

Mainstreaming Disability Issue in Prison Reform: Experiences and Lessons Learned from the Australia Indonesia Partnership for Justice 2 (AIPJ2)

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Mohamad Doddy Kusadrianto¹ and Eko Riyadi²

1. Background

Overcrowding in Indonesian prisons has been happening for more than two decades. Since the era of *Reformasi* in 1998, there has been a significant increase and trend toward imprisonment for various types of crimes in Indonesia. Between 1998 and 2016, 654 types of new crimes were introduced outside the criminal code (KUHP) that were penalized with imprisonment³ – this adds a burden to our prison system, which has already been overwhelmed with the retributive approach in the current KUHP.

Prison is positioned at the end of the criminal justice chain, which made them have limited authority to control the influx of inmates who come from the criminal justice process. By September 2022, the electronic corrections database system (SDP) has recorded a total of 276,332 inmates kept all over Indonesia's prisons while the capacity should be only for about 132,000 inmates⁴ - there is a gap of more than 100% between capacity and the number of inmates. This extraordinary situation makes it difficult for the Directorate General of Corrections (DGC) to effectively manage and provide proper services to inmates. It also raised questions about how human rights can be respected and fulfilled.

As an interim solution to this overcrowding situation, the Government of Indonesia (GoI) has built new prisons primarily on Nusakambangan island. The island now has seven prisons, with three more prisons currently under construction to make a total of 10 prisons in Nusakambangan. DGC needs to allocate around Rp 131 billion for each prison that will be built, excluding other associated costs to equip this new prison⁵. In the long run, the Government of Indonesia is working with civil society to reform the criminal justice system and promote the use of restorative justice and alternative sentences to imprisonment in the new draft of KUHP, which hopefully could positively contribute to reducing prison overcrowding and improve the effectiveness of our criminal justice system.

Prison overcrowding negatively impacts the mental health of inmates and corrections officers. It can also easily trigger psychiatric disorders that can be harmful not only to the individual inmate but also to others. A mental health condition is considered a disability if it has a long-term effect on day-to-day activity.⁶ One study back in 2005 even linked overcrowding as one of the causes of prison suicide in US (United States)

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³ [Overcrowding-Indonesia_Final.pdf \(icjr.or.id\)](#)

⁴ [Ditjen PAS - SDP Publik](#)

⁵ [3 Lapas Baru Dibangun Kemenkumham di Pulau Nusakambangan \(detik.com\)](#)

⁶ [When a mental health condition becomes a disability - GOV.UK \(www.gov.uk\)](#)

prisons.⁷ For people with special needs such as physical disabilities, prison overcrowding can be a very challenging place to survive. The United Nations Convention on the Rights of People with Disabilities (UNCRPD), as ratified by GoI under Law No. 19/2011, provides important guidelines for prison authorities to ensure proper accommodation for inmates with disabilities and elderly groups⁸.

The Asia Foundation's Indonesia office, with support from the Australia Indonesia Partnership for Justice (AIPJ) phase 1, started to work on disability issues in the justice sector in 2012 under the CSO (Civil Society Organizations) Strengthening Program. In AIPJ1, the Foundation has successfully initiated a collaboration between CSOs (civil society organizations) and DPOs to strengthen further policy advocacy in the justice sector, including the rights of PwDs (Persons with Disabilities). This collaboration has contributed to enhancing and understanding different perspectives on access to justice for PwDs within CSOs (civil society organizations), especially from PwDs perspective, while for DPOs, this collaboration could amplify public advocacy on the rights of people with disabilities.⁹ This collaboration has enabled some of our CSO (civil society organizations) partner organizations, such as Legal Aid Foundation (LBH) Makassar and Jakarta, to include disability perspectives in all their work. For DPOs such as *Sasana Integrasi dan Advokasi Difabel* (SIGAB), this collaboration has resulted in the establishment of a SIGAB legal aid unit; they have received support from our legal aid partners to establish a legal aid unit in SIGAB to help with legal issues affecting PwDs .

2. Disability Law and Corrections Reform

In 2016, GoI made a huge step to promote and protect the rights of PwDs (Persons with Disabilities) with the enactment of Law No 8/2016 concerning the rights of PwDs (Persons with Disabilities) – recognizing the possible implementation challenge, the GoI has provided a grace period of two years before this law came into effect in 2018. Prior to the enactment of the Disability Law, Indonesia had already ratified the Convention for the Rights of the People with Disability (CRPD) in 2011 through Law No. 19/2011. However, the 2016 Disability Law became a turning point for the GoI in respecting the rights of PwDs (Persons with Disabilities) in Indonesia. The Disability Law has shifted the GoI paradigm towards disabilities from charity-based to a human rights-based approach¹⁰. It has provided the legal basis and guaranteed people with disabilities (to demand the right to obtain equal access to all public services. The Law has required all government agencies to establish Disability Unit Services (ULD) at the Unit level to ensure reasonable accommodation for PwDs. It also mandated the Government to establish the National Commission for Disability (*Komisi Nasional Disabilitas*) with the role of monitoring and advocating the fulfillment of the rights of PwDs.

With support from the Australian Government, The Asia Foundation has a long history of working to support prison reform in Indonesia. The Corrections Reform blueprint (the blueprint) that was developed with support from the Foundation back in 2009 has highlighted the need for DGC to give attention to

⁷ [Institutional Conditions and Prison Suicide: Conditional Effects of Deprivation and Overcrowding - Meredith P. Huey, Thomas L. McNulty, 2005 \(sagepub.com\)](#)

⁸ Article 25, United Nations Conventions for the Rights of People with Disabilities.

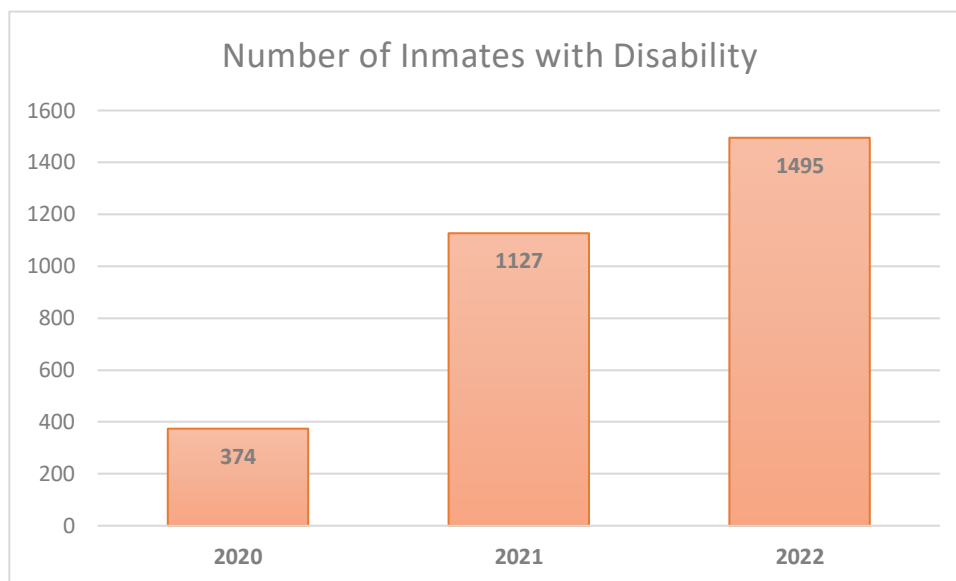
⁹ ODI, Civil Society and Justice reform in Indonesia, An evaluation of the Australia Indonesia Partnership for Justice, July 2016. [10762.pdf \(odi.org\)](#)

¹⁰ [What's next after Indonesia's new disability law: disability management in the workplace \(ilo.org\)](#)

inmates from marginalized groups such as women, children, the elderly, and PwDs in the form of infrastructure and policies¹¹. Unfortunately, the overcrowding and budget shortage have distracted DGC's focus on implementing this plan and ensuring equal and proper treatment and services for all inmates.

To support DGC in managing prison overcrowding, The Asia Foundation has assisted DGC in developing a corrections database system to monitor cell capacity and number of inmates. The corrections database system (SDP) has become an indispensable part of the correction business system in Indonesia. The SDP has been used by the DGC, as well as other relevant Ministries such as the National Development and Planning Agency (Bappenas) and the Office of the President, to monitor and develop policies that could reduce the overcrowding situation.

In the last five years, the number of inmates has continued to rise without alternative sentences to imprisonment. Most inmates are male; women make up less than 5% of the inmate population. Of all current inmates, more than 50% are facing trials or serving sentences for narcotics-related crimes. Still, only approximately 10% of these are classified as drug dealers/traffickers, with the vast majority classified as users.¹² The number of inmates with disabilities also has increased in the past few years. According to the data from the Directorate of Treatment in 2022, the total number of inmates with disability in 2022 is 1495 inmates kept in 557 detention centers and prisons across Indonesia. Some of them have multiple disabilities.



Source: DGC, June 2022

A study by the Center for Detention Studies (CDS) between 2013 and 2015 has shown that prison overcrowding has made it more challenging for Indonesian prisons. To deliver equal services to all inmates, including those considered marginalized. The survey included 12 representative prisons across Indonesia; the survey showed that women and children inmates were among the groups affected by prison overcrowding as most of their special needs cannot be fulfilled due to budget insufficiency caused by a

¹¹ <https://icjrid.files.wordpress.com/2009/01/cetak-biru-pemasyarakatan.pdf>

¹² SDP Public, accessed 11 March 2022, [Ditjen PAS - SDP Publik](#).

weak planning process.¹³ The prison overcrowding has created a tremendous impact on budget allocation for food supplies. DGC has allocated around USD 120 million to procure food for inmates across the Indonesian prison system¹⁴. A staggering amount of money can be used for another important aspect of prison management.

The mainstreaming disability issue in corrections reform is a new issue for DGC, with limited state budget allocation and many program priorities. DGC must choose the highest priority program that can be funded through the state budget. The enactment of the Disability Law provided the opportunity for AIPJ2/The Foundation to support DGC in mainstreaming disability issues into their business process.

3. Stakeholder Analysis and Engagement

Prior to AIPJ2/the Foundation implementing the program support to mainstream disability issues in the corrections reform program, a simple stakeholders mapping was conducted. The mapping is important as the Program needs to determine the environment that can contribute to the success and failure of a program. AIPJ2/n has identified the following key actors that were approached and involved in the design of the activities before the Program was started:

3.1. DGC

DGC is part of the Ministry of Law and Human Rights (MLHR). The head of this institution is Director General – an echelon 1 level position. As the primary recipient of the support, DGC was the first organization that needed to be engaged in any discussion on the Program activities. The discussion started with working-level officials from the Directorate of Treatment having the role and responsibility to prepare policy implementation guidelines and supervision, as well as reporting, monitoring, and evaluating DGC policies on the issue of health, treatment, and rehabilitation.¹⁵ They also have a role in supporting technical-level units in prison in the policy implementation, including providing necessary training and capacity building.

In addition to the relevant Directorate in DGC, AIPJ2/The Foundation also engaged the leadership of DGC to support this program. She was the first woman to hold a Directorate General position in DGC, and her support of this Program was instrumental and important to share the future DGC planning in mainstreaming disability issues in the corrections business process. Her support of this Program was instrumental and important in sharing the position of DGC planning in mainstreaming disability issues in the corrections business process. The Bureau will have a role in setting up a budget plan to be approved by Bappenas and the Ministry of Finance. In contrast, the Directorate of Information and Technology has the authority to improve SDP data to include more accurate data on inmates with disabilities.

3.2. Bappenas

¹³ CDS, *Realitas Penjara Indonesia: Survey Kualitas Layanan Pemasyarakatan*, October 2015

¹⁴ [Ditjen PAS: Negara Keluarkan Rp 2 Triliun Setahun untuk Makanan Napi \(kompas.com\)](#)

¹⁵ [Laporan Kinerja Pemasyarakatan Tahun 2020 - Ditjenpas | Membangun Pemasyarakatan Bersih dan Melayani](#)

Engagement with Bappenas is significant as they are the primary counterpart for the AIPJ2 program. They also played a strategic role in ensuring that our program activities can be sustainable in the form of Program as well as budget. Bappenas has a role in making sure that all technical Ministries' activities have been in line with the National Mid-Term Development Plan (RPJMN). They also have a role in providing budget allocation recommendations to the Ministry of Finance, which is crucial for program sustainability. The approval of Bappenas in the work plan of AIPJ2 2018 was a crucial step in AIPJ2/The Foundation's effort to promote disability perspective in correction reform work.

3.3. CSOs (civil society organizations) and DPOs

In the past 10 years, there has been increasing advocacy activity from CSOs/DPOs in promoting the rights of PwDs . The Asia Foundation, through two DFAT-funded programs AIPJ2 and Peduli, has played a role in supporting DPOs programs in promoting the rights of PwDs in Indonesia. It is important for DGC to receive support from CSOs and DPOs to implement their programs due to their limited expertise and capacity. DGC has a program called "*Pokmas*" or "*Kelompok Masyarakat (Community Group)*", which provides opportunities for the CSO community to participate in DGC program activities to empower inmates. This opportunity could also be extended to support corrections officials in understanding disability issues in the prison. DGC needs to be linked to DPOs to enable collaboration in managing disabled inmates in jail. There were DPOs at both national and local levels that potentially could support DGC in their effort to mainstream disability issues in their business process, to name a few, such as SIGAB (*Sasana Inklusi & Gerakan Advokasi Difabel* - Integration & Disability Advocacy Movement Center), SAPDA (*Sentra Advokasi Perempuan Difabel dan Anak* – Diffable Women and Children Advocacy Center), PJS (*Perhimpunan Jiwa Sehat*-Mental Health Association).

3.4. Regional Office of the MLHR for Yogyakarta Special Region

The Head of the Regional Office has a coordinating role with DGC and reports to the Secretary General of the MLHR. The Regional Office serves the interests and needs of Technical Implementing Units (UPT) at the local level and implements policies from MLHR as the Central Government Institution. However, the Regional Office does have the independence to manage and regulate UPTs under their auspices. During the program development process, the Head of the Regional Office of the MLHR for Yogyakarta Special Reform is known to strongly support reform.

3.5. Collaboration between CSOs and DPOs

AIPJ2 and the Foundation saw a potential collaboration between DPO and CSO to support DGC, as both disability and corrections are still not a familiar issue for most CSOs in Indonesia. Corrections itself is not a widespread issue; only a few CSOs in Indonesia are working on the Corrections issue. Most CSOs prefer to work in the Criminal Justice system and do not go deep into the Corrections business process.

The Asia Foundation has identified three organizations with different backgrounds but with working experience on justice sector reform issues and the ability to collaborate and support DGC. They are the Center for Human Rights Studies of the Islamic University of Indonesia UII (PUSHAM UII), SIGAB, and CDS. Each of these organizations has strengths that could be used to optimize our support to DGC in mainstreaming disability issues in the corrections business process.

PUSHAM UII is a human rights-focused organization based in Jogjakarta that is known for its expertise and experience in conducting research and capacity-building programs on human rights issues for government

institutions. It has assisted Courts in the Jogjakarta region in developing and applying disability guidelines for Court services.

CDS is an organization based in Jakarta, a long-time partner of The Asia Foundation, that has been working very closely with DGC in accelerating reform in the prison business process. They have a strong understanding of the prison business process as well as a solid network and are well respected within DGC. CDS has produced various research and studies to support GOI in reducing prison overcrowding in Indonesia. Their recent studies on COVID-19 transmission prevention in prison have contributed to DGC's decision to issue a policy for initial release for approximately 30,000 low-risk inmates as an effort to prevent possible Covid-19 transmission in prison due to overcrowding.

SIGAB is one of the Foundation's partners under the previous two DFAT-funded programs, the AIPJ CSO Strengthening Program and Peduli, which have played a crucial role in promoting disability rights in Indonesia. They have become one of the most reliable Disability People Organizations (DPO) in Indonesia that often provide input to the Government, CSOs and other stakeholders in developing policies or other works that are sensitive to disability.

5. From Baseline Study to Policy Development

A baseline study was carefully chosen and designed as our entry strategy to introduce a disability perspective in the correction business process in 2018. DGC, like many other GoI agencies, was very keen to use data to inform the decision-making process¹⁶. From The Asia Foundation's long experience in policy advocacy in Indonesia, numbers and other evidence from research and studies become powerful messages for program and budget advocacy within internal GoI.

In 2018, AIPJ2/The Foundation engaged PUSHAM UII to undertake a baseline study to understand the existing conditions and challenges of DGC and corrections officials in fulfilling the rights of inmates with disabilities. PUSHAM UII leads the baseline study process with support from SIGAB and CDS in close consultation with Directorate of Treatment of DGC as the primary recipient of the study.

The baseline study has played a significant role in advocating DGC to improve their services to inmates' disability, acting as the entry point for AIPJ2/The Foundation and PUSHAM UII to promote and mainstream disability rights perspective in the correction business process.

5.1. PUSHAM UII's Baseline Study

PUSHAM UII conducted baseline study in two locations: the Yogyakarta Special Region and Lampung.¹⁷ The Yogyakarta Special Region was selected as it is representative of the Java region, which has fairly high levels of economic development and education, plus the existence of a strong civil society, including civil society organizations advocating for the rights of persons with disabilities. By contrast, Lampung was

¹⁶ [Hadiri IsDB 47th Annual Meeting, Bappenas: Kebijakan Harus Berbasis Data | Kementerian PPN/Bappenas](#)

¹⁷ Data for the baseline study were collected through two mechanisms, observations and interviews. Observations were made to test the availability of correctional facilities. Interviews were conducted with 35 informants consisting of prisoners and correctional officers in the Special Region of Yogyakarta and 43 people in Lampung.

selected to represent a region outside Java that has low levels of economic development and education, plus a weak civil society and a lack of organizations representing persons with disabilities.

The study was conducted among three types of "correctional technical implementing units (UPT)," namely, the Rehabilitation Service (or Parole Board / *Balai Pemasyarakatan*), Detention Centers (*Rumah Tahanan*), and Correctional Institutions (*Lembaga Pemasyarakatan*).¹⁸ Not all UPT has inmates with disabilities. Based on DGC data as of the end of January 2018, there were 369 inmates with physical disabilities residing in 295 Technical Implementation Units / UPT (out of a total of 518 UPT).¹⁹

The study produced two specific findings related to the Rehabilitation Service, four specific findings related to Detention Centers and Correctional Institutions, and one specific finding related to Correctional Institutions.

5.1.1. Specific Findings on Rehabilitation Service

5.1.1.1. Lack of disability perspective in social rehabilitation and mentoring process. Rehabilitation Officers Creatively Avail of the Client System for Juveniles / Children in Contact with the Law to Fulfill the Rights of Clients with Disabilities

Law No. 11 of 2012 on the Juvenile Criminal Justice System makes good provision in respect of social rehabilitation reports, mentoring, guidance, and supervision.²⁰ The Rehabilitation Service also has adequate systems and mechanisms in place to address the needs of juvenile or child clients. Rehabilitation Officers are required to provide assistance to children in conflict with the law while undergoing the diversion process, including during the pre-trial, trial, and post-trial stages.²¹ When carrying out their duties, Rehabilitation Officers are required to network extensively with institutions external to the rehabilitation system so that they can provide the

¹⁸ In Indonesia, Correctional Technical Implementation Units are divided into three categories. The Rehabilitation Service is responsible for various pre- and post-correctional actions. Pre-correctional action is carried out by conducting assessments on suspected offenders as part of the restorative justice process, for example, in juvenile criminal cases. Post-correctional actions involve conducting assessments, providing guidance, and conducting evaluations on inmates after their release. Detention Centers are used to detain suspected wrongdoers before and during the trial process. Correctional Institutions are places where the rehabilitation process is carried out, in accordance with the sentence imposed by the court. Correctional Institutions include Penitentiaries (for adult male inmates), Narcotics Correctional Institutions (for adult male inmates convicted of drug offences), Women's Correctional Institutions (for female inmates, both children and adults), and Child Special Guidance Institutes (for boys).

¹⁹ Asminan Mirza Zulkarnain, Director of Health Care and Rehabilitation at the Directorate General of Corrections, *UPT PAS Accessibility to Convicted Prisoners / Detainees with Disabilities*, paper presented at the Workshop on Preparing an Correctional Institution Accessibility Research Framework for Persons with Disabilities, in collaboration with Pusham UII, CDS and SIGAB, on 8-9 May 2018 in Yogyakarta.

²⁰ These are explicitly mandated by Law Number 11 of 2012 on the Juvenile Criminal Justice System; Minister of Law and Human Rights Decree Number M.01.PK.04.10 of 1998 on the Duties, Obligations and Requirements for Rehabilitation Counselors; and Minister of Law and Human Rights Regulation No. 21 of 2013 on the terms and procedures for granting remission, assimilation, family-visit leave, parole, pre-release leave and conditional leave.

²¹ Director General of Corrections, Ministry of Law and Human Rights, Directive Number: Pas-133.Pk.01.05.07 of 2016 on Standards for Provision of Assistance in the Juvenile Criminal Justice System (Diversion and Mediation).

assistance that is required by children in conflict with the law. Such institutions include legal aid organizations, child protection agencies, and other similar bodies.²²

Unfortunately, the social rehabilitation study and mentoring processes fail to take the disability aspects into account.²³ This weakness applies to both the Standard Operating Procedures (SOP) and the standard report format. If disability is considered at the practical level in the field, this is due solely to the creativity and initiative of the Rehabilitation Officer (Indonesian abbreviation: PK). The Yogyakarta Correctional Institution once conducted profile assessments on clients with disabilities at the rehabilitation report and mentoring stage. This initiative gave rise to both failures and successes.²⁴ The success stories highlight the benefits of social rehabilitation reports and mentoring for clients with physically evident disabilities or poor vision. In such cases, police investigators can request a social rehabilitation report for the purpose of the diversion process, and if agreement is reached, a diversion order will subsequently be issued by the district court.

The failures are most pronounced in the case of clients with disabilities that are not physically visible, such as mental or intellectual disabilities.²⁵ Due to the absence of appropriate procedures and resources, the social rehabilitation report process requires the assessment of a client by a psychiatric hospital. Unfortunately, hospitals are unwilling to provide diagnoses as there are no funds available to pay them for the client observations they conduct. Consequently, it is difficult to convince investigators, prosecutors, and judges that a client has a mental or intellectual disability due to the lack of medical evidence available that proves this. As a result, diversion fails, and the case goes to trial. Because of the lack of available standards, creativity and initiative on the part of Rehabilitation Officers are essential if intellectual disabilities are to be successfully taken into account^{26,27}

²² Interview with Hartono, Head of Child Client Guidance Section, Rehabilitation Service Class I Unit, Yogyakarta, 6 July 2018

²³ This applies to both Lampung and Yogyakarta Special Region.

²⁴ An example of a case where this occurred is that of PMJ, a juvenile with a mental / intellectual disability and poor vision who caused a collision with another motorcyclist in Yogyakarta. The Rehabilitation Service received a social rehabilitation report application from the Sleman Police for the purpose of diversion. The diversion agreement was successfully obtained and later confirmed by the Sleman District Court. Interview with Sati Purnaningsih, Rehabilitation Officer with the Vocational Guidance Subsection, Child Client Guidance Section, Class I Rehabilitation Service Unit Yogyakarta, 10 July 2018.

²⁵ An example of a case where this occurred is that of MZ (a 16-year-old child with a mental age of between 9 and 12), who was accused of sexual violence/harassment. At the time when his social rehabilitation report was being prepared, it proved impossible to obtain a psychiatric assessment of him as his parents lacked the money to pay a psychiatric hospital to keep him under observation for the requisite 10 days. The Rehabilitation Service requested the assistance of the Regional Social Services Agency, but the request was turned down for reason of lack of funds. As a result, the case went to trial without an assessment of the child's intellectual and mental condition. Interview with Sati Purnaningsih, Rehabilitation Officer with the Vocational Guidance Subsection, Child Client Guidance Section, Class I Rehabilitation Service Unit Yogyakarta, 10 July 2018.

²⁷ An example of a case where this occurred is that of SMD alias Gudel (a deaf man who allegedly killed his wife out of jealousy). The rehabilitation process proved successful as the Rehabilitation Officer successfully managed to convince SMD's local community to permit him to return home again. Interview with Ginem, the older brother of Smd in Yogyakarta on July 12, 2018, and interview with Anjar Winarko, Rehabilitation Officer of the Adult Client Guidance Registration Subsection at the Class I Class I Rehabilitation Service Unit Yogyakarta, July 9 2018.

5.1.1.2. The Rehabilitation Service Has Experience Extensive Collaboration with Other Institutions, but Disability Issues Yet to Receive Adequate Attention

The Rehabilitation Service has a mechanism for involving or collaborating with the Witness and Victim Protection Service (LPSK), Youth Protection and Rehabilitation Centers, legal aid organizations, non-governmental organizations, social services, health services, companies, job training centers, and various other institutions. However, the issue of disability has yet to receive adequate attention, and cases involving persons with disabilities continue to be treated the same as other cases. Consequently, the Rehabilitation Service needs to collaborate more with other suitable bodies or agencies, notwithstanding that these other bodies/agencies are also frequently constrained by administrative and procedural matters.

These administrative and procedural constraints frequently include a lack of funding that would allow other bodies or agencies to conduct medical and psychological observations on clients.²⁸ This is unfortunate as it is the social rehabilitation report that really determines the outcome of the legal process.²⁹ It is also important to note that social rehabilitation reports on clients with physical disabilities are more likely to be accepted as input by law enforcement, prosecutors, and judges than social rehabilitation reports on persons with mental, intellectual, or psychosocial disabilities.

5.1.2. *Findings on Detention Centers and Correctional Institutions*

a. Persons with Disabilities Are Identified Physically Using a Medical Approach

Correctional officers identify inmates with disabilities from the condition of their hands, feet, and/or eyes, from unusual behavior (as a marker of psychosocial or mental disability), or from a person's lack of response when spoken to (as a marker of deafness). The situation is influenced by standard form 10E, which is the identification/registration form that must be completed for new inmates and requires information on disabilities. This practice is supported by the national institutionalization procedure, which recognizes two categories of inmates with disabilities during registration, i.e., inmates with physical disabilities and inmates with psychological disorders.³⁰

This model has implications for the actions of officers, who say that they always prioritize medical action, involvement of polyclinic, social services, psychiatric hospital, closest hospital, or other

²⁸ This occurred in the case of MZ, a child aged 16 but with a mental age of between 9 and 12, who was accused of sexual violence/harassment. Interview with Sati Purnaningsih, Rehabilitation Officer, Vocational Guidance Subsection, Child Client Guidance Section, Class I Rehabilitation Service Unit, Yogyakarta, 10 July 2018

²⁹ Referring to the case of Pmj, a child with a mental / intellectual disability and poor vision who caused a collision with another motorcyclist in Yogyakarta. The social rehabilitation report's findings were used as the basis for diversion and the case did not proceed to court. Interview with Sati Purnaningsih, Rehabilitation Officer with the Vocational Guidance Subsection, Child Client Guidance Section, Class I Rehabilitation Service Unit Yogyakarta, 10 July 2018

³⁰ Asminan Mirza Zulkarnain, Director of Health Care and Rehabilitation at the Directorate General of Corrections, *UPT PAS Accessibility to Convicted Prisoners / Detainees with Disabilities*, paper presented at the Workshop on Preparing an Correctional Institution Accessibility Research Framework for Persons with Disabilities, in collaboration with Pusham UII, CDS and SIGAB, on 8-9 May 2018 in Yogyakarta.

health facilities.³¹ If detention center staff lack the medical capacity to provide treatment, then the inmate may experience difficulty recovering, or his/her transfer to a particular unit may be rejected.³² This situation is also reflected in the contents of the identification/registration form that new detainees/inmates are required to complete, which form includes the option to circle one or more characteristics indicating a physical disability.³³ The health examination form also treats disability as a question of physical disability only. This can be seen from form 10A WATKESREHAB (Treatment, Health, and Rehabilitation), which defines persons with disabilities in terms of physical disabilities only.³⁴

b. Standards of "Normality" and Security as Basis for Building Design

Physical and mobility infrastructure are built to normal or regular standards, which hampers access for persons with disabilities. Standard accessibility facilities such as ramps, handrails, accessible toilets, and tactile paving are not available. All spaces are designed solely for people without disabilities, including the data collection/induction area, cells, public rooms, rehabilitation rooms, and places of worship.

The security approach is dominant. This is clear from the presence of a 30 cm (about 11.81 in) high barrier on each door, multiple gates, exceedingly high steps on stairs, and the installation of barbed wire in various places.

An interesting finding is that some officers have learned to independently interact with clients, whether through co-workers or directly with the clients themselves or their families.³⁵ Rehabilitation Officers also take the trouble to add some personal touches to help accelerate "recovery."³⁶ When this happens, it is the result of kindness. Such an approach has yet to become institutionalized as a service standard based on equality and human dignity.

As regards information and communications technology (ICT), Technical Implementation Units are provided with standard equipment, such as computers, paper forms, pens, and information boards with written text. The available computers are manual computers and are not equipped with screen readers or screen magnifiers. Clients must also complete the fingerprint ID document by handwriting hand. Meanwhile, rehabilitation officers' type social rehabilitation reports based

³¹ See the case of M, an inmate of the Class I Detention Center Bandar Lampung, who had a psychosocial disability and was referred to a psychiatric hospital, where he was placed in solitary confinement.

³² Interview with Agustiyar Ekantoro, Head of the Class IIA Detention Center Yogyakarta, 12 September 2018.

³³ See Prisoner/Inmate Identification Form issued by the Ministry of Law and Human Rights, Central Java Regional Office, Class II B Detention Center Wonosobo, as well as interview with Slamet Widodo Suprapwanto, Head of the Inmate Services Subsection, on 3 July 2018.

³⁴ Interviews with Akbar Amnur (Head of Detention Center) and Siwi Supraptiwi (Detention Center Nurse) at the Class II B Detention Center Wonosobo on 30 June 2018.

³⁵ Interviews with Zuflina, Delfianto, Olvi Agus, Nurdiana (Rehabilitation Officers at the Class I Rehabilitation Service Unit Bandar Lampung), and interviews with Anjar Winarko, Rehabilitation Officer of the Adult Client Guidance Registration Subsection at the Class I Rehabilitation Service Unit Yogyakarta, 9 July 2018.

³⁶ This can be seen from the way Hartono (Head of Child Client Guidance Section, Class I Rehabilitation Service Unit Yogyakarta) treats his clients by, for example, inquiring about their family backgrounds, their educational status, how they feel about undergoing the legal process, about their religious activities, and about their hopes. Interview on 6 July 2018.

on interviews they conduct with clients.³⁷ All this makes it difficult for clients with visual impairments to access the services provided by the Rehabilitation Service.

c. Undesigned Efforts to Serve Inmates with Disabilities

The term "undesigned effort" is used to describe the endeavors made by officers to maximize the use of existing facilities to provide better services to prisoners with disabilities, notwithstanding the lack of dedicated facilities, funding, and guidelines. Efforts of this type are a matter of personal discretion,³⁸ although officers often have no other choice but to make such undesigned efforts due to a lack of appropriate facilities.

The fact is that persons with disabilities are frequently incarcerated in Technical Implementation Units and must be provided with services. The most rational choice is to maximize existing facilities and resources to address the needs of inmates with disabilities. These actions include lifting wheelchair users up to the second floor,³⁹ asking fellow detainees to help prisoners with disabilities, refusing to accept prisoners so that they will be sent to more appropriate correctional institutions,⁴⁰ and obtaining services from psychiatric hospitals that are paid for using non-official funds obtained through the internal prison system, or by the detainee's family.⁴¹

d. Correctional Institutions Bear the Burden of Dealing with Inmates with Disabilities The study found data that many inmates sustain physical disabilities directly because of the law enforcement process; quantitatively, the figure is significant, namely 70%⁴². This situation shows that Correctional Institutions will have to deal with inmates with disabilities. There are two responses that they can adopt in this regard: firstly, engaging in advocacy with the police, and secondly, preparing the facilities and resources needed to respond to the needs of people with disabilities.

Advocacy to the police would involve trying to persuade them to exercise restraint and eschew the use of firearms and other violent means wherever possible to avoid suspects being left with physical disabilities. The excessive use of violence only serves to burden Correctional Institutions. Meanwhile, if the second option is selected, Correctional Institutions must begin to prepare

³⁷ Interview with Endang Susilowarti, Rehabilitation Officer/Registration Subsection, Adult Client Guidance, Class I Rehabilitation Service Unit, Yogyakarta, 9 July 2018.

³⁸ The Class IIA Detention Center Yogyakarta uses the term "wisdom" to describe these endeavors.

³⁹ See the cases of Y and C.W., inmates with physical disabilities in the Class I Detention Center Bandar Lampung.

⁴⁰ This happened at the Class II A Detention Center Yogyakarta, where two prisoners with physical disabilities had been sent. Interviews with Agustiyar Ekantoro (Karutan) and P.S. (detainee with disability) on 12 September 2018. Agustiyar Ekantoro stated that "I had to refuse them because my block was on the 2nd and 3rd floors. If I had accepted them, they would have disturbed the other inmates. Secondly, they should not be free to go wherever they like."

⁴¹ This happened in the case of M., a prisoner with psychosocial disabilities at the Class I Detention Center Bandar Lampung.

⁴² This percentage is based on data per September 2018 from the Class I Correctional Institution in in Bandar Lampung. Similar data was also obtained from the Class II A Narcotics Prison in Bandar Lampung. An inmate named T.V. had a physical disability affecting his leg due to his being shot during the police investigation. The Yogyakarta Class II A Correctional Institution also housed inmate, JP, with a physical disability (paralyzed leg) as a result of being shot by the police during his arrest. JP suffered a total of 13 gunshot wounds. Similarly, AAW, an inmate of the Yogyakarta Class IIA Narcotics Prison was shot by the police, who suspected him of involvement in drug trafficking.

facilities and resources so that inmates with physical disabilities can receive rehabilitation services on an equal basis with other inmates.

5.1.3. Specific Findings on Correctional Institutions

Correctional institutions avail themselves of social security health benefits to serve inmates with disabilities. This policy is implemented by local governments and hospitals. However, access to social security is often hampered due to the requirement that claimants have a National Identity Card and Family Registration Card, and that they be enrolled with the Social Security Agency. These requirements are set by the Central Government.⁴³ Unfortunately, many inmates were found to lack population registration documents.

Social security schemes managed by local governments can also be accessed by inmates. Referrals can be made by the head of the Correctional Institution so that treatment costs are borne by the local government.⁴⁴ Among the social security health schemes that can be availed of are the JKN, Jamsostek, and Jamkesda programs.⁴⁵ However, accessing these programs was also difficult for many inmates who required help as they hailed from other districts or provinces, whereas local government social security schemes require beneficiaries to be residents of the relevant local government area.

5.1.4. Recommendations

Despite the research being conducted in two locations that exhibit differing characteristics, the findings proved to be similar in both areas. The differentiating factors, especially the strength of civil society, including the existence of organizations focused on helping persons with disabilities, have not had a positive impact on improving the services available to persons with disabilities in Correctional Institutions. Following are the recommendations from the baseline study in response to the findings and strategy to support DGC in promoting the rights of inmates with disabilities. The recommendations are clustered into three groups of recommendations:

5.1.4.1. Improving SDP modules to include features on assessment of inmates with disabilities from registration until treatment or rehabilitation process. The baseline study identified weaknesses in terms of data quality of inmates with disabilities. This has created challenges for DGC to identify and develop proper treatment and rehabilitation process.

5.1.4.2. Establishing Disability Service Units (ULD) in each UPT. The study has shown that inmates with disabilities require support and assistance from prison officials. The establishment of ULD will be able to assist inmates as required. The Disability Law also has required all government agencies to have ULD as part of improved services to PwDs .

5.1.4.3. Training on Disability Perspective for Corrections Officials. The baseline study has indicated the need for corrections officials to learn more about disability issues. The training could help officials respond to the unique needs of inmates with disabilities. The training will also help to shift

⁴³ Data provided by the Class I Correctional Institution Bandar Lampung.

⁴⁴ Data provided by the Class I Correctional Institution Yogyakarta.

⁴⁵ Data provided by the Class IIA Narcotics Prison Bandar Lampung

corrections officials' perspective and paradigm on the term "normality" to be ready to cater to the needs of PwDs.

5.2. Policy Advocacy on Disability Issues in Corrections

The baseline study's findings gained attention from officials of DGC as well as the Regional Office of the Ministry of Law and Human Rights for the Yogyakarta Special Region. PUSHAM UII, with support from AIPJ2/The Foundation, used the baseline study as the basis for designing programs to start mainstreaming disability issues in the corrections business process. PUSHAM UII developed two important programs to address the baseline study's recommendations.

5.2.1. Support to the Establishment ULD

Initially, advocacy for the establishment of ULD was carried out in the Yogyakarta Special Region as both AIPJ2/The Foundation and PUSHAM UII believe that the advocacy for the establishment of ULD should start from piloting at the local level. PUSHAM UII successfully persuaded the Head of the Regional Office of the Ministry of Law and Human Rights for the Yogyakarta Special Region to issue a Circular on the Establishment of Disability Service Units in Correctional Institutions. The issuance of the Circular was followed by the provision of training to officers and the making of improvements to the services provided and buildings operated by Correctional Institutions in Yogyakarta.

The success of the advocacy in Yogyakarta was then used as the basis for advocating for change at the national level. In 2020, PUSHAM UII successfully persuaded the Director General of Corrections to issue a Circular on the Establishment of Disability Service Units and another one on the Rehabilitation of Inmates with Mental Disabilities. The issuance of these two new instruments was soon followed by the establishment of disability service units, the provision of training to officers, and the making of improvements to facilities and infrastructure in Correctional Units around Indonesia.

5.2.2. Support to Improve Inmates with Disability Database

PUSHAM UII has also successfully encouraged the making of changes to the SDP through the addition of a significant feature on disability. Thanks to this feature, it is now possible to ascertain how many inmates of Correctional Institutions have disabilities and what kinds of disabilities they have. This data is important for the DGC in formulating programs and allocating funding for the provision of services to inmates with disabilities.

6. Key Challenges

During the design and program implementation of support to mainstream disability issues in the corrections business process, there have been some challenges, especially from non-substantive aspects. As a big government organization, the bureaucratic process in DGC has become one of the main challenges the program must manage. However, PUSHAM UII, with support from AIPJ2/The Foundation, has been able to manage these challenges. The following are some key challenges for PUSHAM UII in implementing the baseline study and its follow-up activities:

6.1.1 Tour of duty of staff. The DGC has a high turnover of staff; due to Tour of duty, they often transfer to their new position in a relatively short time period, which has created challenges as PUSHAM UII (including for AIPJ2/The Foundation in case there is a new Director of relevant DGC unit) has to be able to re-explain the Program to the new officer to ensure a smooth implementation process.

- 6.1.2. Administrative adjustment and budget challenges. The government has an administrative logic that is often different than what PUSHAM UII and AIPJ2/The Foundation have. This required a certain flexibility from the Program to avoid delay in the program implementation that could compromise the quality of the policy. With limited state budget availability, the infrastructure development of reasonable accommodation can be challenging.
- 6.1.3. Conservative mindset. Even though they are not dominant, some senior officials at the corrections' UPT are quite conservative about change and new ideas. This is caused in part by their limited interaction with civil society. The issue can be addressed through diplomatic discussions to promote new ideas and facilitate change.

7. Lessons Learned

PUSHAM UII's baseline study was an important milestone for AIPJ2/the Foundation's efforts in supporting DGC in mainstreaming disability issues in the corrections business process. The baseline has triggered other possibilities to improve and strengthen both DGC as an institution and its officials at the UPT level. AIPJ2/the Foundation identified four lessons learned from this support:

The first lesson from this process is that in Indonesia, to promote change at the national level, it is frequently necessary to make changes at a more micro but clearly visible level. The pilot project-based support model is an appropriate choice of model in this regard. Evidence-based advocacy is also the appropriate option for driving national-scale change in a country as large as Indonesia. With the success of the changes made at the local level, they can serve as an example and help to successfully overcome the doubts of officials at the national level. In general, senior officials tend to be more comfortable with the status quo. Evidence of success at the local level thus helps to avoid resistance to change at a higher level.

The second important lesson is that data-based advocacy is a key success factor. There is often a tendency to reject change as it is deemed unimportant and/or lacking a solid basis. Strong and reliable data produced using valid research methods helps convince people of the need for change. Solid data helps to overcome any lingering doubts or reluctance to make improvements.

The third important lesson is that it is essential to be able to persuade reformers within the institution who have a deep understanding and could drive reform from within (in this case, the Directorate General of Corrections). All data and programs for change need to be made part of partners' agendas. This can be done by incorporating activity achievement indicators in routine partner programs. Thus, partners will gain a sense of ownership over the programs and be better motivated to work to ensure the success of the programs. This can also be made a key performance indicator for the officials concerned.

The fourth important lesson is that society's role is critical to accelerating the institutional reform agenda. AIPJ2/the Foundation's support to DGC through PUSHAM UII is one of the examples of the program strategy in supporting the institution reform agenda in Indonesia. The Program has successfully promoted effective collaboration between CSOs and GoI agencies, especially agencies with high reform demand in the justice sector, such as the Supreme Court, Attorney General Office, and Corrections. Corrections officials at the UPT level need more interaction and open discussion with CSOs so that they can further understand the objective of the reform and its benefit not only to them but also to society. It is also

important to nurture relationships with CSOs that play an "oversight function" outside of the internal reform assistance so that they can be critical friends to the Government of Indonesia and its partners. This is important work as the program also needs independent views to ensure all programs are on track according to the agreed plan and expected outcome.

8. Conclusion

The effective implementation of the Disability Law has become a game changer for the Government of Indonesia to further promote the fulfillment of the rights of PwDs. The support from AIPJ2/the Foundation through PUSHAM UII has triggered awareness within DGC on the importance of the disability perspective being included as one of the important principles in their business process. This has made DGC among the pioneer GoI agencies that have considered disability perspectives in their business process. Despite various challenges in program implementation, PUSHAM UII, as the implementing partner, has been able to approach and secure a commitment from DGC and create small but significant changes to the corrections business process in Indonesia. The commitment from DGC is important for the sustainability and effectiveness of AIPJ2/the Foundation's support.