



Indonesia Inklusi Bulletin

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Perkumpulan Pamflet Generasi
Linking and Learning Indonesia



Jakarta
Perkumpulan Pamflet Generasi

Indonesia Inklusi Bulletin

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PREFACE

Writing and storytelling are two of the most exciting methods of conveying ideas. Through texts, we can discover whether or not the process of making changes is successful. In the midst of collaborative cooperation made by communities to support social inclusion, the experiences shared by individuals and groups from various backgrounds turn out to be essential variables to read, learn, imitate, or adapt.

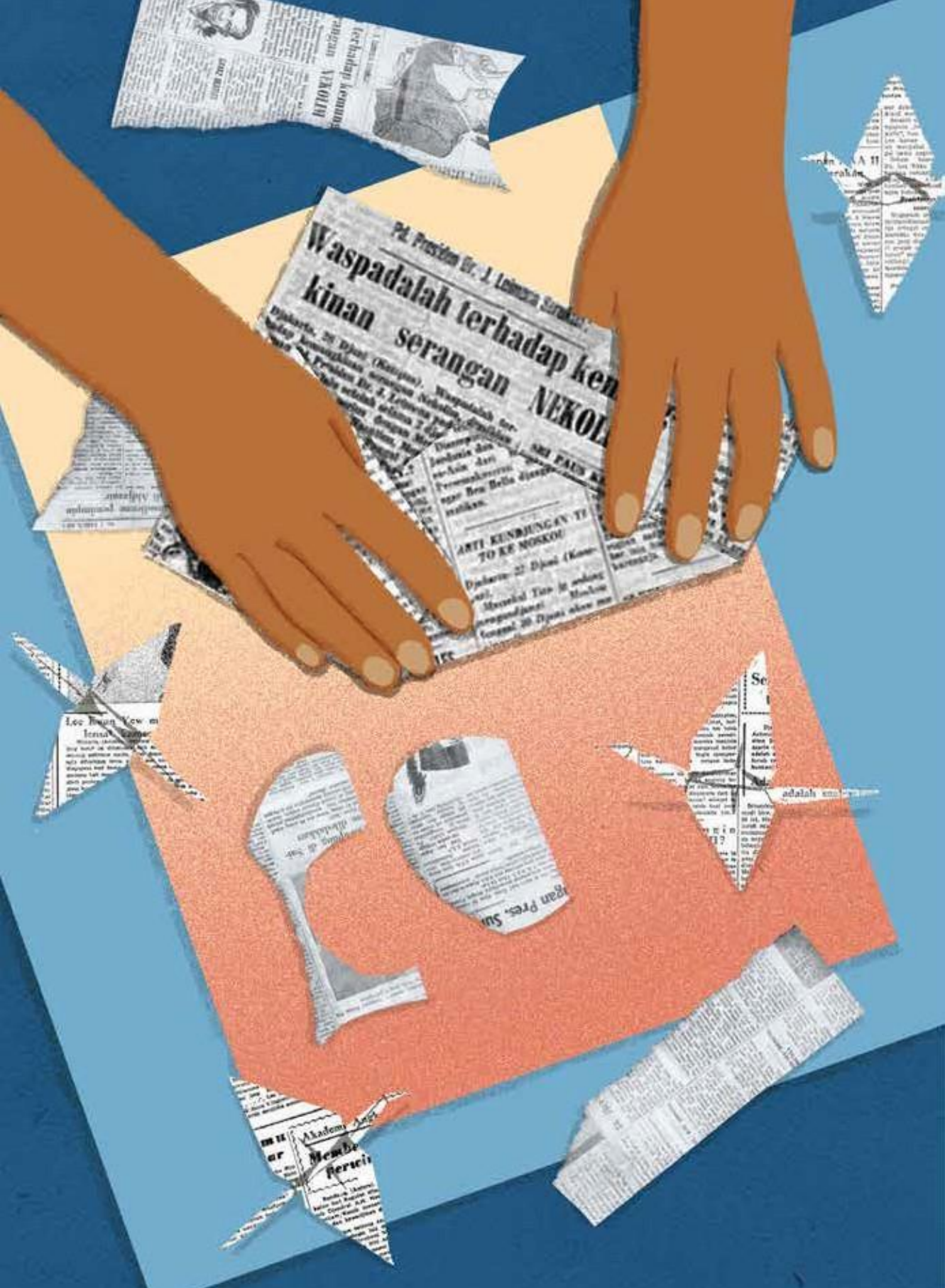
Indonesia Inklusi, encompassing 1) people with disabilities, 2) women who encounter violence and exploitation, 3) gender and sexual minority groups, 4) vulnerable groups, especially the elderly and young people, and 5) indigenous peoples and ethnic minorities offer a wide range of stories and experiences in promoting social inclusion. Partners coalesced in Indonesia Inklusi acknowledge the importance of documenting these stories in a written form as a guide for fellow community members and society. Such a fact has encouraged us to compile this **Indonesia Inklusi Bulletin**.

This bulletin is the outcome of the collaboration of various organisations. The articles in this bulletin are expected to contribute to the efforts to encourage inclusiveness. Pamflet, as a facilitator, is honored to have supported the completion of this bulletin.

We would like to extend our gratitude to the authors of this first-edition bulletin, VOICE Global, Yayasan Humanis dan Inovasi Sosial (Hivos Foundation), and all members of Indonesia Inklusi. We highly expect this bulletin as a collaboration product to encourage social inclusion and foster our spirit for collaboration in the future.

Regards,

The Pamflet Team





HAVING BEEN DISCRIMINATED AGAINST FOR DECADES, THE GOVERNMENT SUPPORT JUST HAS BEEN GRANTED IN THEIR OLD AGE

Author: Osi Naya Fia

Organisation: Indonesia untuk Kemanusiaan (IKa) or Indonesia for Humanity

His memories of how his father was tortured before him are crystal clear. It was 1965, and he was only seven years old. Since then, he has become a friend with nightmares, fears, trauma, and sorrow, even up to this day, in his 63.

The incident began after the Maghrib (dusk) prayer when his front door was smashed. He got closemouthed and thunderstruck while chowing down a plate of white rice and side dishes. About 10-15 people in military uniforms raided his house. At that time, civilians were immensely accused of being members of the

Indonesian Communist Party (PKI). After brutally beating his father and grandfather, the men in military uniform took them away. As a seven-year-old kid, he could not help but cry out loud after witnessing his father being tortured and carried off. A few days later, his father returned with a body full of bruises and wounds.



Several days went by normally, and nothing happened. Until one day, people in military uniforms returned to his house. Knowing their coming, his father immediately dashed as fast as he could and jumped into the well to hide. Being sympathetic, he hid near the well, exposing his father's bolthole. His father was pulled out of the well, brutally beaten, and, again, carried off. That was the last time he saw his father.

The little kid's misery should be coupled with the left of his mother. The mother, hit by the trauma of that terrible event, left the house and abandoned him and his four years old sibling. After losing his parents, he and his sibling lived with their grandparents. Since then, he has endured several tough days.



The school, which was meant to be a place to learn, turned into a place where he was bullied. Even a teacher labelled him a traitor's son and forbade him to go to school. He suffered from hunger every day. He could only drink water from the garden during school breaks and eat fallen fruits. Sometimes, he even ate raw cassava as he

could not stand his hunger. He could make himself pass through bad days, but his younger sibling, a toddler, failed to survive and eventually passed away. Due to a lack of support from his teachers, he could only complete the fourth grade of primary school.

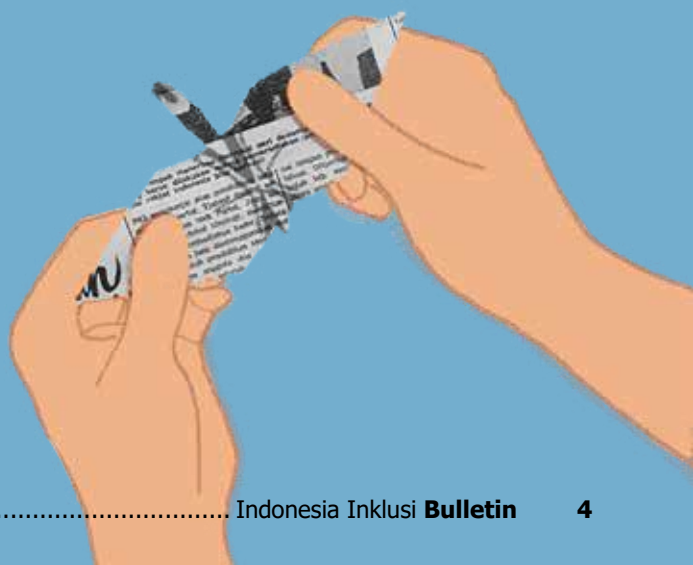
When he was ten years old, his talent in drawing began to develop and eventually became a source of income to survive. He could afford food from the sold artworks. However, when nobody bought his artwork, he must brace himself not to eat that day. Rice, for him, was a luxury food that he rarely consumed. Time flies, but the gloomy experience haunts him in every stage of his life.



Turning into an adult, he often daydreamed and found it hard to concentrate, making it even harder to get a job. At the same time, he often encountered discriminatory actions. There was a time when the National Identity Cards (KTP) of him and his family were marked with ET, which means Ex-political prisoner. Due to that label, he had less opportunity to socialise and get a job. He made kids' toys out of cardboard, drew colouring books, and produced crafts out of old newspapers to meet his daily necessities as he couldn't get a job. As time went by, he realised that apart from sustaining his daily life, actively creating handicrafts had helped him cope with his trauma.

Decades later, he turned into an elderly. Many things have changed. Now, in his old age, he can easily

breathe as he receives equal rights as a citizen after so many discriminatory actions. As an elderly, he receives a variety of aids, particularly during the COVID-19 pandemic. Indeed, it is an uneasy task to get over his past trauma. Nevertheless, with the proper support and approach, the trauma is possibly be cured. For this reason, IKa cooperates with VOICE to provide facilitation for the victims of past human rights violations and help them access health, social, and economic support from the Government, as the young kid, who has turned into elderly, received. Undoubtedly, this work requires a long way to go. Hopefully, the Government and the relevant stakeholders' collective efforts can be consistently performed and provide a concrete result for future human rights enforcement.



INTEGRATION OF SOCIAL SECURITY INTO THE PROTECTION MECHANISMS FOR THE RIGHTS OF WOMEN HUMAN RIGHTS DEFENDERS (WHRDs) IN SERVICE PROVIDER AGENCIES

Author: Fatkhurozi
Organisation: IPROTECTNOW

Risks of WHRDs Acting as Facilitators

Women Human Rights Defenders (WHRDs) who work for women victims of violence, exploitation, and discrimination endure multiple risks, threats, violence, and vulnerabilities. There are at least 3 (three) characteristics of risks, threats, violence, and vulnerabilities experienced by WHRDs of the women violence victims facilitators in service provider agencies. First, risk due to their status as Human Rights

Defenders. Second, particular risk due to their status as Women Human Rights Defenders. Third, risk due to their work related to services or facilitations for women victims of violence, exploitation, and discrimination. Furthermore, they also received attacks based on identity and vulnerability status identical to WHRDs, for example, WHRDs with persons with disabilities, WHRDs with HIV, WHRDs from ethnic or belief minorities, WHRDs from sexual and gender minorities, WHRDs from young age groups, WHRDs from elderly



groups, and WHRDs from survivor groups.

As human rights defenders, WHRDs are often exposed to threats and acts of violence, such as being subject to killed, kidnapped, enforced

disappearances, tortured, arbitrary arrest and detention, criminal charges/criminalised, persecution, stigmatisation, operational movement constraints, termination of funding sources, delayed or prohibition from joining



organisations, prohibition of assembly, and illegal house and office demolition and search (UN Human Rights Council, Report of the Special Rapporteur on the Situation of Human Rights Defenders, Margaret Sekagya, December 20, 2010).

Special Risks as Women and Facilitators to Victims

As women, WHRDs also frequently encounter a wide range of sexual violence from their spouses, including sexual harassment, rape, and domestic violence. At the same time, as women victim facilitators, WHRDs potentially expose the risk of accidents while facilitating the case,

limited time off, pressure and stress, heart attacks, strokes, miscarriages, irregular periods, vaginal discharge, and possibly even triggering uterine and breast cancer.

Therefore, protection and support mechanisms are necessary to fulfil WHRDs' rights comprehensively. The mechanisms should be more than security-related matters; they should also cover other rights, such as health insurance, occupational accident insurance, old-age insurance, housing allowance, and additional social security. These rights are critical to be fulfilled for WHRDs, both for themselves and their families, either threatened or not. The two types of WHRDs' rights are interrelated, interdependent, and inseparable.



For example, being threatened or under violence, which results in physical injuries, absolutely makes WHRDs demand health services.

IPROTECTNOW revealed that WHRDs with no health insurance often receive inadequate and unsustainable health services. It becomes worse when the recovery from the health impact requires significant medical expenses and treatment in the long term. Thus, such a common thing indicates that the treatment expenses are borne by the parents, WHRDs' families, and human rights activist networks.

Evidence Collection and Documentation

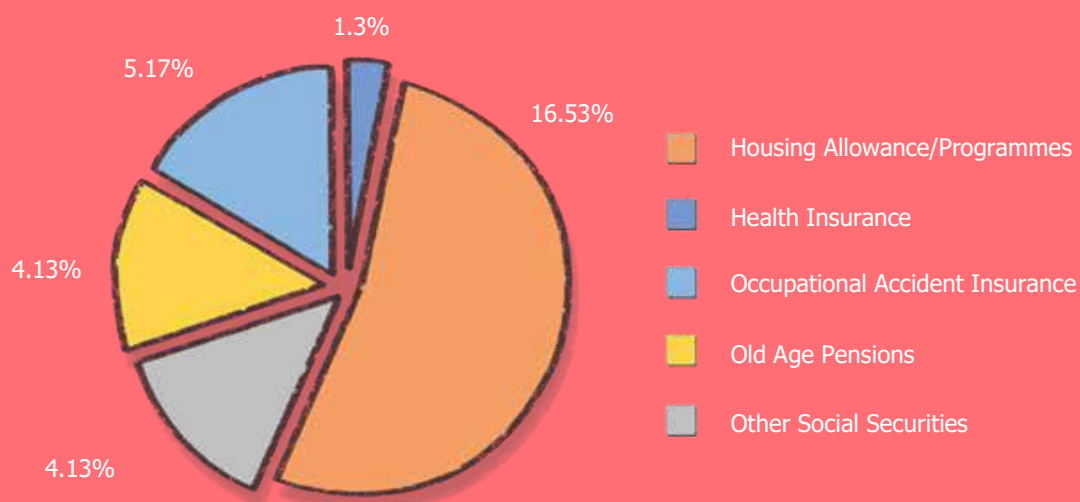
Based on the situation above, IPROTECTNOW, as the protection network for WHRDs acting as facilitators of victims, consisting of eight institutions in six provinces, strived to develop a comprehensive protection and support system. To

begin this measure, IPROTECTNOW conducted an assessment of the social protection status of WHRDs acting as the victim facilitators. The assessment provided information and evidence related to WHRDs' access and ownership of health insurance, occupational accident insurance, old-age insurance, housing allowances, education insurance, and other social securities. The assessment was particularly organised in the six provinces, covering North Sumatra, Bengkulu, DKI Jakarta, West Java, Central Java, and Southeast Sulawesi.

The assessment was conducted by employing questionnaires, interviews, focus group discussions (FGDs), and document analysis. As many as 57 respondents filled out questionnaires and were interviewed, which consisted of 35 respondents from WHRDs acting as the victim facilitators, 13 from leaders of service provider agencies,



Social Securities for WHRDs acting as the Victim Facilitators



7 from the Ministry of Women Empowerment and Child Protection, and 2 from the National Commission on Human Rights (Komnas HAM) and the National Commission on Violence Against Women (Komnas Perempuan).

WHRDs Lack Access and Ownership of Social Security.

As many as 50% of 35 WHRDs acting as women victim facilitators in six provinces stated that they own social security/protection programmes. The social security that most WHRDs own includes health insurance (54%), occupational accident allowance/insurance (13%), old-age

insurance (13%), housing allowance/programmes (3%), and other social allowances, such as education, employment insurance, and self-insurance (17%).

Most WHRDs pay social protection insurance premiums independently. The data demonstrated that 46% of WHRDs with health insurance pay the insurance premium independently, 21% jointly paid by WHRDs and the service provider agency at their workplace, 16% fully paid by the service provider agency at their workplace, and 17% paid by the Government. The last category is intended for those categorised

as poor or who work at the Regional Technical Implementation Unit for the Protection of Women and Children (UPTD PPA) of the Women Empowerment and Child Protection Office.

The funding for WHRDs' social insurance or security premiums paid by service provider agencies is sourced from funds of the cooperation programme with donor agencies. However, not all national and international donor agencies allocate funds to finance social security, particularly health and occupational accident insurance.

Upon the completion of collaboration with donor agencies, the social security financing for the WHRDs shall also be terminated, or WHRDs should bear the financing expense by themselves.

Social security services, such as health insurance, do not finance health problems related to reproductive health and childbirth. Several service provider institutions where WHRDs work provide financial support with various nominal amounts based on the financial capacity of the institutions. Unfortunately, health insurance provided by the National Social Security Agency (BPJS) does not cover the cost of the treatment and care of WHRDs experiencing threats, violence, or criminal actions.

Nevertheless, all service providers for women victims, both from the Government and the community, are aware of the importance of protecting and fulfilling WHRDs' rights to social security, including health insurance, occupational accident insurance, old-age insurance, education insurance, housing allowance, and other social allowances/security.





According to them, sufficient protection and fulfilment of social security rights for WHRDs will improve service quality, guarantee peace and security at the workplace, and sustain the service for victims.

However, the leaders of service providers and ministries have admitted that they have not established specific mechanisms to protect WHRDs' rights to social security. Yet, three institutions have implemented protection mechanisms for WHRDs in their institutions. Nonetheless, the mechanisms only highlight security protection from threats and violence and exclude the protection of WHRDs' rights to social security.

WHRDs' rights to social security,

especially health insurance, are included in financial policies, employment policies, or policies related to the human resource management of institutions. However, the scopes remain limited to WHRDs holding the institutional staff status. Meanwhile, WHRDs with the status of volunteers or interns do not reserve the right to protection.

On December 10, coinciding with World Human Rights Day, IPROTECTNOW disseminated the assessment results to WHRDs acting as the facilitators for victims, survivors, service providers, key stakeholders (central and local governments), NGOs, the National Commission on Human Rights (Komnas HAM), and the National Commission on Violence Against Women (Komnas Perempuan).



Policy and Capacity Reinforcement of Service Provider Institutions

The assessment results suggested a wide range of key recommendations to encourage government policies in reinforcing the support and capacity of service provider institutions and WHRDs networks at the national and local levels. The key recommendations are presented as follows:

- a. Encouraging the establishment of special policies to protect and support WHRDs acting as the facilitators for women victims both at the national and regional levels;
- b. Reinforcing the support and capacity of service provider institutions through awareness raising, preparation of comprehensive protection and support protocols for WHRDs, technical support for the implementation at the institutional level, and support for providing internet-based WHRDs documentation systems;
- c. Reinforcing the individual support and capacity and WHRDs networks acting as the facilitators for women victims through strengthening individual awareness and WHRDs network institutions, as well as facilitating mechanisms and sustainable fundraising to support WHRDs.



Building a Comprehensive Protection and Support Mechanism, as well as Information and Communication Technology-based WHRD Data System

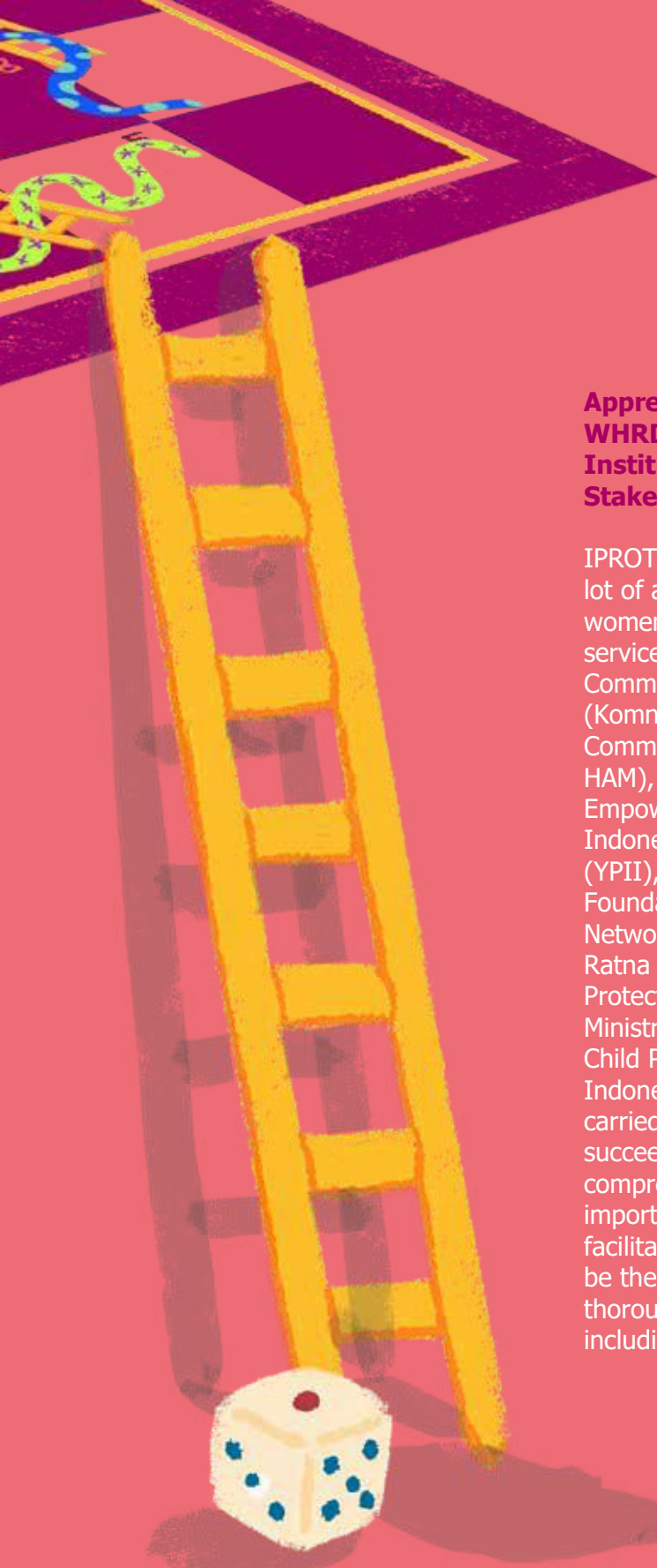
Only four days after the dissemination of the assessment results, IPROTECTNOW, in collaboration with consortium members, WHRD representatives,





and experts, discussed the protocol concept finalisation of a comprehensive WHRDs' rights protection and support, which includes protection insurance, social security, and the reporting and documentation systems for WHRDs acting as the facilitators for victims in service provider institutions. The discussion resulted in a draft and agreed on two crucial documents: 1). Principles and standards for the protection of economic, social, and cultural rights for WHRDs acting as the facilitators for victims in service provider institutions, and 2). Protocols for social security protection and

support for WHRDs act as the victims' facilitators in service provider institutions. The two documents were agreed to be developed by adopting international and national human rights legal instruments, particularly the Declaration on Human Rights Defenders, the Universal Declaration of Human Rights, the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social, and Cultural Rights, and the Convention on the Elimination of All Forms of Discrimination against Women.



Appreciation and Support from WHRDs, Service Provider Institutions, Governments, and Key Stakeholders

IPROTECTNOW's efforts have received a lot of appreciation and support from women victims facilitators of WHRDs, service provider institutions, the National Commission on Violence Against Women (Komnas Perempuan), the National Commission on Human Rights (Komnas HAM), the Ministry of Women Empowerment and Child Protection, the Indonesian Human Protection Foundation (YPII), the Indonesian Legal Aid Foundation (YLBHI), and the Protection Networks for Human Rights Defenders. Ratna Susianawati, the Deputy for the Protection of Women's Rights of the Ministry of Women Empowerment and Child Protection of the Republic of Indonesia, appreciated the assessment carried out by IPROTECTNOW, which has succeeded in providing more comprehensive insight regarding the importance of protection for victim facilitators. Hopefully, this assessment will be the first step in realising adequate and thorough protection for victim facilitators, including their rights to social security.***



MATERIALISING DECENT WORK FOR DOMESTIC WORKERS

Author: Budi Susilo

**Organisation: Institute for Community
Research and Development (LPKP) of
East Java**

The state has not recognised the profession of domestic workers. Such a condition has impacted domestic workers' rights to decent work, which remain unmet. As a result, many domestic workers are treated inhumanely, receive substandard salaries, and even experience violence and torture. The absence of laws regulating domestic workers has become one of the causes of this situation.

Based on data from the International Labor Organisation (ILO) in 2015, the number of domestic workers in

Indonesia amounted to 4.2 million, which was predicted to rise continuously. As many as 84% of this number are women, and 14% of them are underage. This data demonstrates that child labours are potentially employed as domestic workers.

Referring to the ILO Convention No.189 on decent work for domestic workers, domestic workers mean any person engaged in domestic work within an employment relationship, and therefore, they reserve the same rights as other workers. Although the Government of Indonesia has not

ratified ILO Convention No. 189, decent work for domestic workers has been conditioned and promoted through the Regulation of the Minister of Manpower No. 2 of 2015 concerning the Protection of Domestic Workers. The regulation stipulates that there must be a written work agreement specifying the work requirements and the rights and obligations of the domestic worker, the employer, and the outsourcing agency of the domestic worker. One of these requirements states that domestic workers must be at least 18 years of age.

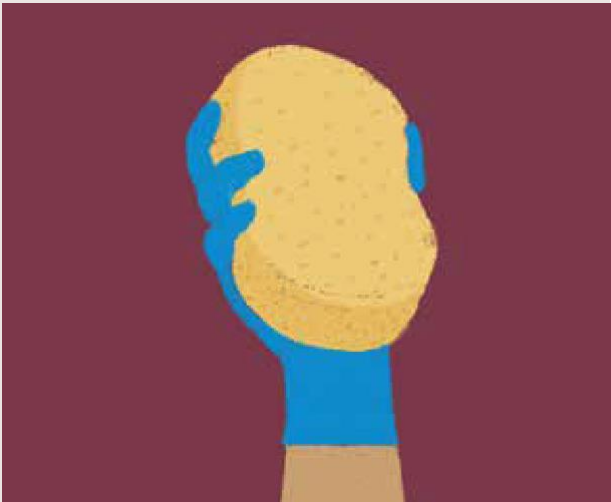
The materialisation of decent work requires strategic promotion actions, which emphasise that domestic work employing underage is the worst job for children and demands immediate action. Therefore, protection insurance within the family, community, and state should be encouraged to materialise decent work for domestic workers.

From 2014 to 2018, with the support of ILO, the Institute for Community Research and Development (LPKP) of East Java collaborated with the Networks for the Elimination of Child Labour in Indonesia (JARAK). Afterwards, VOICE continued this collaboration by organising a promotion programme entitled "Decent Work for Domestic Workers and the Elimination of Child Domestic Workers" in the Malang Extended Urban Area (Malang

Raya) Outreach, establishment, and mentoring of the domestic workers communities in Malang Raya were executed by adopting two models of approach, namely (1) outreaching the workplaces of domestic workers and establishing the Community-based Monitoring team (CBM), and (2) outreaching and establishing domestic worker communities around the residence of domestic workers.

Outreaching the workplaces of domestic workers and establishing the Community-based Monitoring team (CBM)

This outreach model was applied in relation to the supervision of domestic worker outsourcing agencies and users, as stated in the Regulation of the Minister of Manpower No. 2 of 2015, which has not been thoroughly implemented since the Manpower Offices do not recognise domestic workers to be a job they are responsible. Therefore, it is crucial



to involve neighbourhood units (RT), community units (RW), Family Welfare Empowerment (PKK), cadres, and security guards in community-based monitoring for domestic workers/child domestic workers. Outreach and piloting the establishment of the CBM team for domestic workers and child domestic workers was first carried out in one of the RTs in an elite residential area in Malang City. The structural management of the CBM team consists of the Head of the Village as the Advisor, the Heads of RTs as the Coordinators, and the Head of PKK in RTs as the Chief of the CBM team, with members of PKK cadres and security guards. The monitoring results revealed data on the rights and obligations, age, place of origin, and working hours of 45 domestic workers. As a result, 17 domestic workers work every day and reside away from the place of one's employment (live out), 28 work every day and reside at the place of one's employment (live in), and 3 of the live-in workers are

identified as child domestic workers. The piloting results of the monitoring activities at the RT level were then developed at the RW level (two CBM teams in Malang City and one CBM team in Malang Regency), which identified 119 domestic workers, of which 3 were child domestic workers.

Outreaching and establishing domestic worker communities around the residence of domestic workers

In 2015, outreach, establishment, and mentoring were carried out for five domestic worker communities (three communities in Malang City and two in Malang Regency). In 2016, there were four additional domestic worker communities in the Malang Regency area, and in 2017, two more domestic worker communities were established in the Batu City area. Currently, the total number of domestic worker communities established in Malang Raya amounts to 11 communities.



On February 19, 2017, domestic worker communities in Malang Raya established a domestic worker organisation called ANGGREK MAYA, which stands for Asosiasi Gerakan Revolusi Kerja Malang Raya (Association of the Work Revolution Movement in Malang Raya), encompassing 395 domestic workers.

Six months after its establishment, ANGGREK MAYA was declared on August 18, 2017. The declaration of the establishment of ANGGREK MAYA was attended by influential figures, such as Michiko Miyamoto, ILO Country Director for Indonesia; Ahmad Marzuki, the Director of JARAK; Yoyok Wardoyo, the Head of Manpower Office of Malang; and Anwar Sholihin, the Director of LPKP. They expressed their valuable appreciation for the declaration of ANGGREK MAYA.

Domestic worker communities throughout Malang Raya declared that they remain to encounter vulnerable situations and are unrecognised as workers. As a result, domestic workers have long working hours, low wages, do not have social security, and are vulnerable to violence. For this reason, domestic workers, the members of the domestic worker organisation in Malang Raya, have proclaimed themselves as ANGGREK MAYA (Association of the Work Revolution Movement in Malang Raya) to materialise decent work for domestic workers. ANGGREK MAYA expects the following changes:



1. Decent wages for domestic workers;
2. The Government ratifies the ILO Convention No. 189 on Decent Work for Domestic Workers immediately;
3. Domestic workers are treated equally to other workers;
4. Avoid recruiting domestic workers under 18 years old.

Afterwards, ANGGREK MAYA formulated the Articles of Association and Bylaws, officially ratified by a notary public on August 08, 2018, and stipulated through the Decree of the Ministry of Law and Human Rights No. AHU 0009963. AH.01.07 Tahun 2018. The monitoring of the LPKP of East Java for ANGGREK MAYA and the CBM team is carried out through regular meetings, joint coordination among administrators, training, and facilitation in the following activities:



1. **Community-based Domestic Worker Course.**

Each community organises the learning process for the domestic worker course. Theoretical materials are provided through regular meetings at night, while practical materials take at Tumapel Vocational School, majoring in Hotel and Restaurant Management, with adequate equipment every Sunday.

The competency-based domestic worker course curriculum refers to the 2015 Indonesian National Work Competency Standard (SKKNI), which consists of three technical materials.

Housekeeping serves as the first material, which includes skills in cleaning kitchens, bathrooms, toilet facilities, family rooms, and

bedrooms; applying basic principles of environmental cleaning; and operating cleaning equipment. The second material is laundry, which covers competence in washing and ironing clothes and linen. The last one is family cooking, which includes competence in basic cooking methods; cooking types of dishes; cooking foods with animal proteins; making soups, appetisers, desserts, and drinks; and serving food and beverages.

The core material to strengthen the domestic workers' critical attitude includes five competency units: equipping them with the knowledge of working conditions and risks, applying Occupational Health and Safety.

procedures in the workplace, equipping them with essential documents and protection, cooperating with others in the work environment, and developing emotional maturity and work motivation.

2. Centralised School for Domestic Workers

It refers to the process of the domestic workers learning activities carried out centrally in a designated studio for 20 effective days. There are 10 learning sessions each day, with 45 minutes allotted for each session. The learning materials correspond to those provided to the community-based school for domestic workers, i.e., technical (family cooking and housekeeping) and core materials. However, the centralised school for domestic workers is intended for those who will soon start working as domestic workers.



After completing 200 hours of learning, prospective domestic workers can take the competency exam at the LSP Nusantara (Professional Certificate Institute) and obtain a competent certificate if they pass it.

3. **A tripartite plus meeting.**

The meeting involved ANGGREK MAYA, service users, labor unions, APINDO, and the Manpower Office to discuss the draft of the Domestic Workers' Work Agreement.

In general, the substance of the work agreement was considered adequate. However, several points need more attention: (a) the recommended wage for domestic workers based on the survey results reached an average hourly rate of IDR10,000; (b) social security in the form of the National Social

Security System for Workers can at least be borne jointly by the domestic workers and the service users. Following the meeting, nine pairs of service users and domestic workers were engaged to test the written work agreement. Besides, an organisation for the service users was established, consisting of those involved in the test.

4. **Campaign on Decent Work for Domestic Workers**

The campaign was performed in the car-free day event involving ANGGREK MAYA and the PBK team. They presented posters containing decent work indicators for domestic workers and distributed napkins to the community, which read *PRT adalah Pekerja Rumah Tangga dan Stop PRTA* (PRT are Domestic Workers and Stop Child Domestic Workers).



5. Dissemination of Decent Work for Domestic Workers and Elimination of Child Domestic Workers in Malang Raya (Malang Extended Urban Area)

This activity is carried out periodically through an interactive dialogue at RRI Malang (radio station) with the Institute for Community and Development Studies (LPKP) of East Java, ANGGREK MAYA, Malang Regency Manpower Office, and Malang Regency Education Office.

6. Paralegal training

The activity was attended by the ANGGREK MAYA administrators and the administrators of the domestic workers' community facilitated by the Integrated Services Centre of the Women and Children Empowerment (P2TP2A) and Woman Crisis Centre Dian Mutiara to enhance insight and take early action for cases experienced by domestic workers.

7. Formulation of the Academic Paper on the Regional Regulation Draft (RAPERDA) on the Domestic Workers Protection

The activity was attended by women activists in Malang involving ANGGREK MAYA. It resulted in a zero draft of the RAPERDA on the Domestic Workers Protection in Malang Regency, which the Regional House of Representatives accepted in 2018. Unfortunately, up to this point, there has been no follow-up action as expected.





By observing the changes during and after the process of mentoring its members' attitudes, knowledge, and skills, ANGGREK MAYA is reckoned to have improved and become more professional in performing its responsibility. More appreciation for domestic workers can be found in the salary increase, overtime payment for those having more working hours, and additional transportation fees. Besides, the domestic workers' relations with service users have improved, with few complaints recorded. Even many service users support their domestic workers to participate in ANGGREK MAYA activities.

The Government of Malang Regency also provides support by implementing learning activities at Community-Based and Centrally-Based Schools for Domestic Workers. It is stated in the Regulation of Malang Regency Regent Number 4 of 2018 concerning Improving the Competence of Women Domestic Workers, which provides opportunities to improve their competencies.

ANGGREK MAYA slowly gains popularity and is in high demand, ranging from domestic affairs to public interests. Many seek domestic workers' services from school graduates, including Go Clean service companies. The Government of Malang also engages ANGGREK MAYA in discussing the issue of Women and Children.

Nevertheless, ANGGREK MAYA's duties to realise decent work for domestic workers and prevent child domestic workers remain uncompleted. The achievements and efforts they have taken can prompt and equip them to deal with challenges and mobilise domestic workers throughout Malang Raya. Several actions should be carried out, including advocating, proposing a funding plan for domestic workers' schools through the Local Budget (APBD) to the Malang Regency Government, promoting decent work for domestic workers, overcoming child domestic workers through a model development for the PBK Team at the RT/RW level in Malang Raya,

networking with related service institutions and agencies, and overseeing the zero draft of the RAPERDA on the Domestic Workers Protection in Malang Regency, whose development remains stuck in the Regional House of Representatives.

Realising that this challenge is a difficult job for ANGGREK MAYA, assistance from the East Java LPKP and support from various parties remain necessary to fulfil legal protection and the rights of domestic workers.







NATIONAL HEALTH INSURANCE FOR PERSONS WITH PSYCHOSOCIAL DISABILITIES

Author: Ratna Dewi

Organisation: Perhimpunan Jiwa Sehat Indonesia/PJS (Indonesian Mental Health Association or IMHA)

I am a woman with bipolar disorder type 1 who has fully recovered and can now engage in activities as others do. I have struggled to recover since 2011 through various types of medication, consultation sessions with psychiatrists, and taking anti-depressants and mood stabilisers. At first, the hope of recovery was barely visible. Even my family and I doubted it and felt hopeless.



However, it turns out that the struggle I lived through for years has paid off. I have recovered, and now I have managed to work again. Even though I can do daily activities, as a person with bipolar, I still have to take medicine and see a psychiatrist regularly. Indeed, it costs a lot of money. I spend three million rupiahs per month on consultation fees and medicines. Due to the high cost of medical treatment, it is not surprising that many people with mental disabilities are desperate and decide not to see a doctor. Fortunately, the cost of psychiatric assessments and medicines can now be borne by BPJS Kesehatan or the National Social Security Agency for Healthcare.

However, it seems that the dissemination by the Government for this programme has not been optimised. Many patients with mental health problems are neglected because they do not have the money for treatment and are unaware that the BPJS Kesehatan programme now covers mental



healthcare/psycho healthcare. In fact, BPJS Kesehatan has started to cover the cost of treating psychosocial disabilities since 2014, which includes consultation fees

and medical expenses. All mental health problems can be covered by BPJS Kesehatan, both for outpatient and inpatient care costs.

Now, people can register for the BPJS programme online without coming to the nearest office. They can register for BPJS Kesehatan by downloading the National Health Insurance application on smartphones and completing the population administration data required. At this stage, prospective users may choose the location of the first-level health facility and the desired amount of inpatient class fees. After the first payment has been made, the users are officially registered in the BPJS Kesehatan programme, and the card received can be used with an active waiting period for the next 15 days. The programme is also considered accessible. People only need to come to the First-Level Health Facility,





magical or mystical (many Indonesians still believe that mental disorders are non-medical condition).

such as the nearest Community Health Center or clinic, for an initial consultation; then, if required, they will be referred to a psychiatrist at a certain hospital for further treatment.

Who is eligible?

Anyone with a mental/psychosocial disabilities can utilise BPJS Kesehatan for mental health care. People with mental/psychosocial disabilities experience changes in thoughts, attitudes, behaviours, and feelings that cause suffering and impair daily functioning. WHO data released by Tempo.com on February 2, 2020, indicated that 1 in 4 people worldwide has mental/psychosocial disabilities. Mental/psychosocial disabilities are considered medical condition, not

Orang dengan Gangguan Jiwa (ODGJ), or People with Mental/Psychosocial Disabilities, is an official Indonesian term for people with mental/psychosocial disabilities based on Law number 18 of 2014 on Mental Health. In Indonesia, people with mental/psychosocial disabilities have not fully received good treatment and their human rights have not been fulfilled entirely. In the health sector, the State or Local Budgets have not funded health insurance for People with Mental/psychosocial disabilities. Another problem is that there is no integration of mental health services at an Integrated Health Services Post, nor is there a psychiatrist at every Community Health Center in Indonesia.

It requires further dissemination

The fact that many people do not learn that BPJS Kesehatan can be used for mental/psychosocial disabilities proves that the dissemination programme should be optimised for the BPJS Kesehatan programme. BPJS Kesehatan should involve communities and organisations with mental/psychosocial disabilities in its dissemination programme, so that information can be more appropriate and target the people in need. It is also necessary to expand the dissemination scope to include various communication platforms such as conventional media (television and print), social media, webinars, and talk shows.



Besides, the coordination and dissemination with health facilities are considered essential, for instance, by organising CRPD (Convention on the Rights of Persons with Disabilities) training for health workers so that health workers are trained to treat people with mental/psychosocial disabilities more humanely and compassionately. The

health workers are expected to perform home visits, especially in remote areas, which still implement the practice of *pasung* (a form of restraining traditionally used in Indonesia) for family members with mental/psychosocial disabilities.



Mental/psychosocial disabilities is not a disgrace; people with mental disabilities can still recover with medication and the proper support. Additionally, regular mental health examinations are crucial because the earlier the problem is identified, the quicker the recovery will be. The Government, healthcare organisations, and community leaders should perform collective and continuous efforts to uphold the rights of people with mental disabilities so that they can live equitably, independently, and actively in all aspects of life.***



PROVINSI SUMBA TENGGARA TIMUR
KABUPATEN SUMBA TIMUR

NIK : 531115XXXXX0001

Nama : UMSU RENDI
Tempat/Tgl. Lahir : WANGAPU 03/03/2000
Jenis Kelamin : Laki-laki Gol. Darah : B
Agama : KRISTEN
Kecamatan : KAMPUNG BAKA PRALU
Desa : PRALU
Kode Pos : 99999
Pekerjaan : SEUMUR HONOR

SUMBA TIMUR
16-03-2001

KEMENTERIAN DALAM NEGERI

MARAPU, THE INCREASINGLY EXCLUDED AND ISOLATED RELIGION OF THE ANCESTORS

Author: Anton Jawamara

Organisation: Sumba Integrated Development

Kampung Raja Prailiu is the only traditional village located in the middle of Waingapu City, East Sumba Regency, East Nusa Tenggara Province. In that village, Marapu, the increasingly isolated religion of the ancestors, continues to live and grow. In the early afternoon of December 2021, I visited Kampung Raja Prailiu to meet Umbu Remi (41), a native of Kampung Raja Prailiu and a Marapu believer.

On one of the verandas of the traditional house, Umbu Remi sat cross-legged on a white mat, smiling at me coming. He wore a red and blue headband, which matched the traditional *tenun* (woven textile) produced by East Sumba women wrapped around his waist and shoulders. He looked dashing with an ivory-handled machete tucked in his waist as a symbol of the knights and wisdom of the Sumba people.



Uumbu Remi handed me a woven pandanus container filled with *sirih* (betel nut), a few slices of dried *pinang* (Areca nut), and *kapur* (hydrated lime) while inviting me to sit down. Serving the *sirih pinang* is a form of appreciation for every guest who visits the house of the Sumba people. I enjoyed the *sirih pinang* while starting to ask how he and his family were doing. Of all eight siblings in his family, only Uumbu Remi remains a Marapu believer. The other seven siblings have converted to one of the Abrahamic religions, while Uumbu Remi and his nuclear family remain

Marapu followers.

"My family and I are believers of Marapu, the original religion of Sumba people. I am very proud to be a Marapu, embracing the religion of my ancestors existing long before this country," said Uumbu Remi with a smile.

I was curious about what had kept him consistent as a Marapu believer while many people had left Marapu.

"Marapu is the native religion of the Sumba people. It encompasses all values of life in modern religions. The principles derived from Marapu reach the entire order of life. The purpose is to organise individual and community behaviour systems to achieve peace, prosperity, and harmony with all elements of nature. So, if Marapu has it all, why should I convert to another belief?" explained Uumbu Remi.

Our conversation shifted to Uumbu Remi's experience as a Marapu believer. He experienced various challenges because of his firmness in holding onto the belief of the ancestors, one of which was when Uumbu Remi did not obtain the right to religious education. He told me how he was forced to learn the

subject of one of the majority religions since Marapu was not included in the list of religious subjects at his school. In addition, he stated that he had difficulties as a Marapu believer in applying for civil administrative documents such as the Identity Card (KTP), Family Card (KK), and Birth Certificate, so he and his family could not access various assistance from the Government. Moreover, he was even labelled as an infidel and heretical by the people who were not Marapu believers.

Conscious of His Rights

Despite all the challenges he has experienced, Umbu Remi, a believer in an ancestor religion, is conscious of his rights as a citizen. Umbu Remi knows very well that education is one of the basic rights of citizens that must be fulfilled by

the state according to the mandate of the Preamble to the Constitution. He also acknowledges that the decision of the Constitutional Court (MK) Number 97/PUU-XIV/2016 has expanded the definition of religion, including the definition of belief in God Almighty. It means that the state has recognised Marapu and its believers, so they reserve equal rights with other religions' believers. Accordingly, the religion field in his civil administrative documents can no longer be left blank.

Furthermore, as the realisation of the Constitutional Court's decision, in 2016, the Ministry of Education, Culture, Research, and Technology issued Regulation of the Minister of Education and Culture (Permendikbud) Number 27 of 2016 concerning Educational Service about Beliefs in God Almighty. The Ministry has also compiled



Guidelines for the Implementation of Educational Service about Beliefs in God Almighty in education units (schools). The Permendikbud, Umbu Remi continued, regulates believers' right to education and learning services. The regulation states that, among others, there must be educators qualified as teachers according to their expertise and a curriculum for religious education consisting of core and basic competencies, syllabuses, lesson plans, and textbooks.

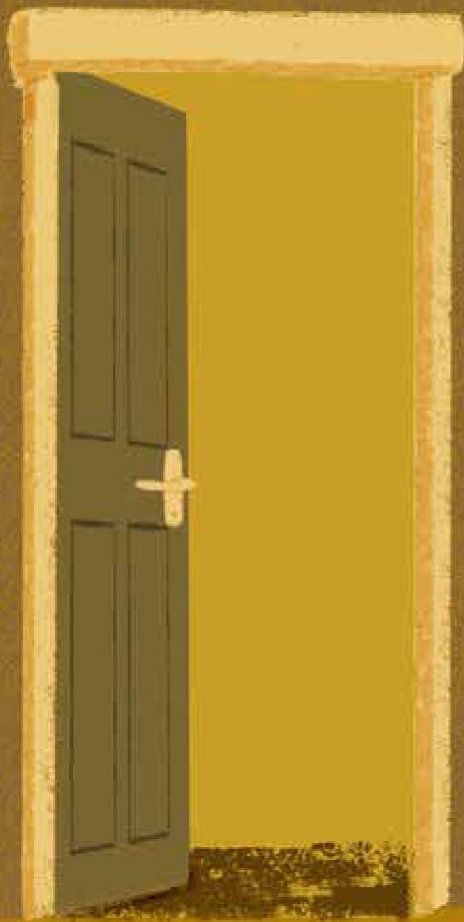
The central and regional governments and schools need to cooperate with registered religious organisations in the area to make the provision of religious education run effectively. However, Umbu Remi claimed that there is still a long way to go until believers in God Almighty can enjoy a secure, egalitarian environment. Until now, thousands of children in East Sumba, from early to adolescent age, have never received education according to the teachings of their beliefs. The education system remains the same as before that policy existed. Marapu children so far still have to follow the majority religious education in their schools.

Umbu Remi hopes that other people

do not encounter the same experiences of being marginalized. The state must be present and carry out its obligations in fulfilling the right to education for Marapu believers according to their beliefs. For this reason, the East Sumba Regency Education Office and the central government need to coordinate simultaneously and consistently to provide education services for Marapu believers. In addition, East Sumba Regency Government needs to formulate a regional regulation that regulates the fulfilment of civil rights for Marapu believers.

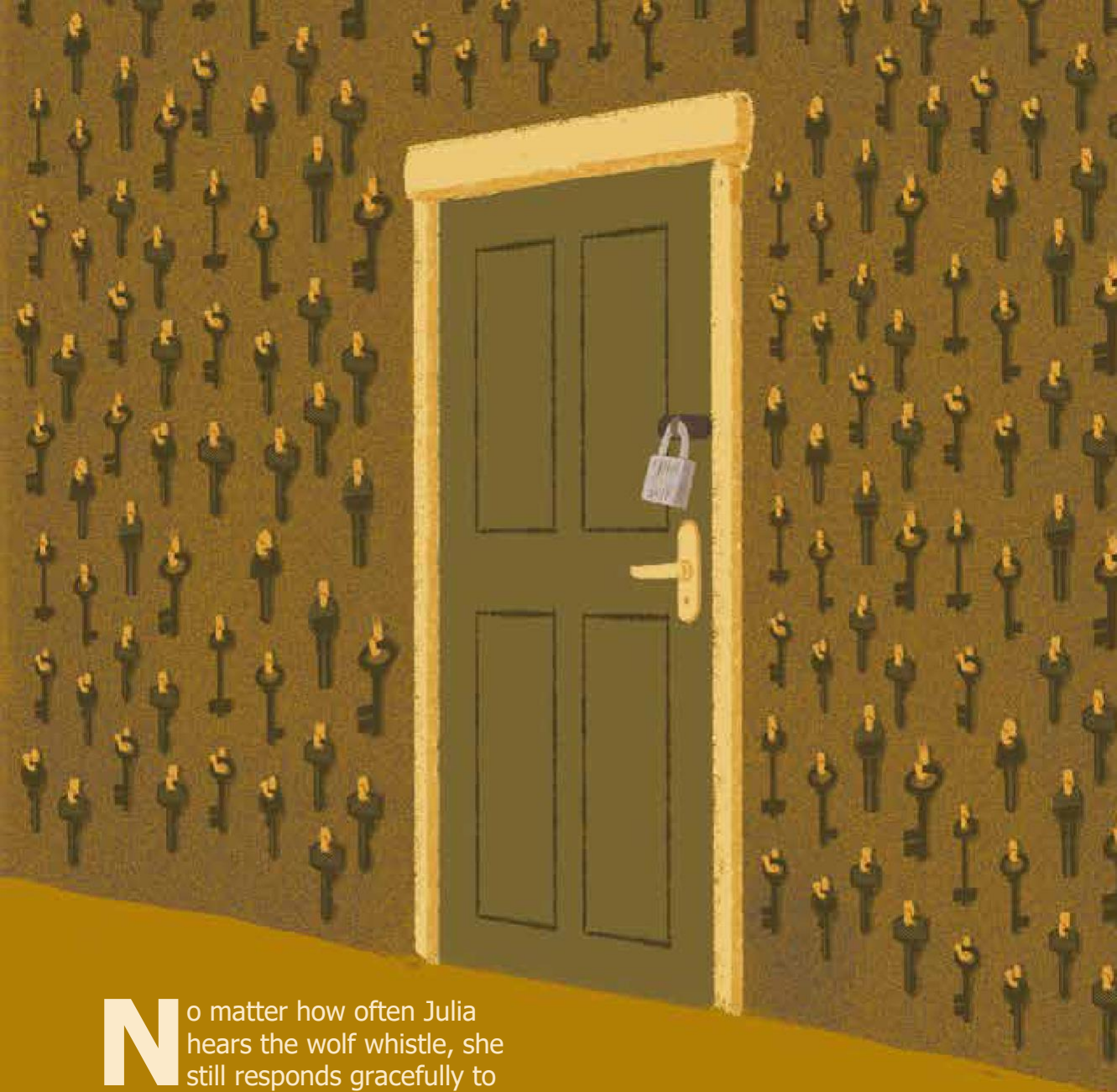
Besides establishing coordination between the central and regional governments, it is also necessary to disseminate to the general public that the believers in ancestor religions, such as the Marapu, are legally recognised in Indonesia. Umbu Remi hopes that the Lii Marapu Project developed by the Marungga Foundation and Sumba Integrated Development in collaboration with Voice can further support Marapu believers in accessing their civil rights. Marapu's teachings that control the harmony between life and nature are the core of the Sumba people's culture. Hopefully, Sumba will not lose its identity as the land of Marapu.





THE DIFFICULTY OF ACCESSING PUBLIC SERVICES AND THE LIMITED SPACE FOR SELF-ACTUALISATION FOR TRANSWOMEN IN INDONESIA

Author: Ahmad Khasan Basri
Organisation: SOFI Initiative



No matter how often Julia hears the wolf whistle, she still responds gracefully to them. Her profession as a street performer — in case she does not want to be referred to as a *pengamen* (street musician) — demands her to be alluring to survive, even if she has to swallow her pride. Every day, with her party-ready looks, she walks for miles and sings from one place to another with her signature *bas*

betot (a bass that is usually square-shaped and used by street musicians in Indonesia). She regards her routine as a profession of an artist. With her coquettish smile, she responds to the whistle that sounds rather condescending than admiring. Being a street musician, though she considers



herself an artist, is a form of her despair over not getting a job.

Julia is a transwoman who lives in Cirebon City. She is passionate about learning and pursuing a career in the beauty industry. However, Julia's main challenge as a transwoman is not the lack of opportunity to study or tough competition in getting a job. Like other transwomen, she must fight for recognition as an Indonesian citizen. Without recognition by the state, she cannot access public services and work opportunities like any other citizen.

Society remains seeing transwomen in Indonesia as a social disease. Transwomen are often considered sinners and misfortune since they are associated with sexual activity

deemed to violate religious norms and values, which leads to deadly diseases. This view seems cliché considering that many cases of sexual violence in schools/universities are perpetrated by men, and the victims are both men and women. No religious norms and values condone such sexual activity. Meanwhile, views about transwomen and their relation to deadly diseases are completely baseless. According to the Central Indonesian Planned Parenthood Association (PKBI) report on HIV cases in Indonesia from 1987 to 2014, housewives are found to be more vulnerable to HIV/AIDS than sex workers. The latest data from the AIDS Prevention Commission (KPA) in Cirebon City stated that 46 housewives were infected



with HIV, while only 36 sex workers were infected with the disease. This information definitely provides a new perspective that transwomen are not associated with diseases that can lead to death.

However, why are the judgmental views always directed at transwomen? The stigma complicates transwomen's lives, including their efforts to demand their basic rights as citizens to have a National Identity Card (KTP).

Without KTP, transwomen can only work in the informal sector and cannot access space for self-actualisation. Some transwomen with money have started to become fashion designers or open beauty salons. Yet, administrative and licensing processes are not easy for

them. Julia, for example, has applied for KTP multiple times over the past fifteen years but always failed. Julia eventually realised that she had only one choice: to become a street musician.

Unfortunately, the Social Office considers this occupation to disturb public order. This consideration is based on Regional Regulation Number 8 of 2007 concerning Public Order and Governor Regulation Number 221 of 2009 concerning Instructions for Implementing Regional Regulation Number 8 of 2007, which authorises the Public Order Agency (Satpol PP) to arrest the disruptors of public order, including street musicians. The Government has not seen street musician as one of the few options left for transwomen to survive as citizens who are not legally recognised.

The Government indeed has provided a training programme for the disruptors of public order who are arrested, including street musicians. Those arrested receive training to improve their skills, expecting they will no longer make a living on the street. However, this programme is not a solution for transwomen in addressing their basic problems. No matter how

good the knowledge shared during the training is, they still need to be legally recognised as citizens to put the learning into practice in the community. Nevertheless, the Government seems to not significantly focus on this problem. For example, one of the selection criteria for Civil Servants (PNS) in Indonesia requires applicants to be non-transgender.

In addition to facing difficulties in applying for civil administrative documents (Adminduk),

transwomen often have to deal with inhumane treatment, which is also degrading and judgmental, from various parties. In Surabaya City, the Surabaya City Transwomen Association (Persatuan Waria Kota Surabaya) once came to the Population and Civil Registration Office (Dispendukcapil) to apply for an Electronic National Identity Card (E-KTP). However, the officers laughed at them and gave them a lecture. In fact, the Circular Letter of the Minister of Home Affairs of the Republic of Indonesia Number 470/11320/Dukcapil clearly regulates the data collection of and the issuance of civil administrative documents for transgender residents.





The issuance of the Circular Letter actually proved the Government's initiation to recognise the existence of transgender people. However, due to the deeply embedded stigma in society, transgender people often receive different and unequal treatment from a group of government officials. The Government shall address this issue and ensure that the Dispendukcapil is a safe and equal space for transwomen and other genders to obtain appropriate services.

Following this issue, the SOFI Initiative was established organically in 2013 to create a safe learning space for youth and a network node for social movements based on the values of human rights, democracy, diversity, culture, and freedom. So far, the SOFI Initiative focuses on producing knowledge and training products and campaigning for human rights, democracy, and other youth issues to allow marginalised communities, especially youth, to express their experiences and views critically in fighting for the fulfilment of their rights.



HAS THE DEFINITION OF "DISABILITY" BEEN WELL UNDERSTOOD?

Authors: Kynan Reihan & Marwa Basyarahil

Organisation: Indonesian Down Syndrome Care Foundation (Yayasan Peduli Sindroma Down Indonesia or YAPESDI)

If you ask someone, "What do you think of when you hear the word 'disability'?" most people will probably think of assistive devices such as canes and wheelchairs or certain conditions such as blindness and down syndrome. But how many would

think about the "lack of accommodations" for people with disabilities? Seeing disability as a feature of an individual remains a common perspective in society. Even non-disabled people with good intentions to support the fulfilment of the rights of people with

disabilities may still fall into this perspective. Then, what perspective should we have in understanding the meaning of "disability"?

In advocating the rights of people with disabilities these days, we need to abandon the medical-based narrative about the advice to "recover" people with disabilities and the compassionate approach that tends to frame them as an object of pity and beneficiaries of the kindness of non-disabled people. What these two issues have

in common is that they define disability as an "abnormal" and "must-be-recovered" feature of individuals. This perspective hinders the establishment of an inclusive society since it frames people with disabilities as a group of individuals who are inherently excluded from society. Therefore, to create an equal and inclusive environment, we must replace this perspective with a more inclusive one by adopting the social and human rights approach.





By setting aside the conception of disability as a feature of individuals and adopting the social approach to define disability, we will figure out that disability is a consequence of the interaction between individuals and the environment that does not accommodate these differences. A person is identified as "disabled" because the social structure cannot be adjusted to the differences of a particular group. Thus, at the end of the day, this group of individuals cannot interact effectively and is excluded from the whole society. Moreover, seeing disability through a human rights perspective broadens that lens by encouraging

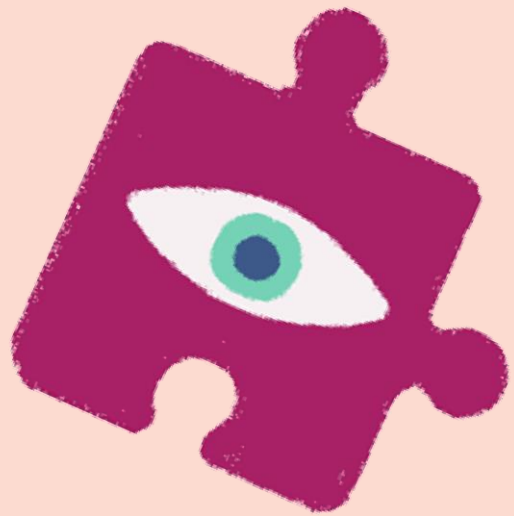
the recognition of people with disabilities as being entitled to human rights like other human beings. In this case, state actors and the general public are obliged to respect their rights.

This change in perspective will be the foundation of the struggle for disability rights today. As members of an organisation advocating the rights of people with disabilities, the authors strive to remember this foundation in taking every action. However, non-disabled people with a clear position in society tend to accidentally identify disability as a feature of individuals, even though they often do not have bad intentions. Therefore, in changing the perspective on disability, the Indonesian Down Syndrome Care Foundation seeks to create an inclusive environment for people with intellectual disabilities,

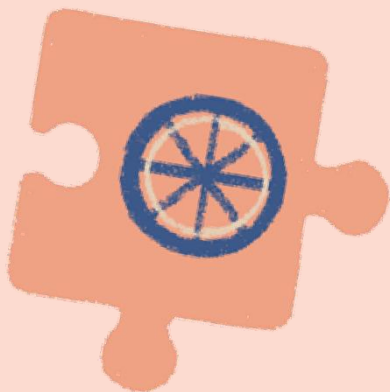


especially down syndrome, and optimise their competence through the "Ayo Ngomong" class programme. This class aims to provide training and facilitation for people with disabilities so they can advocate for themselves. It is expected that they are encouraged to express their opinions and fight for their own rights.

Measures taken by a single organisation are certainly inadequate to change the paradigm of the whole society. Changing such perspective requires collective efforts, not only by community organisations and institutions but also by government actors and society. Government actors and



their influence can significantly contribute to this change, one of which is by creating an inclusive society for people with disabilities both physically – by building inclusive public facilities – and non-physically – by promoting narratives that do not attribute disability to individuals.***



Linking and Learning: The Spirit of Inclusive Collaboration

Indonesia Inklusi is a community that brings together various civil society organisations to learn from and connect with each other. The established network rises from, but is not limited to, Voice grantees in the Voice Linking and Learning programme. The main principle of this community is to make the grantees the centre of all Linking and Learning activities. Every initiative and decision taken by this community is made by the grantees and for the grantees.

This community encourages collaboration, exchange and learning, innovation, and the application of new knowledge among the participating organisations. This collaboration aims to set an agenda and shared aspiration achievable only with the cooperation and participation of all organisations involved.

In addition, Indonesia Inklusi is expected to keep growing and expanding, not limited to the Voice

framework. Currently, there are at least five rights-holder groups supported by these organisations, including: people with disabilities; women victims of exploitation, harassment, and/or violence; age-discriminated vulnerable groups, especially the youth and elderly; indigenous peoples and ethnic minorities; as well as sexual and gender minorities.

The diversity of issues and identities in Indonesia Inklusi opens a great opportunity to encourage innovative and meaningful collaboration. Inclusion underlies every interaction in this community. Every person and organisation has the right to thoroughly participate with a fair distribution of responsibilities.

The spirit of connecting with and learning from others promotes the principle "to leave no one behind". Everyone has the opportunity and potential to define the objectives of the community and achieve them through inclusive collaboration.

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