that ensure independence-related services?

Article	Indicator	Question Narrative
		• Are there special allocations that provide opportunities for persons with disabilities to get inclusive services? • Are there programs where persons with disabilities live that provide services?
	Outcome	• [RELATED TO LIVING INDEPENDENTLY AND INVOLVING IN THE COMMUNITY, OUTCOME INDICATORS] is there any data on Persons with disabilities who have not yet found a place to live? • Do the programs provided by the government/private sector effectively enable the independence of persons with disabilities? • Are there mechanisms that provide opportunities for persons with disabilities to gain access? • Is there any socialization of opportunities for persons with disabilities to get services? • Are there data on budget allocations for persons with disabilities who need living allowance assistance? • Are there reports of complaints that go to institutions that handle problems in public services? • Is there any follow-up data from the complaint that must be resolved? • Is there data on community services and facilitation that can be accessed by persons with disabilities? • Is there any persons with disabilities data that has received services in accessing certain needs (Identify card, certificate, letter of recommendation from the village head, etc.) at the local community?
Article 20 Personal Mobility	Structure	• [RELATED TO PERSONAL MOBILITY, STRUCTURE INDICATORS] Are there any laws and regulations governing the provision of assistive devices and assistive technology for persons with disabilities? If so, please explain?

Article	Indicator	Question Narrative
		• Do the existing laws and regulations regulate the scheme for the procurement of tools and assistive technology needed, including for procurement carried out by the private sector? If so, please explain specifically? • Do the existing laws and regulations govern the development of research in the context of developing innovation and the production of assistive devices and other assistive technologies? If so, give an example?
	Process	• [RELATED TO PERSONAL MOBILITY, PROCESS INDICATORS], is there an institution that has been appointed to be responsible for providing mobility aids for persons with disabilities at the village to district level? • Is there an institution at the village level responsible for receiving and processing applications for mobility aids needed by persons with disabilities? • Is there an assessment process for the need of mobility aids and assistive technology for persons with disabilities down to the village level? • Is there a financing scheme for aids from the central and local government budgets that is integrated with the social protection scheme? • Is there any financing for aids that is covered through budget allocations and social security schemes? • How is the coordination and mechanism for sharing financing between national, regional and private sources in the provision of aids? • Does the government provide information regarding the provision of assistive devices that are close and accessible to persons with disabilities? • At district level? • At village level?

Article	Indicator	Question Narrative
		• Is training on the use of assistive devices and assistive technology available equitably and easily accessible to persons with disabilities? • Is there mobility training that can cover the use of mobility aids, as well as mobility orientation that is close, easily accessible at the village level? • Is there an institution that handles standardization in the provision of tools, which can include standardization of design and quality, price, repair and maintenance of tools? • Is there a guide to tool standards that can be used as a guide for supply agencies? • Is the existing standardization also supported by training for tool providers to be able to meet these standards? • Have existing standards been consulted with DPOs and in accordance with the needs of persons with disabilities? • Does the government have a continuous training program related to repair, maintenance, customization to the production of tools? • If so, has the training curriculum complied with the standard of assistive devices according to the needs of persons with disabilities? • Does the training accommodate the need for distribution of assistive device services? • Does the government responsible for providing assistive devices have a program aimed at developing assistive technology? • How does the program contribute to the development of toolkit provision?
	Outcome	• [RELATED TO PERSONAL MOBILITY, OUTCOME INDICATORS], is there a data collection on the need for assistive devices for Persons with disabilities? If so, what is the number?

Article	Indicator	Question Narrative
		• How many people persons with disabilities have the need for assistive devices fulfiled (updated annually)? • Are there data describing the production and distribution of tools each year? • How are assistive devices suited to the needs of persons with disabilities? • Are there data on institutions (government and non-government) that have initiatives to develop assistive technology? • If so, what are the initiatives taken?
Article 21 Freedom of Expression and Opinion and access to information	Structure	• [Regarding FREEDOM OF EXPRESSION AND OPINION, AND ACCESS TO INFORMATION, STRUCTURE INDICATORS], are there any rules or regulations that guarantee freedom for persons with disabilities to express their opinions, including freedom to express opinions through the chosen forms of communication? Explain? • What about intellectual and mental persons with disabilities? How have they been conveying their expressions and opinions and with what models or forms of communication? Please provide a specific example? • Are there rules and regulations, which ensure the provision of sign language interpreter services according to the needs of the Deaf? How about the implementation? • Are there any regulations that require the accessibility of media companies for persons with disabilities? What is the form of practice?
	Process	• [Regarding FREEDOM OF EXPRESSION AND OPINION, AND ACCESS TO INFORMATION, PROCESS INDICATORS], is there any sign language support service available in all public services? (Includes: education services, employment services, health services, population services, and other public services)

Article	Indicator	Question Narrative
		• Is there research and study, related to the development and innovation in technology to increase the accessibility of persons with disabilities to knowledge and information? (Collect, summarize and attach) • Is there a budget available to support the implementation of sign language or other communication support in order to ensure the accessibility of communication for persons with disabilities in various public services, both managed by the government and private? • Is there an MoU between the government/ regional government and media companies to ensure that there is access to news for all persons with disabilities? • Are there guidelines for all information and media providers regarding the persons with disabilities accessibility? Example: Web Content Accessibility Guidelines
	Outcome	• [REGARDING FREEDOM OF EXPRESSION AND OPINION, AND ACCESS TO INFORMATION, OUTCOME INDICATORS], what is the percentage of live broadcasts and the percentage of rebroadcasts on television, webinars, and other audio-visual information, which is equipped with sign language, audio descriptions, and quality subtitles or captions? • What percentage of website content meets the standards of the 'Web Content Accessibility Guideline' that are easily accessible by people with various disabilities? • How is the compliance level of online mass media companies to provide websites that are accessible for all types of disabilities?

Article	Indicator	Question Narrative
		• What is the form of assessing the accessibility of persons with disabilities to information media, both mass media or the internet, conducted by the Government and the Information Broadcasting Commission (KPI) for information-providing institutions such as the Press Council, AJI, PWI, IJTI, etc.?
Article 22 Respect for Privacy	Structure	• [Regarding RESPECT FOR PERSONAL PRIVACY, STRUCTURE INDICATORS], are there any regulations/policies that guarantee the privacy of Persons with disabilities? • For example, regarding personal data? • Regarding correspondence? • Regarding medical data and rehabilitation? • Including the relation to the provision of proper accommodation in the field of education? • Are there any regulation/policies that mandate service providers, both public and private, to ensure the protection of the privacy of persons with disabilities through SOPs, infrastructure, and trained officers who can and are committed to maintaining the privacy of persons with disabilities, including in relation to the provision of adequate accommodation in education sector? Give one or more specific examples?
	Process	• [REGARDING RESPECT FOR PERSONAL PRIVACY, PROCESS INDICATORS], are there any appropriate SOPs or internal rules for service providers, both government and private, that are understood by the service provider/service provider regarding measurable efforts to ensure the confidentiality of personal data and correspondence of persons with disabilities, including in particular those with mental disabilities?

Article	Indicator	Question Narrative
		• Are there mechanisms for receiving and handling complaints regarding breaches of privacy and correspondence for persons with disabilities, including adequate accommodation in education sector?
	Outcome	• [Regarding RESPECT FOR PERSONAL PRIVACY, OUTCOME INDICATORS], what is the percentage of the number of complaints that come in, as well as complaints that are fairly processed regarding the protection of the confidentiality of personal data and correspondence of persons with disabilities? • Is there an availability/percentage of officers in government and private service providers who have an understanding of the rights of persons with disabilities and the technical ability to implement a code of ethics for assisting persons with disabilities?
Article 23 Respect for Home and Family	Structure	• [Regarding RESPECT FOR HOME AND FAMILY, STRUCTURE INDICATORS], are there any regulations/policies that guarantee protection for persons with disabilities to obtain rights and facilities for marriage, reproductive rights, family, parenting and child care, on an equal basis with others and without discrimination? • Is there a policy harmonization process that provides full guarantees and protection for persons with disabilities in marital and domestic relations?
	Process	• [Regarding RESPECT FOR HOME AND FAMILY, PROCESS INDICATORS] is there availability of affordable and accessible information and consulting services for persons with disabilities related to reproductive health, marriage and family planning, including the provision of sign language in marriages with deaf disabilities?

Article	Indicator	Question Narrative
		• Is there a system that strictly protects the fertility right of persons with disabilities, especially adolescents and adult women with disabilities, to forced abortion or sterilization? • Is there a support system up to the village level that ensures children with disabilities are not cared for separately from their families, such as counseling, referrals to schools?
	Outcome	• [REGARDING RESPECT FOR HOME AND FAMILY, OUTCOME INDICATORS] what is the percentage of divorce cases involving persons with disabilities, and using the disability of one partner as the basis/reason for divorce? • Are there data on the number of violence experienced by persons with disabilities in the household and its handling, please describe? • Are there data on the number of children with disabilities who are not cared for in the family and not with the child's consent?
Article 24 Education	Structure	• [RELATED TO EDUCATION, STRUCTURE INDICATORS], have the regulation for providing education explicitly and consistently ensured the acceptance of persons with disabilities in inclusive education? Give an example? • Are there still regulations regarding discriminatory education for persons with disabilities? Give an example? • Do the existing educational regulations explicitly guarantee the availability of accessibility and adequate accommodation for persons with disabilities in educational institutions? Give an example? • Basic education? • Secondary education? • Higher education?

Article	Indicator	Question Narrative
	Process	• [RELATED TO EDUCATION, PROCESS INDICATORS], do ministries and education offices have teacher training programs related to disability perspectives and inclusive education? • Is the training held on an ongoing basis? • Is there sufficient budget to support the implementation of the training? • Is the training affordable and open to teachers in inclusive schools? • Is there a clear division of budget proportions between the central, provincial and district/city governments in supporting the implementation of the accessibility of inclusive education? • If so, to what extent has the proportion of the budget been realized? • Is there an institution that supervises the budget allocation? • Does the school, under the supervision of the education office, have a system to detect and identify the presence of candidates or students with disabilities? • If so, how is the system implemented? • Is the data used as part of an assessment of the needs for access and appropriate accommodation for students with disabilities? • Is there any involvement of persons with disabilities in the implementation of the system? • Are there available teaching staff, technical education staff, and officers with disability technical competence in every school providing inclusive education? • What is the ratio between the number of inclusive schools and education personnel who have technical competence related to disability? • Are learning resources in braille available at schools providing inclusive education?

Article	Indicator	Question Narrative
		• Are there teaching staff who have sign language skills to accommodate deaf students? • Is there support from the Education Office and the Ministry of Religion regarding this need for schools providing inclusive education services? • Are technical policies related to the establishment of disability service units in place? • Is the Disability Service Unit available in every inclusive education provider school? • Has data on types of disabilities been integrated into the basic student data system (DAPODIK)? • How is the data used in planning education programs? • Does the DAPODIK system meet the principles and standards of accessibility? • Are there technical regulations that guide the preparation of a disability-adaptive curriculum for inclusive education providers? • Has the school implemented a curriculum that is adaptive and sensitive to various disabilities? • Is there an institution that is mandated to play the role of accepting complaints related to discrimination on the right to education for persons with disabilities? • Are the complaint-receiving institutions accessible and easily accessible to persons with disabilities/their families? • Is the complaint mechanism accessible for Persons with disabilities? • Does the existence of the complaint-receiving institution carry out sufficient socialization so that it is widely known? • Is there a scholarship program for persons with disabilities? At which level? • Is there a guarantee of continuity for the program?

Article	Indicator	Question Narrative
		• Are existing programs widely disseminated to persons with disabilities? • Are resource centers available in every district at every level of education? • Do schools and universities that provide inclusive education receive service support from resource centers in providing services for students with disabilities?
	Outcome	• [RELATED TO EDUCATION, OUTCOME INDICATORS], are there available teaching staff, technical education staff, or officers with disability technical competence in every school providing inclusive education? • What is the ratio between the number of inclusive schools and education personnel who have technical competence related to disability? • Are learning resources in braille available at schools providing inclusive education? • Are there teaching staff who have sign language skills to accommodate deaf students? • Is there support from the Education Office and the Ministry of Religion regarding this need for schools providing inclusive education services? • Are technical policies related to the establishment of disability service units in place? • Are disability service units available in every inclusive education provider school? • Has data on types of disabilities been integrated into the basic student data system (DAPODIK)? • How is the data used in planning education programs? • Does the DAPODIK system meet the principles and standards of accessibility? • Are there technical rules that guide the preparation of a disability-adaptive curriculum for inclusive education providers?

Article	Indicator	Question Narrative
		• Has the school implemented a curriculum that is adaptive and sensitive to various disabilities? • Is there an institution that is mandated to play the role of accepting complaints related to discrimination on the right to education for persons with disabilities? • Are the complaint-receiving institutions accessible and easily accessible to persons with disabilities/their families? • Is the complaint mechanism accessible for Persons with disabilities? • Does the existence of the complaint-receiving institution carry out sufficient socialization so that it is widely known? • Is there a scholarship program for persons with disabilities? At which level? • Is there a guarantee of continuity for the program? • Are existing programs widely disseminated to Persons with disabilities? • Are resource centers available in every district at every level of education? • Do schools and universities that provide inclusive education receive service support from resource centers in providing services for students with disabilities? • How does the number of education providers compare to those of educational institutions that provide inclusive education (including the availability of adequate accommodation) at all levels? • Has the implementation of inclusive education been evenly distributed in each district? • How many inclusive education providers have followed the accessibility standards for their physical facilities?

Article	Indicator	Question Narrative
		• How is the graduation prevalence of persons with disabilities compared to non-Persons with disabilities at each level and type of education? (Basic, secondary and higher education) • How many cases of discrimination in education (refusal to attend school), both experienced and reported through the official complaint channel? • Of these cases, how many were processed and obtained resolutions? • Do persons with disabilities think that protection against discrimination in education is sufficient to guarantee equality? • Who are the government and non-government institutions that have started providing scholarship programs for Persons with disabilities? • How many beneficiaries with disabilities have received scholarship benefits?
Article 25 Health	Structure	• [RELATED TO HEALTH, STRUCTURE INDICATORS], have the government regulations implementing the protection and compliance of disability rights been enacted? If not, why? • Do government regulations implementing the protection and compliance of disability rights already cover quality, accessible and affordable health services for persons with disabilities? • Have government regulations guaranteed the availability of health aids for persons with disabilities? Explain specifically by type of disability? • Sensory (vision, hearing) disability? • People with mental disabilities (Schizo-phrenia, Bipolar/multipolar, anxiety, etc.)?

Article	Indicator	Question Narrative
		• People with intellectual disabilities (Down's syndrome, dyslexia, dyscalculia, learning difficulties, etc.)? • Persons with physical disabilities (Users of wheelchairs, crutches, walkers, prosthetic limbs, etc.?) • Severe/Double/Multi disability? • Have government regulations implementing the protection and compliance of disability rights included aspects of health services? Explain specifically? • Reproductive Health Services? • Sexual Health Services? • Psychosocial Health Services? • Are there regulations that oblige health services to provide home care and home visits for persons with disabilities? • Are there regulations that require health services to be accessible to all persons with disabilities? • Do health care regulations regulate the obligation of health service providers to have an inclusive service mechanism? • Does the health service regulation arrange the layout of the building for the mandatory accessible health care provider? • Does the national Health Insurance System Regulation govern the health insurance system for disability? Explain?
	Process	• [RELATED HEALTH, PROCESS INDICATORS], Does the National Health Insurance System have a health financing scheme for Persons with disabilities? • Availability of accessible information in braille format, signs, or other formats as needed, related to service delivery and health service flow? • Have health service providers provided physical, non-physical accessibility for Persons with disabilities?

Article	Indicator	Question Narrative
		• Do health care providers have a health care mechanism for disability? • Do employees in health services understand how to interact with persons with disabilities? • Do health care providers use different types of information according to different types of disabilities? • Do basic health service providers (POSY-ANDU and PUSKESMAS) and advanced ones have early detection programs up to Posyandu level? • Do basic service providers have a referral mechanism? • Describe the proportion of officers in health care providers who have technical expertise and play a role in supporting the provision of adequate accommodation for persons with disabilities, including communication support using sign language? • How many health care workers have an understanding of disability and expertise in providing adequate accommodation? • Are there health care workers who have sign language communication skills? • How does the home care and home visit health service outreach system ensure disability accessibility, including in remote locations? • Do health outreach workers have knowledge and expertise about disability? • Do curricula and training materials for health services include service mechanisms for persons with disabilities? • Has the training resulted in the skills of health care workers with a disability perspective? • Is there a mechanism to complain about rights violations and discrimination in health services for persons with disabilities?

Article	Indicator	Question Narrative
		• How is the complaint mechanism implemented? • How is the mechanism easily accessible for persons with disabilities? • How is the guarantee of the affordability of medicines for persons with disabilities provided? • Does the health insurance system cover the medicines needed by the disabled? • Is there a system that ensures the availability and affordability of medicines needed by persons with disabilities can be easily accessed by persons with disabilities? • How are the minimum standards of service for persons with disabilities implemented? • Can MSS be easily accessed by persons with disabilities? • Is the MSS prepared to involve persons with disabilities?
	Outcome	• [RELATED TO HEALTH, OUTCOME INDICATORS], what is the percentage of Puskesmas, hospitals and health care providers that have disability inclusive services? • Do all Puskesmas have health services up to the village? • How many Puskesmas have staff with inclusive health service expertise? • Does the Puskesmas have accessible disability data in the home care and home visit programs? • Does the service data cover aspects of promotive, preventive, curative, rehabilitative and assistive devices? • Do home care and home visit data have a referral mechanism?
Article 26 Habilitation and Rehabilitation	Structure	• [RELATED TO HABILITATION AND REHABILITATION, STRUCTURE INDICATORS], are there laws and regulations on Habilitation and Rehabilitation at the regional level?

Article	Indicator	Question Narrative
		• Are there regulations that conflict with habilitation and rehabilitation? • Is there a technical regulation for the implementation of habilitation and rehabilitation through institutions?
	Process	• [RELATED TO HABILITATION AND REHABILITATION, PROCESS INDICATORS] Is there any data on disability requiring habilitation and rehabilitation? • Does the Habilitation and Rehabilitation service reach the regional level? • How are the habilitation and rehabilitation services implemented? • Have you budgeted for habilitation and rehabilitation? • Does habilitation and rehabilitation involve the family? • Has habilitation and rehabilitation involved professionals/experts? • Is habilitation and rehabilitation accessible and affordable? • Does habilitation and rehabilitation involve cross-sectoral activities? • What is the number of habilitation and rehabilitation services both within the institution and within the family? • How is the mechanism of habilitation and rehabilitation carried out within the institution and within the family? • Does habilitation and rehabilitation cover all aspects of disability independence, including early detection and early intervention? • Is habilitation and rehabilitation carried out with disability consent? • Is there a rehabilitation and rehabilitation mechanism that protects the rights of persons with disabilities?

Article	Indicator	Question Narrative
		• How are the Habilitation and Rehabilitation MSS and SOPs prepared to ensure participation and compliance of disability rights? • How is the persons with disabilities/DPOs involved from the start in the habilitation and rehabilitation? • How does habilitation and rehabilitation involve the community? • Is there a community that does habilitation and rehabilitation?
	Outcome	• [RELATED TO HABILITATION AND REHABILITATION, OUTCOME INDICATORS], Are there data on overall disability and disability who received habilitation and rehabilitation services? • How is the participation of persons with disabilities in the community after the habilitation and rehabilitation services? • Is there data on the provision of habilitation and rehabilitation services?
Article 27 Jobs and Employ-ment	Structure	• [RELATED TO JOBS AND EMPLOYMENT, STRUCTURE INDICATORS], to what extent do labor regulations guarantee the right to employment for Persons with disabilities, both within the government and local governments, both in the formal and non-formal sectors? • To what extent do policies related to employment in Indonesia regulate the accessibility of the work environment for persons with disabilities? • To what extent is the availability of regulations/policies governing access to entrepreneurs for persons with disabilities? • To what extent is the availability of legislation that guarantees return to work for people who become disabled due to work accidents? If so, how does the policy

Article	Indicator	Question Narrative
		regulate the provision of a back-to-work support system for people who become disabled due to work accidents?
	Process	• [RELATED TO EMPLOYMENT AND EMPLOYMENT, PROCESS INDICATORS], to what extent is there a system that ensures the role of persons with disabilities in the planning, implementation, monitoring and evaluation of work accessibility regulations/ policies and entrepreneurship? • How does the government involve persons with disabilities/DPOs in planning employment-related programs for persons with disabilities? • Is there a complaint system that can be used to report cases of labor violations experienced by persons with disabilities? • If there is a complaint system, is it functioning, accessible, and effective in handling cases of violations? Is there data that can explain the number of complaints received, as well as those that were well resolved? • Is there a return-to-work guarantee program for persons with disabilities due to work accidents? • Has the program been effective in providing protection for new persons with disabilities to return to work? • Are there systems in place to ensure that employers provide reasonable and accessible accommodation in the work environment, including a system of supervision and regulation of sanctions? • Are there appropriate accommodation and accessibility guidelines that employers can use in providing facilities in the work environment for persons with disabilities?

Article	Indicator	Question Narrative
		• Is there a structured monitoring system (from job providers, unions, agencies/ ministry) regarding the availability of proper accommodation and accessibility to job providers? • How is the availability of information related to training and job placement, and to what extent is this information accessible to persons with disabilities? • To what extent is the availability of information, supporting sources, and financial support related to the provision of adequate accommodation in the world of work for persons with disabilities? • To what extent are there systems and programs to encourage independent business ownership, entrepreneurship, and access to capital for persons with disabilities, both in the government and the private sector, including assistance for product marketing/ promotion assistance? • Is there a disability service unit in employment?
	Outcome	• [RELATED TO EMPLOYMENT AND EMPLOYMENT, OUTCOME INDICATORS], to what extent are data available on the comparison of persons with disabilities of productive age who do not work with non-persons with disabilities? • How far is the availability of data that progressively describes the absorption of persons with disabilities in the world of work from year to year? • How big is the data on the comparison of opportunities for access to capital between persons with disabilities and non-persons with disabilities entrepreneurs?

Article	Indicator	Question Narrative
		• How big is the data on the comparison of wage equality between persons with disabilities and non-persons with disabilities? • How big is the data that shows the existence of violations or discrimination experienced by persons with disabilities in the world of work and their handling? • How big is the data that shows the number of companies that employ persons with disabilities with proper accommodation?
Article 28 Adequate Standard of Living and Social Protection	Structure	• [REGARDING STANDARDS OF LIFE AND APPROPRIATE SOCIAL PROTECTION, STRUCTURE INDICATORS], does the regulation/policy regarding Social Protection in Indonesia include regulating social protection for persons with disabilities? Describe specifically?
	Process	• [ON STANDARDS OF LIFE AND APPROPRIATE SOCIAL PROTECTION, PROCESS INDICATORS], is there a social protection system for persons with Disabilities? • Does the existing social protection system for persons with disabilities also take into account the level of support and additional extra costs for disability? • Is the budget allocation provided for social protection programs used effectively (with SILPA, without SILPA) both organized by the national government and local governments? • How is the involvement of persons with disabilities in the planning, implementation, and monitoring and evaluation of the social protection system?
	Outcome	• [RELATED TO STANDARDS OF LIFE AND DECENT SOCIAL PROTECTION, OUTCOME INDICATORS], how much statistic is there on the poverty rate of persons with disabilities?

Article	Indicator	Question Narrative
		• How many persons with disabilities in Indonesia are covered under social protection schemes? (statistics) • How big is the decent life change for persons with disabilities who are included in the social protection scheme?
Article 29 Political Participation and Public Life	Structure	• [Regarding POLITICAL PARTICIPATION AND PARTICIPATION IN THE PUBLIC SPACE, STRUCTURE INDICATORS], have the laws or their derivative regulations guaranteed the political rights of all types of disabilities? • Does the law or its derivative regulations ensure access for persons with various disabilities in the delivery of their political rights? • Does the law ensure there is a special quota (e.g., 2 percent) for persons with disabilities in the composition of legislative members?
	Process	• [Regarding POLITICAL PARTICIPATION AND PARTICIPATION IN THE PUBLIC SPACE, PROCESS INDICATORS], does the KPU make technical regulations regarding accessibility or universal design for persons with disabilities in the election process? Describe all stages of the election, from beginning to end (14 stages)? • Is there training for KPPPS staff related to the persons with disabilities accessibility in elections? • Are there technical guidelines for election officials to ensure that persons with disabilities have the right to vote? • What about voting rights? • And the right to be elected in carrying out the function of public office in government? Central and regional. • Is there a special program to ensure disability vote in elections?

Article	Indicator	Question Narrative
		• Are there any efforts to raise awareness related to the rights of voters and to be elected by persons with disabilities in elections? • Is there a special program created to increase the number of persons with disabilities in public official positions? • Do guidelines for involvement in the policy-making process, such as the City/ District Musrenbang include persons with disabilities? • Has Village Musrenbang included persons with disabilities? • Is there capacity building of state apparatus regarding the importance of accessibility and participation of persons with disabilities in decision making? • Is there a campaign program created by the Government to increase disability participation in decision-making processes and other public affairs? • Central Government Level? • City/District Government Level? • Village Government Level? • Are there awards for public and private services that have succeeded in building persons with disabilities' inclusive participation in decision-making? • Has the government provided specific support to ensure the participation of persons with disabilities in forming and running organizations to represent their aspirations, at the level of: • International? • National? • Regional? • Local/village?

Article	Indicator	Question Narrative
		• Has the government budget provided to address the constraints on persons with disabilities participation in decision-making related to public policy? • Are there any efforts by KPU to increase the number of persons with disabilities voters in the DPT (final voters list)? In what form? • Are there any efforts or actions to campaign against stigma and promote the Persons with disabilities votes in elections? • Are there complaints and grievance mechanisms available to persons with disabilities regarding violations of the right to vote and elect persons with disabilities?
	Outcome	• [RELATED TO POLITICAL PARTICIPATION AND PARTICIPATION IN THE PUBLIC SPACE, OUTCOME INDICATORS], how many persons with disabilities are sitting in high government positions? • How many persons with disabilities are in high positions in state-owned or private companies? • How many persons with disabilities included in DPT (final voter list) per year? • Has the number of DPT increased from the previous year, what percentage of the total number of persons with disabilities? • How many disabled voters are there? • How many persons with disabilities are registered as civil servants? • How many persons with disabilities are running for parliament? • How many persons with disabilities have passed to become members of DPR, DPRD I and II?

Article	Indicator	Question Narrative
Article 30 Cultural Participation, Recreation, Leisure and Sports	Structure	• [Regarding PARTICIPATION IN CULTURAL LIFE, RECREATION, SPORT TIME AND SPORTS, STRUCTURE INDICATORS] Is there a policy that regulates the participation of persons with disabilities in cultural life? • Is there a policy that regulates the participation of persons with disabilities in recreation? • Is there a policy that regulates the participation of persons with disabilities in sports? • Are there regulations that regulate technical instructions for their implementation, including ensuring the availability of physical and non-physical accessibility for all types of disabilities?
	Process	• [Regarding PARTICIPATION IN CULTURAL LIFE, RECREATION, SPORT TIME AND SPORTS, PROCESS INDICATORS], is there a financing scheme that ensures special provision for persons with disabilities? • Is there a budget scheme that ensures persons with disabilities participate in public activities that require adequate accommodation? • Is there a budgeting mechanism that makes it easier for persons with disabilities to access their needs in implementation? • The existence of a program to ensure that literary content and cultural materials are easily accessible to persons with disabilities, through the use of information technology. • Is there some kind of guide that provides instructions to actors/organizers to ensure accessibility of persons with disabilities related to information and the use of information technology? • Is there a program monitoring mechanism from the government to ensure that program implementation continues according to its work plan?

Article	Indicator	Question Narrative
		• Are there programs to recognize and promote persons with disabilities to participate in arts and cultural activities, including developing their intellectual and creative potential? • Is there a program from the government that protects and respects Deaf culture in activities including sign language recognition? • Are there program allocations and their budgets that specialize in disability participation in sports? • Is there disability involvement to determine the program? • Is there any agenda/work plan that ensures the development of specific sports for persons with disabilities? • What is the percentage of the budget allocation for specific sports activities of persons with disabilities in the overall sports budget allocation? • To what extent is the availability of services with a disability perspective in tourist attractions, sports venues, performance halls, such as escorts, tour guides, sports coaches? • Is there and to what extent is the availability of sports and class development programs that accommodate all types of disabilities?
	Outcome	• [Regarding PARTICIPATION IN CULTURAL LIFE, RECREATION, SPORT TIME AND SPORTS, OUTCOME INDICATORS], is there any data on the number of tourist sites, sports venues and cultural centers that are friendly for persons with disabilities? • How many tourist attractions, sports venues and cultural centers have received concessions?

Article	Indicator	Question Narrative
		• Is there a satisfaction index data on the use of tourist attractions, sports and cultural centers? • How many athletes with disabilities are always ready to take part in sporting events? • Is there data for professionals who are committed to helping athletes with disabilities train?
Article 31 Data Collection	Structure	• [RELATED TO DATA COLLECTION, STRUCTURE INDICATORS], are there clear, non-conflicting and enforceable regulations/ laws regarding disability data collection nationally? • Are there any regulations governing the creation of a disaggregated and easy-to-access information system for persons with disabilities? • Are there laws and regulations governing data collection of persons with disabilities in the DTKS (Social Welfare Integrated Data) format and a disability data information system regarding the coverage of persons with disabilities who receive social protection? • Is there a data collection tool for persons with disabilities adopting Human Rights principles and covering all types of disabilities? • Has there been a mapping of the constraining conditions for persons with disabilities? • Are there mechanisms and measurable steps to involve DPOs in the planning, implementation, analysis, and dissemination of disability data? • If so, are there persons with disabilities and DPOs involved in these mechanisms and steps?

Article	Indicator	Question Narrative
		• Is there an inter-institutional coordination mechanism that carries out disability data collection, both regionally and nationally, to ensure data alignment and accuracy? • Who is involved in the coordination mechanism? • What is the monitoring and evaluation process for this mechanism?
	Process	• [RELATED TO DATA COLLECTION, PROCESS INDICATORS], is there an implementation mechanism and technical guidance on data collection for persons with disabilities? • Do the data collection mechanisms and instruments produce disaggregated data based on various disabilities, environmental barriers, age groups, gender and socio-economic conditions that are regularly updated as a reference for the formulation of policies and programs at the national and regional levels? • Have the government and local governments used disability budgeting nomenclature in program regulatory documents?
	Outcome	• [RELATED TO DATA COLLECTION, OUTCOME INDICATORS], are there available technical guidelines for data collection of persons with disabilities with disabilities? • Are there disaggregated data obtained from censuses and surveys based on the variety of disabilities? • Or based on environmental constraints? • Or age group, gender and socio-economic conditions, all of which are updated regularly as a reference for formulating policies and programs at the national and regional levels? • Is there data on the use of disability nomenclature in the legislation?

Article	Indicator	Question Narrative
		• Is there data on the use of disability budgeting nomenclature in regulatory documents in government and local government programs.
Article 32 International Cooperation	Structure	• [RELATED TO INTERNATIONAL COOPERATION, STRUCTURE INDICATORS], is there any legislation that underlies the Indonesian state to cooperate with other countries in efforts to respect, protect and comply the Rights of Persons with Disabilities?
	Process	• [RELATED TO INTERNATIONAL COOPERATION, PROCESS INDICATORS], is there a mechanism to ensure that every international cooperation mainstream disability issues? • If so, what is the contribution of Persons with Disabilities and DPOs who participate in the development of mechanisms or tools that ensure the mainstreaming of disability issues in any international cooperation? • What is the role of disability in this engagement? • Is there an international cooperation mechanism that facilitates the exchange of information and experiences, training, good practices, research, scholarships, and technology transfer between Indonesia and other countries? • If so, what is the contribution of persons with disabilities and DPOs who participated in the preparation of the mechanism? • What is the role of persons with disabilities in the engagement?
	Outcome	• [RELATED TO INTERNATIONAL COOPERATION, OUTCOME INDICATORS] Is there any data on international cooperation related to efforts to respect, protect, and comply the Rights of Persons with Disabilities?

Article	Indicator	Question Narrative
		• How many international collaborations have been successfully established in the context of respecting, protecting, and complying the Rights of Persons with Disabilities? • What are the impacts resulting from the international cooperation that has been established? • How many Persons with Disabilities can benefit from the results of the international cooperation that has been built?
Article 33 Implementation at the National Level and Monitoring	Structure	• Regarding International Cooperation, are there data on international cooperation related to efforts to respect, protect, and comply the Rights of Persons with Disabilities? • How many international collaborations have been successfully established in the context of respecting, protecting, and complying the Rights of Persons with Disabilities?
	Process	• Is there a monitoring and evaluation system for the implementation and progress of human rights for persons with disabilities? • Is there a mechanism for monitoring efforts to respect, protect, and comply the Rights of Persons with dDisabilities by KND independently? • If so, what is the contribution of persons with disabilities and DPOs who participate in the preparation of public policies, planning and implementation of development at the National, Provincial, City/District to rural areas? • What is the role of persons with disabilities in the engagement?

Article	Indicator	Question Narrative
	Outcome	• Is there a monitoring tool for the implementation of progress on human rights for disabilities? • Is there any training on the use of monitoring tools before observers conduct monitoring? • Is the monitoring tool easy and accessible when used by observers? • What are the results of the monitoring and evaluation reports on human rights progress? • Is there any follow-up data on complaints and findings by KND? • If so, what is the implementation process of the follow-up mechanism that has been implemented? • How many persons with disabilities can access the mechanism?

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DISABILITY RIGHTS

A Guide to Monitoring Compliance

As a state actor and duty bearer, the Indonesian government is obliged to periodically report to the United Nations on the progress of UNCRPD implementation. Therefore, an instrument is needed to monitor and evaluate the implementation of UNCRPD and various regulations regarding respect, protection, compliance and promotion of the rights of persons with disabilities in Indonesia.

Jaleswari Pramodhawardani,
Deputy V of the Presidential Staff Office

One way to pursue this is monitoring the rights of Persons with disabilities compliance on an ongoing basis. In this regard, I welcome the initiative and collaboration of several organizations of Persons with disabilities to develop guidelines on indicators and monitoring instruments on the dynamics of the rights of Persons with disabilities compliance in Indonesia. This initial step should be appreciated because this guide can serve as a reference and help policy makers and implementers better understand efforts to protect, respect, and comply with the rights of Persons with disabilities. Thus, the governance of the various laws above can really be implemented and an inclusive Indonesia can be achieved.

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Kementerian PPN/ Bappenas

KANTOR STAF PRESIDEN

JPODI JARINGAN PEGIAT DAN ORGANISASI DISABILITAS INDONESIA

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