

Indonesia’s Disability Policy Reform under the Jokowi Government: Progressive Legal Framework versus Half-hearted Inclusion

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Abstract

The ratification of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) and the passage of Indonesia’s first national law based on disability rights, No. 8 of 2016 on Persons with Disabilities, have laid the groundwork for a paradigm shift in understanding and approaching disability in the country. Based on descriptive analysis and long-term observation, this article argues that advances in the legal frameworks that govern disability policies have yet to result in significant improvements in the lives of Indonesians with disabilities. A lack of budget commitment, regulatory discord, and insufficient awareness of disability rights in the public and private sectors all point to a half-hearted approach to disability inclusion. This article illustrates this argument by focusing on three crucial aspects of the realisation of human rights for people with disabilities in Indonesia: the rights to education, health and employment.

Keywords: Indonesia, disability policies, disability rights, people with disability, legal framework, disability inclusion, UNCRPD

“Leave no one behind” – this is the central promise of the 2030 United Nations Agenda for Sustainable Development and its Sustainable Development Goals (SDGs). This premise has important implications for the over 23 million Indonesians – more than 9 percent of Indonesia’s population – who live with different forms of disability (Indonesian Ministry of Social Affairs 2021). Significant disparities persist between Indonesians with disabilities and those without disabilities in terms of education, employment, healthcare and access to other essential services, such as housing and transport (Adioetomo et al. 2014). For

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example, access to the 9-year compulsory education system is 8.5 times lower for individuals with disabilities, and their employment rate is 5.4 times lower (Formasi Disabilitas 2022). Data from the Indonesian Central Bureau of Statistics show that the situation is even worse for those with severe or multiple disabilities (Yulaswati et al. 2021).

The promotion and implementation of the social model and the rights-based approach to disability have been central tenets of Indonesian disability activists for many years. Their persistent efforts have been crucial in driving legislative and policy changes that aim to improve the lives of people with disabilities in Indonesia (Dibley / Tsaputra 2019). Examples of their successes include the ratification of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in 2011, followed by the passage of the country's first national disability law, Law No. 8 of 2016 on Persons with Disabilities. Following the ratification of the UNCRPD, Indonesia committed to changing its perspective on disability issues from a charitable approach to a human rights-based approach (Imanudin 2018). This change was initially demonstrated through changes in the legal framework for disability policies, including the enactment of the national disability rights law and the subsequent passage of its implementing regulations within two years (Sahbani 2020).¹ However, the complexity of Indonesia's policy-making processes, as well as the disparity in resources and strengths among organisations of people with disabilities (OPDs), has hampered further meaningful and effective policy reforms.

To better understand the authors' perspectives, a brief discussion of their positionality is important, as it significantly influences their views on the topic. Antoni Tsaputra holds a PhD from the School of Social Sciences FASS UNSW Sydney, Australia, and is a lecturer for the Special Education Study Programme at the Faculty of Education, Padang State University, Indonesia. He has a disability and has lived experience with muscular dystrophy, which requires the use of a powered wheelchair. His personal experiences have driven his steadfast commitment to disability rights activism in Indonesia. As a recognised disability researcher and advocate, he has made significant contributions to the advancement of disability rights both locally and nationally. Antoni Tsaputra's advocacy journey began in Australia in 2010, where he learned about disability rights, sparking his passion for change in Indonesia. Back home, he founded an organisation called Indonesian Association of Disabled People of Padang City to shift views on disability. His career includes significant research and advocacy, collaborating on the impacts of COVID-19 on people with disabilities with

1 The regulations further implement the national disability rights law in various sectors, encompassing social welfare for people with disabilities, integrating disability rights in development, providing reasonable accommodation in education and in judicial processes, ensuring accessibility in settlements, public services and disaster protection, habilitation and rehabilitation services, establishing disability service units in employment, creating a national disability commission, and ratifying the Marrakesh Treaty to improve access to published works for the blind and visually impaired (Sahbani 2020). At the time of writing, the last regulation on disability concessions was still in the formulation stage.

Jaringan DPO Respon Covid-19 Inklusif, a network of Indonesian OPDs for inclusive COVID-19 responses, and Indonesian Formasi Disabilitas, a network of Indonesian disability activists and OPDs that focuses on monitoring the implementation of disability rights in Indonesia. He has also worked on disability employment policy and election research. His work spans policy, advocacy, education and social inclusion, contributing to the Indonesian National Disability Action Plan and developing regulations for disability concessions.

His co-author Gianfranco Giuntoli, a Senior Research Fellow at the Social Policy Research Centre at the University of New South Wales in Sydney, Australia, specialises in the social study of health and illness. His research focuses on well-being, poverty, employment transitions and the impact of social and policy factors on personal and interpersonal well-being and resilience. He has investigated needs and accessibility of disadvantaged groups, including people with disabilities, older adults, the unemployed, migrants and individuals living with HIV/AIDS. He is an academic without lived experience of disability, focusing on inclusive education and employment policies and their impact on the well-being of people with disabilities in Indonesia and Australia. He critically examines and evaluates policy interventions and contributes to the discourse on disability rights and the inclusion of people with disabilities through primary and secondary research. Gianfranco Giuntoli co-teaches several sessions of a university course on inclusive education at State University of Padang alongside Antoni Tsaputra. This co-teaching has provided valuable insights into the practical challenges and opportunities of creating inclusive learning environments and is an ongoing source of learning from the students' lived experiences.

Damri, another co-author of this article, is an academic with no lived experience of disability. He serves as an Associate Professor for the Special Education Study Programme at the Faculty of Education, State University of Padang, Indonesia. Active in the field of special education since 1997, his expertise and research interests lie in special education curriculum development and civic education for students with disabilities. His insights contributed to the data collection and analysis, particularly in the education sector. Overall, the authors' diverse backgrounds enable them to approach the subjects discussed in this article with both scholarly and experiential perspectives, aiming to bridge the gap between policy and practice.

The article examines disability policies in Indonesia and evaluates their practical implementation based on various study data, focusing on three areas: education, health and employment. This is followed by an overview of disability policies and key interventions during the Joko Widodo (Jokowi) government (since October 2014) and sections that examine Indonesian policies related to the rights of people with disabilities to education and current challenges in achieving disability inclusion in the health sector and the labour market.

Overview of the legal framework for disability rights realisation under the Jokowi government

Since his election in October 2014, President Jokowi has overseen significant efforts to improve the lives of people with disabilities in Indonesia. But despite improvements in the legal framework for disability policies, there has not been a corresponding significant improvement in the lives of people with disabilities in Indonesia. They continue to face numerous obstacles to exercising their human rights and achieving meaningful participation in all areas of life. Although the interventions during the Jokowi government mark important progress, ongoing efforts and increased budget commitments are essential to fully realise the potential of the introduced policies and ensure a more inclusive society for all. This section outlines the key interventions and policies implemented during the Jokowi government, which are summarised in the timeline below. Overall, three main legislative milestones related to people with disabilities were achieved during Jokowi's presidency: 1) Law No. 8 of 2016 on Persons with Disabilities, which replaced the outdated Law No. 4 of 1997, was enacted. 2) Eleven implementing regulations were issued from 2019 to 2020 to implement Law No. 8 of 2016. 3) The National Action Plan for Persons with Disabilities (*Rencana Aksi Nasional Penyandang Disabilitas*, RANPD) was issued in 2021.

Law No. 8 of 2016 aimed to protect and fulfil the rights of people with disabilities in various aspects of life, including education, employment, health services and social participation. To implement this law, the Jokowi government issued eight government regulations (*Peraturan Pemerintah*, PP) and three presidential regulations (*Peraturan Presiden*, Perpres) between 2019 and 2020 (see Table 1). In 2021, the RANPD was introduced as part of the Ministry of National Development Planning Regulation No. 3/2021 on the Implementation of Government Regulation No. 70/2019. The National Action Plan RANPD mandates the creation of the Regional Action Plan for Persons with Disabilities (*Rencana Aksi Daerah Penyandang Disabilitas*, RADPD). Together, RANPD and RADPD establish a framework for implementing disability-inclusive development at both the national and regional levels for a 5-year term.

2 This regulation is further implemented through the Ministry of Education, Culture, Research and Technology No. 48 of 2023 on Reasonable Accommodation for Students with Disabilities in Early Childhood Education, Elementary and Secondary Education, and Higher Education, as well as the Regulation of the Ministry of Religious Affairs No. 1 of 2024 on Reasonable Accommodation for Students with Disabilities in Education Units under the Ministry of Religious Affairs. However, there are no independent reports or assessments on the implementation of these Ministry Regulations.

3 The Marrakesh Treaty to Facilitate Access to Published Works for Persons Who are Blind, Visually Impaired or Otherwise Print Disabled (MVT) is the latest addition to the body of international copyright treaties administered by the World Intellectual Property Organisation (WIPO). It has a clear humanitarian and social development dimension, and its primary goal is to establish mandatory limitations and exceptions to copyright rules for the benefit of blind, visually impaired and otherwise print-disabled individuals (VIPs). The treaty requires the Contracting Parties to introduce a standard set of limitations and exceptions to copyright laws, allowing for the reproduction, distribution and availability of published works in accessible formats for VIPs. Furthermore, it allows the cross-border exchange of these accessible works by organisations serving the intended beneficiaries (WIPO 2016).

Table 1: Key legal interventions for people with disabilities 2016–2020

Year	Law/Regulation number	Law/Regulation title
2016	Law 8/2016	Law on the Rights of Persons with Disabilities, replaced the Law 4/1997
2019	PP 27/2019	Government Regulation on Facilitating Access in Reading and Using Braille Letters, Audio Books and Other Media
	PP 52/2019	Government Regulation on the Provision of Social Welfare for People with Disabilities
	PP 70/2019	Government Regulation on Planning, Implementation and Evaluation of Respect, Protection and Fulfilment of the Rights of Persons with Disabilities. Attachment: Master Plan for Persons with Disabilities that outlines a 25-year plan for implementing disability inclusive development (<i>Rencana Induk Penyandang Disabilitas</i> , RIPD)
2020	PP 13/2020	Government Regulation on Reasonable Accommodation for Students with Disabilities ²
	PP 39/2020	Government Regulation on Reasonable Accommodation for Persons with Disabilities in Judicial Processes
	PP 42/2020	Government Regulation on Accessibility to Settlements, Public Services, and Protection from Disasters for Persons with Disabilities
	PP 60/2020	Government Regulation on the Disability Service Unit in the Employment Sector
	PP 75/2020	Government Regulation on Habilitation and Rehabilitation Services for Persons with Disabilities
	Perpres 67/2020	Presidential Regulation Concerning the Requirements and Procedures for Granting Awards in Respect, Protection and Fulfillment of the Rights of Persons with Disabilities
	Perpres 68/2020	Presidential Regulation on the National Commission for Disabilities, which assigns the commission the responsibilities of advising the national government and monitoring the implementation of disability rights
	Perpres 1/2020	Presidential Regulation on the Ratification of the Marrakesh Treaty ³ to Facilitate Access to Published Works for Persons Who are Blind, Visually Impaired or Otherwise Print Disabled

After outlining key legal interventions concerning the rights of people with disabilities, our focus now shifts to examining how these regulations are implemented in practice. The next sections explore their impact on everyday life, particularly in the realms of education, healthcare and employment for people with disabilities.

Right to education: A long road to inclusive education

In Indonesia, two ministries are responsible for ensuring that all citizens have access to education: the Ministry of Education, Culture, Research and Technology and the Ministry of Religious Affairs, which focuses on Islamic education. Both ministries have enacted regulations to implement inclusive education: 1) the National Education Minister's Regulation No. 70 of 2009 on Inclusive Education for Disabled and Gifted Students, and 2) the Religion Minister's Regulation No. 90 of 2013 on Islamic Education Implementation. Furthermore, the government under President Jokowi passed Regulation No. 13 of 2020 on Reasonable Accommodation for Students with Disabilities. This regulation is one of several implementing regulations for the national disability law, specifically aimed at guaranteeing a barrier-free and inclusive education for students with disabilities, from primary to higher education. However, despite this legal framework, Indonesia continues to face challenges in ensuring inclusive education at all levels.

Fifteen years after the introduction of inclusive education in Indonesia, the school attendance rate, defined as the percentage of children enrolled at the appropriate educational level for their age group (Indonesian Bureau of Statistics 2023), remains disproportionately low for children with disabilities. In 2018, data from the Indonesian Bureau of Statistics revealed that only 5.5 per cent of children with disabilities aged 5 years and older attended school, in stark contrast to 25.8 per cent of their non-disabled peers (Nurita 2021). Incidents of discrimination and school refusals to admit children with disabilities persist (Adirin 2020).

Despite the government's efforts to categorise more schools as "inclusive", significant challenges remain. In 2021, there were 35,802 inclusive schools (Aurelia 2021) and 2,250 special schools (MoECRT 2020) out of a total of 217,283 schools in the country (Katadata 2021). From 2015 to 2020, the number of children with disabilities enrolled in inclusive schools increased from 62,960 to 99,467 (MoECRT 2021). During the same period, enrolment in special schools rose from 114,085 to 139,014 (Hata et al. 2021). This trend indicates a higher enrolment rate in special schools compared to inclusive schools, despite the larger number of inclusive schools.

In a qualitative study involving extensive discussions and consultations with government officials from the Directorate of Community Education and Special Education (PMPK) of the Ministry of Education, Culture, Research and Technology (MoECRT), as well as stakeholder workshops and focus group discussions with participants from schools, district and provincial educational offices, parents and students, the researchers Anna Hata, Joko Yuwono, Ruwiyati Purwana and Shinsaku Nomura revealed significant findings regarding inclusive education in Indonesia (Hata et al. 2021). The research team found that inclusive education has not been fully integrated into the national education system due to inadequate legal and financial responsibilities and a lack of coordination across the national, local and school levels. There is an urgent need to improve the accessibility and quality of inclusive schools, provide comprehensive training for educators and staff, and strengthen administrative capabilities. Insufficient cross-sectoral collaboration can hinder children with disabilities from receiving adequate education and experiencing smooth transitions between educational levels, a challenge that may have been exacerbated by the COVID-19 pandemic (*ibid*). The disparity between the findings of existing studies and the government's claims underscores several issues in the practical implementation of inclusive education policies in Indonesia.

Another example is the Indonesian Minister of National Education Regulation No. 9 of 2009, which mandates local governments to designate at least one school in each municipality or regency for inclusive education. Appointed schools are required to accept a minimum of one special-needs student per class, provided that they have sufficient resources. A qualitative study by Elga Andriana and David Evans (2020) examined the responses of principals and teachers in Indonesia to the opinions and experiences of primary school students on inclusive education. The study found that the selection of specific schools to implement inclusive education has been problematic. This is because it has resulted in the public labelling of students with disabilities as "inclusion children" and created a division between schools classified as "inclusion schools" and "regular schools". This kind of labelling is known to contribute to structural stigma against people with disabilities, leading to the general devaluation of individuals associated with these policies (Brzykcy / Boehm 2021). Moreover, the policy of designating specific schools to implement inclusive education allows schools that are not appointed to refuse students with disabilities based on the claim that they lack the necessary resources.

Based on our research and observations, there are four main issues in the implementation of inclusive education in Indonesia: limited knowledge among teachers about supporting students with disabilities and a serious lack of co-teachers or educational assistants; insufficient accessible built environments and infrastructure in both public places and schools; prevalent disability stigma within schools; and inadequate support and resources for students with high

support needs or profound disabilities. Although formal data on these issues are lacking, our observations highlight an urgent need for improved resources and comprehensive training programmes for educators. This includes enhancing teachers' skills in special needs education, increasing the number of co-teachers or educational assistants, and ensuring that school infrastructure is accessible to all students. Furthermore, there is a critical need to address and reduce disability stigma through awareness campaigns and policy reforms. Finally, specific attention must be paid to students with high support needs or profound disabilities to ensure that they receive the necessary accommodations and support to thrive in an inclusive educational environment.

Moving forward, Indonesian Government Regulation No. 13 of 2020 on Reasonable Accommodation for Students with Disabilities stipulates that all teachers' education programme providers, particularly those at universities, must offer inclusive education as a mandatory course. However, there remains a common misconception that only special education programmes should address this need, leading to the exclusion of inclusive education courses from other teacher education programmes (Formasi Disabilitas 2022). Offering such courses in all teacher education programmes would better prepare prospective teachers to assist students with disabilities at all levels. Currently, teachers without a special education background find it challenging to modify curricula and accommodate disabled students in their classes.

A common strategy employed by schools facing a shortage of teachers with special education backgrounds is to hire co-teachers, also known as educational assistants. These professionals are trained to teach children with disabilities and help classroom teachers provide the necessary support, modifications and reasonable accommodations during the learning process (Zakia 2015). However, the scarcity of educational assistants poses a significant barrier to achieving inclusive education in Indonesia. Currently, there is no specific national or local regulation mandating the recruitment of educational assistants as civil servants (Zakia 2015). Consequently, some schools resort to assigning their counselling teachers to also serve as educational assistants for students with disabilities, even if they lack the required qualifications (Praditia 2022). Although these counselling teachers are encouraged to undergo brief training sessions to accommodate disabled students, this training only offers fundamental knowledge and does not adequately prepare them to address the diverse and complex challenges facing students with disabilities (Praditia 2022).

Lacking sufficient support and teacher training, many schools regard inclusive education merely as a regulatory obligation rather than a fundamental requirement to achieve disability rights (Formasi Disabilitas 2022). It is still widely believed that students with disabilities cannot keep up with their peers without disabilities and must attend segregated special schools (Zakia 2015). Consequently, students with disabilities admitted to designated inclusive schools

often do not receive the reasonable accommodations they require, and disability-related stigma persists in school settings. In most regions, limited resources pose a significant challenge in providing the necessary accessible built environments and infrastructure in schools (Formasi Disabilitas 2022).

The Government Regulation 13/2020 on Reasonable Accommodation for Students with Disabilities also falls short in addressing the participation of students with profound disabilities or high support needs in inclusive education. The regulation does not recognise the need for caregivers to assist with the self-care of students with profound disabilities as a reasonable accommodation. This oversight reflects a broader social stigma suggesting that children with high support needs are unsuitable for mainstream schools and should either attend segregated schools or remain at home. For example, in Yogyakarta, 63 per cent of 104 children with cerebral palsy did not have access to any form of education in 2019–2020. This lack of access is attributed to misconceptions that disabled students belong only in special education schools, insufficient accessibility in mainstream schools and the belief that disabled students cannot keep up with their non-disabled peers (Syafi'ie 2018).

The very same regulation addresses the rights of disabled university students to pursue higher education. According to the regulation, all universities are required to establish a Disability Service Unit to meet the needs of students with disabilities. However, of the 4,621 higher education institutions in Indonesia, only 73 have established such units (MoECRT 2024). Furthermore, among these, only seven have fully accommodated students with various types of disability (Afrianty et al. 2020).

Formasi Disabilitas (2022) identified two major problems regarding disability inclusion in Indonesian higher education, particularly among universities that lack a Disability Service Unit. First, there is a significant lack of awareness about psychosocial disabilities on campuses. Consequently, people with psychosocial disabilities often remain invisible and face significant challenges in accessing higher education. Second, the university entrance exam only considers certain types of disability and assigns the respective students to specific majors. These assignments are based on non-scientific assumptions and prejudices, with mental illness or psychosocial disabilities not being taken into account. For example, students with visual impairments are discouraged from pursuing degrees in mathematics, while students in wheelchairs are advised to major in the humanities rather than engineering.

The initiatives taken by several universities to accommodate students with disabilities represent a promising step toward fostering a more inclusive higher education system in Indonesia. Leading examples include the University of Brawijaya, the State Islamic University Sunan Kalijaga Yogyakarta, the State University of Surabaya and the University of Indonesia. These universities have internal policies in place with sufficient resources to ensure that students

with disabilities are fully supported. These measures cover all stages, from the selection of new students to academic assistance, the provision of academic services, curriculum adjustments and various routine programmes necessary to support inclusive education. Such good practices indicate that adequate budget allocations are crucial to encourage more educational institutions to adopt inclusive education practices.

Article 31 of the 1945 Indonesian Constitution mandates that at least 20 per cent of national and local government budgets be allocated to education. Therefore, the government should prioritise sufficient funding to ensure accessibility and reasonable accommodations, such as accessible learning media and educational assistants, for students with disabilities. Effective budgetary arrangements between national and local governments, as well as collaboration with other stakeholders, including the private sector, are necessary to provide accessible environments and infrastructure in schools and universities (Widhi / Pudyatmoko 2015).

Despite these constitutional mandates, the reality in Indonesia is that only four ministries had a disability budgetary policy in the 2021 budget: the Ministry of Social Affairs, the Ministry of Health, the Ministry of Education, Research and Technology, and the Ministry of Women Empowerment and Child Protection. Among these, the Ministry of Social Affairs, which focuses on social rehabilitation, received substantial funding, with half of its 80 trillion IDR (USD 4.9 billion) allocated for rehabilitation and assistance for people with disabilities (Mufida 2023). However, the allocation of inclusive and special education by the Ministry of Education was drastically reduced from IDR 755 billion (USD 50 million) in 2018 to IDR 255 billion (USD 17 million) in 2021 (Nurhidayat 2021). This significant decrease led to a downward trend in funding for the implementation of inclusive education. Under the government of Jokowi, Indonesia's policy regarding the educational rights of people with disabilities has been notably contradictory. Despite some positive advances at the university level, national budget allocations and policy decisions show inconsistent support for inclusive education. This inconsistency undermines the progress achieved by individual institutions.

Right to health: Why getting sick shouldn't be a luxury

The right of people with disabilities to good health is protected by Indonesia's national disability and health laws. Initiatives such as the National Action Plan on Disability (RANPD), launched in 2021 with access to healthcare as one of its primary goals, and the Disability Inclusive Roadmap to Quality Health Services, a guideline for disability inclusive health services released by

the Ministry of Health in 2020, provide information on the future of disability health services. This section argues that significant gaps persist in the health sector for inclusion, including limited access to information, uneven subsidised health coverage and low-quality assistive devices. Some local governments, primarily in Java, such as Yogyakarta and Sukoharjo, are working to ensure that people with disabilities have access to quality healthcare. Despite these regional-based programmes, scaling up at the national level has not yet been achieved.

The nationwide survey conducted by the network of Indonesian Organisations of People with Disabilities (OPDs) for inclusive COVID-19 responses in 2020 (*Jaringan DPO respon Covid-19 Inklusif*) presents a stark reality: a staggering 91.9 per cent of people with disabilities lack the knowledge to access government-subsidised health coverage. Furthermore, crucial healthcare information often eludes them, exacerbating their vulnerability. During the pandemic, accessing critical COVID-19 updates online proved challenging, as many faced barriers to internet access due to financial constraints. Interestingly, according to the 2018 National Socioeconomic Survey, only 34.9 per cent of people with disabilities own a smartphone or laptop, and only 8.5 per cent are connected to the internet (compared to 81.7 per cent and 45.5 per cent, respectively, for Indonesians without disabilities; MoSA 2020). These statistics underscore the urgent need for comprehensive support mechanisms to bridge the digital and informational divide for people with disabilities. According to the OPDs survey in 2020, people with disabilities faced greater difficulty accessing necessary healthcare during the pandemic. Pandemic-related restrictions hindered their ability to visit healthcare facilities, leading to long delays and waiting lists for regular treatments, which exacerbated their impairment-related illnesses, as patients with COVID-19 received priority treatment. People with disabilities were often not allowed to be accompanied by their personal assistants when they contracted COVID-19. Additionally, nurses did not have adequate experience and training to deal with people with disabilities. These shortcomings imply potential suboptimal care and increased discomfort for patients, and underscore broader issues of inclusivity within the healthcare system.

Some people with disabilities have expressed concerns in the OPDs survey about being intentionally denied medical care during the COVID-19 pandemic because they were perceived as “second-class citizens”. For example, several COVID-19-infected children with multiple disabilities from a certain special school were denied entry to an emergency hospital in Jakarta. The refusal was due to the hospital being unable to provide specialised staff capable of providing care and assistance to disabled children while in quarantine. In Solo, a deaf woman who tested positive for COVID-19 faced challenges, as the local Department of Health could not communicate with her to trace her travel history and contacts. Similarly, a disabled COVID-19 patient in Makassar, declared

disease-free, was denied entry into her community by neighbours who feared she might still be infected (Tsaputra 2020).

People with psychosocial disabilities living in special facilities were also considered high-risk during the pandemic. Many people with severe mental illness were forced to live in overcrowded institutional settings where maintaining social distancing was impossible. These individuals were denied access to essential public information because they were not allowed to own mobile phones and the institutions in which they resided did not provide access to the internet, television or print media. This deprivation was due to the authorities of these institutions deeming their patients incapable of rational thinking. Furthermore, these facilities often lacked basic sanitation supplies and staff did not implement necessary precautions to prevent infections from entering and spreading within institutions (Tsaputra 2020).

Access to health insurance is critical for people with disabilities due to their increased need for medical attention. However, Indonesia's National Health Coverage (BPJS-JKN) has not yet fully addressed the healthcare and impairment-related needs of people with disabilities. The Ministry of Health Regulation No. 28 of 2014, which serves as the implementation guideline for the JKN, does not adequately address the specific requirements of people with disabilities. For example, the provision of assistive device coverage under the JKN is based on accident- or sickness-related needs rather than disability needs. Furthermore, the types of covered assistive devices are limited. These include glasses once every two years, prostheses (such as a prosthetic leg or hand) and crutches once every five years according to medical recommendations, and lumbar sacral support braces and neck collars once every two years according to medical indications (Formasi Disabilitas 2022). Additionally, the coverage price for assistive devices is relatively low, limiting access to high-quality and a wider variety of assistive devices that truly meet the needs of disabled people. High-quality adaptive and high-tech assistive devices cannot be manufactured domestically and therefore must be imported. However, their import duty is excessively expensive as they are considered luxury items instead of medical devices (Purwaningsih et al. 2022).

Furthermore, noncompliant specifications, a lack of maintenance and replacement services for assistive devices, and a lack of information and referrals for assistive devices have resulted in underutilisation of most assistive devices. This has led to budget expenditures that do not meet the needs. When providing assistive devices, such as wheelchairs, prosthetic limbs, crutches and others, the *Dinas Sosial*, the local government office for social affairs, rarely coordinates with medical rehabilitation specialists, so the assistance received is frequently insufficient to meet the needs of people with disabilities. According to the *Jaringan DPO response to Covid-19 Inklusif* survey (2021: 56), 630 of the 1,597 disabled people who participated said they did not use assistive devices because

they were too expensive (54 per cent), damaged (16.3 per cent), uncomfortable to use (14.3 per cent) or they did not want to use them (15.4 per cent). Of those who received assistive devices and found them uncomfortable to use, 14.3 per cent stated that the tools were not suitable because they were not made of durable materials and did not fit their body posture (for example, crutches). This indicates that beneficiaries are hesitant to use government-provided tools because they do not meet their individual needs or preferences (ibid.: 56).

Despite these limitations, some local governments in Indonesia have implemented affirmative actions. For example, a notable practice is the Special Health Insurance (*Jamkesmas*) programme, launched in Daerah Istimewa Yogyakarta. This initiative aligns with Yogyakarta Governor's Regulation No. 50 of 2017 on the Special Health Insurance Administration System for Persons with Disabilities. *Jamkesmas* was developed to address the gaps left by National Health Coverage (BPJS-JKN) in meeting the needs of people with disabilities. To ensure effective implementation of *Jamkesmas*, the Yogyakarta Special Region Government has developed a management mechanism for service recipients that prioritises the principle of quick and thorough resolution. However, the national government has not adopted this locally based affirmative action to improve national health coverage. The local government initiative provides immediate benefits, including free health services such as general and specialised medical checks, prescribed medications and assistive devices. The long-term goals of the programme are to sustain improvements in daily mobility and productivity, leading to greater independence and reduced dependence on government support. However, since the programme only began in 2015, more time is needed to fully evaluate its long-term effects (Ardiyantini 2021).

Although the national disability law has initiated progress in achieving disability rights in Indonesia, achieving comprehensive health insurance and inclusive services for people with disabilities remains a challenge due to contradictions with other key health regulations. These contradictions arise because the implementation of disability-inclusive health services is based on the reform of existing health laws that do not fully align with the principles of the disability law. For instance, the National Health Law No. 40 of 2004 lacks a disability rights perspective. Although it aims to provide health coverage to all Indonesian citizens, including those with disabilities, its main eligibility criterion for government-subsidised health insurance is poverty, not disability. This general poverty criterion does not account for the additional costs and vulnerabilities associated with living with a disability, leaving many people with disabilities inadequately covered. Furthermore, Indonesian Insurance Law No. 40 of 2014 does not specifically regulate protections for people with disabilities as vulnerable insurance consumers. This legal gap allows insurance companies to refuse coverage to disabled individuals, further exacerbating their challenges in accessing necessary healthcare services.

These legal contradictions make it difficult to implement comprehensive and inclusive health services for people with disabilities, as current health regulations do not fully support the needs outlined in the national disability law. To resolve this issue, it is crucial to harmonise government programmes and regulations with the rights-based national disability law and its subsidiary regulations, ensuring that all laws comply with legal principles and statutory regulations designed to protect the rights of people with disabilities. Similar misalignment issues are also evident in the employment sector.

Right to employment: Demanding more than just a quota

People with disabilities are more likely to be uneducated, have low educational attainment and face numerous obstacles when entering the workforce. In 2021, only 44 per cent of people with disabilities were part of the workforce, compared to 69.8 per cent of those without disabilities (Formasi Disabilitas 2022). Furthermore, when employed, people with disabilities earn 20 per cent less than the national average because they often work in the informal sector, which offers low-paying and inconsistent work. The right of people with disabilities to decent employment is guaranteed by national disability law and local disability rights regulations. The national government's primary programme to increase the employment rate of disabled people in Indonesia involves allocations of quotas in both the public and private sectors. However, the right to work, for people with disabilities, encompasses more than just filling quotas. To fully realise this right, a broader range of issues must be addressed, including providing reasonable accommodations in recruitment processes and addressing workplace unfairness and challenges.

Since 2014, the Jokowi government has allocated a special quota for the recruitment of people with disabilities in both the public and private sectors. This quota policy initially referred to the former Disability Law No. 4 of 1997, which was then replaced by Law No. 8 of 2016. The 1997 quota provision required employers in both the public and the private sector to hire one disabled person for every 100 employees. The 2016 disability law expanded these requirements, mandating public employers to allocate 2 per cent of their workforce to people with disabilities, and private employers to allocate 1 per cent. However, in practice, the actual percentage of people with disabilities recruited falls far short of these targets. For example, in 2014, the share of people with disabilities among government employees was only 0.3 per cent, and there has been little improvement since the introduction of the 2016 quota law (Formasi Disabilitas 2022). The failure to meet the 2 per cent quota, whether due to fewer available positions or a small number of applicants with disabilities, suggests that the

actual number of people with disabilities employed in the public sector is much lower than expected. In the G20 Campaign “Engaging People with Disabilities for Inclusivity” of 2022, the Indonesian Minister of Employment reported that by 2021, there were 1,271 disabled people working in 72 state-owned companies and 4,554 disabled individuals working in 588 private corporations (*ibid.*). However, there are no official data on the total number of employees in both the public and private sectors to determine whether the quota has been met.

In addition to the unmet quota, the civil service recruitment and selection process for people with disabilities has not yet fully accommodated their needs. For example, the computer-assisted test (CAT) utilised for the 2014 civil service recruitment was inaccessible to those with disabilities, particularly people with visual impairments, as screen readers cannot be used with the CAT (Putri 2014). Additionally, reasonable accommodations, such as assistance and extra time to complete the selection process, were not provided to applicants with disabilities who applied for general positions in the 2019 civil service recruitment (Ramadhan 2019).

Various stakeholders have criticised the policy of distinct or special recruitment processes for people with disabilities in civil service recruitment. This policy is perceived as a double-edged sword. On one hand, it serves as a quick solution to meet quota requirements by allowing people with disabilities to compete separately from non-disabled individuals. On the other hand, it has the potential to foster discrimination by limiting opportunities for people with disabilities to apply for positions in the general recruitment processes. This distinct or special recruitment process can be seen as the only pathway for people with disabilities to enter the civil service, thereby restricting the application of accessibility and reasonable accommodations to these specific cases rather than making them universal across all recruitment processes (Nursyamsi 2019).

A widely publicised case that clearly demonstrates this discrimination is the refusal of the Solok Selatan local government of West Sumatra to accept a wheelchair-using dentist as a public servant because she applied through general recruitment processes rather than the special one (Salman 2019). Another case involving a blind applicant illustrates that the special recruitment policy can also discriminate against people with disabilities. This individual successfully completed a series of selection processes, but was later disqualified because the authorities deemed that the position for which he applied was not suitable for his type of disability (Wasi'ah 2022).

Ideally, all civil service processes and the positions offered should be inclusive and accommodating to individuals with various types of disabilities. Consequently, the common practice of employers verifying the suitability of a specific disability type for a particular position on the spot would be unnecessary. Identifying types of disability should only be necessary to determine reasonable

accommodations that enable disabled workers to perform effectively. In addition to these accommodations, wage equality is a significant concern among disabled workers. For example, deaf employees in the private sector often receive wages below the minimum wage, leading many to opt for self-employment (Aryani 2022).

This inequity for people with disabilities is exacerbated by the controversial Job Creation or Omnibus Law⁴ (Law No. 11 of 2020). This law was expected to align with the national disability law, marking a significant shift in Indonesia's approach to disability. However, Indonesian people with disabilities were surprised by the enactment of the Omnibus Law, as they were not consulted during its drawing process. This lack of participation could have resulted from discriminatory practices against them, as implied also by the use of the term *cacat* or “crippled” throughout the document, which has derogatory connotations and contradicts the principles outlined in the national disability law. This term is outdated and classifies people with disabilities as second-class citizens, representing a notable setback in Indonesia's progress toward an inclusive legal framework for disability rights (Cossy 2020).

Instead of providing equal employment opportunities for all citizens, the Omnibus Law instead discriminates against people with disabilities, making it challenging for them to secure jobs by requiring applicants to demonstrate both mental and physical fitness. Furthermore, under Article 154A of the Omnibus Law's termination of employment provisions, individuals can be dismissed if they become “crippled”. The law also does not adequately address accessibility and reasonable workplace adjustments for people with disabilities (Afrianty 2020). Additionally, the Omnibus Law repeals Article 27 of Law No. 28 of 2002 on Accessible Built Environment, which mandates accessibility for disabled and elderly individuals. In particular, it omits any reference to the quota policy for disability employment, which could have been strengthened (Formasi Disabilitas 2022). Thus, the Omnibus Law contradicts the national disability law, which guarantees the right of people with disabilities to work in both the public and private sectors.

4 The “Omnibus Law”, also known as the Law on Job Creation, was officially signed into effect by the President of Indonesia on 2 November 2020. Its primary objectives include attracting investment, generating new employment opportunities and stimulating economic growth. This is to be achieved through streamlined licensing procedures, harmonisation of diverse laws and regulations, and enhancing the central government's agility in responding to international or domestic challenges, according to the UNCTAD Investment Policy Hub.

Conclusion

The ratification of UNCRPD and the enactment of the first disability rights-based national disability law, the Law No. 8 of 2016 on Persons with Disabilities in Indonesia, laid the groundwork for a disability-inclusive development. This legislative progress during the Jokowi government should be recognised as a significant step forward. The achievements also demonstrate Indonesia's commitment to the global agenda of the SDGs, which emphasises universal, integrated and inclusive principles to ensure that no one is left behind. However, the implementation of the programmes and activities has presented its own set of challenges. Changes in the legal framework governing disability policy have not yet significantly improved the lives of Indonesians with disabilities. It remains difficult for people with disabilities in Indonesia to assert their human rights and demand meaningful participation in all aspects of life. A lack of budget commitment, regulatory discord and limited awareness of disability rights in both the public and private sectors reflect a half-hearted approach to disability inclusion. Despite the comprehensive nature of the policies and regulations issued by the Jokowi government over the past decade, their implementation has faced significant challenges due to three main factors: lack of coordination among government agencies, ministries and wider stakeholders, limited resources, and minimal participation of OPDs in the implementation process, despite this being a requirement of Law No. 8 of 2016 (Rahmadian 2022). This is evident in three of the most fundamental human rights of people with disabilities: the rights to education, health and employment.

The Jokowi government has implemented an inclusive education programme that should allow students with and without disabilities to learn together. However, a system to evaluate and monitor disability-friendly schools must be established, as there are currently no comprehensive data to assess the provision of reasonable accommodations for students with disabilities. The government's policy of opening more inclusive schools must be accompanied by capacity building for teachers and school staff to enhance the necessary human resources. Students with disabilities must have easy access to reasonable accommodations. Ideally, all schools should be encouraged and supported to be inclusive. Furthermore, despite inclusive education being a national policy, its implementation must also be funded by local governments. Additionally, more disability service units must be established in educational institutions, including schools and universities, to promote inclusive learning environments.

Although people with disabilities now have better access to healthcare, the range of coverage available must be expanded. According to data from the 2018–2020 Socioeconomic Survey, the share of people with disabilities who have public health insurance is still relatively low (Formasi Disabilitas 2022).

Furthermore, the provision of inclusive public healthcare for people with disabilities is a state obligation that must be met progressively. Establishing an inclusive healthcare system is critical to providing people with disabilities with the best possible care. This system should offer affordable healthcare to all citizens, including people with disabilities, through a well-disseminated, non-discriminatory information system that is properly equipped, of high quality and tailored to their needs. People with disabilities often face barriers to accessing services and receiving healthcare. Universal health coverage is essential to ensure that all people can access the healthcare they need without financial hardship. This includes a wide range of essential and high-quality healthcare services, from health promotion and prevention to treatment, rehabilitation and palliative care. Due to their impairments and comorbidities, people with disabilities are more likely to experience health problems and may require more general healthcare, rehabilitation and specialist services. Despite this need, people with disabilities often face additional barriers to accessing healthcare, incur higher costs for healthcare services and receive less quality care than other citizens. Therefore, National Health Insurance must provide comprehensive coverage for people with disabilities. More initiatives and affirmative actions are required at the regional level to allocate a larger budget for local health insurance for people with disabilities.

People with disabilities often end up working in the informal sector due to employment constraints. Only 20.7 per cent of people with disabilities are formally employed, while the rest are unemployed or work in the small service and industrial sectors. Compared to the national employment participation rate for 2021, the participation rate for people with disabilities is 44 per cent lower (Ministry of Manpower 2021). According to the quota mandate, public organisations and government-owned businesses must employ people with disabilities as at least 2 per cent of their total workforce, while private businesses are required to employ at least 1 per cent. To meet this quota target, strong government incentives are required to channel labour supply and demand (and even create demand), particularly from the Ministry of Manpower. However, relying solely on the Ministry of Manpower will limit the scope of the programme coverage, especially for local beneficiaries. Therefore, decentralising the job matching process is essential to accelerate quota target achievement, particularly for local government institutions and businesses. Besides quota acceleration through job placement, both the national and local governments must ensure an anti-discriminatory process throughout the entire employment recruitment process, including job training, job placement, job continuity and career development. To support this function, more local governments should establish disability service units attached to local manpower agencies as required in PP 60/2020 on the Disability Service Unit in the Employment Sector to handle the day-to-day needs of people with disabilities seeking job placement assistance.

Indonesia's achievements and challenges in implementing disability rights may not be dissimilar to those of other countries in the Global South. However, Indonesia ranks 103rd worldwide on the inclusivity index and scores even lower compared to other countries of the Association of Southeast Asian Nations (ASEAN), such as the Philippines and Vietnam (Hreelaita / Ruhman 2022). The inclusivity index is a comprehensive measure of inclusive development that considers race/ethnicity, religion and gender equality, and disability in terms of political representation, violence outside of a social group, income gap, incarceration rate, and immigration and refugee policies (Menendian et al. 2021). Improving Indonesia's inclusivity index is crucial to improve inclusion for vulnerable groups, including people with disabilities, and to give substance to the UN slogan "Leave no one behind".

Indonesia has been an active participant in many subregional, regional, and interregional cooperations, demonstrating its strong commitment to human development for its citizens. OPDs and civil society organisations value the numerous international collaborations of the Indonesian government. Among the subregional agreements are the Indonesia-Malaysia-Thailand Growth Triangle (IMT-GT) and the Brunei Darussalam-Indonesia-Malaysia-Philippines East ASEAN Growth Area (BIMP-EAGA), which focus on commerce, investments and tourism. However, these and other subregional agreements do not address disability issues.

As a result, people with disabilities do not benefit from these collaborations. Bilateral agreements may provide opportunities for both countries to learn from each other's best practices. For example, Malaysian IT providers or manufacturers are required to provide services and assistance to people with disabilities in terms of accessibility at the appropriate time and place, without additional charges or at a reasonable cost. Furthermore, the Malaysian government provides tax deductions for families with disabled members and for employers who hire disabled people (Khalid / Yusof 2017). Similarly, the Thai government ensures job security for people with disabilities, opportunities for salary increases and career advancement, and other welfare and benefits included in employer packages. Employers in the private sector that provide such services to people with disabilities can claim tax breaks equal to twice their annual salary expenditures (UNDP 2022).

Fortunately, ASEAN has signed several non-binding documents at the regional level to advance, respect and protect the rights of people with disabilities. This commitment serves as a beacon of hope for strengthening bilateral collaborations to improve disability inclusion in development programmes. One of these nonbinding agreements is the 2011 Bali Declaration for the Advancement and Participation of Persons with Disabilities. A more recent agreement signed by the leaders of Southeast Asian countries is the ASEAN Enabling Masterplan 2025: Mainstreaming the Rights of Persons with Disabilities, which was

adopted in 2018 during Singapore's presidency of ASEAN. This latter document integrates three policy pillars of ASEAN community cooperation (politics and security, economics, and sociocultural development) into disability mainstreaming, so it sets a new standard for advancing disability rights in Southeast Asia. Furthermore, by signing this document, ASEAN has created opportunities for OPDs to participate in monitoring and evaluation processes. Strengthening partnerships at all levels of government, as well as with organisations of and for people with disabilities, entities of the private sector, international organisations and other stakeholders, in addition to budget commitments, regulatory harmonisation and ongoing awareness-raising about disability rights in both the public and private sectors, is crucial to achieving genuine disability inclusion in Indonesia.

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