

SOLO CITY

A DISABILITY-INCLUSIVE CITY PROFILE



United Nations
Educational, Scientific and
Cultural Organization

2018

KOTA
KITA
A CITY FOR ALL

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A DISABILITY-INCLUSIVE

CITY PROFILE

MARCH 2018

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Solo City: A Disability-Inclusive City Profile

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ABOUT UNESCO

The United Nations Educational, Scientific and Cultural Organization (UNESCO) is responsible for coordinating international cooperation in education, science, culture and communication. UNESCO Office in Jakarta is a Regional Science Bureau for Asia and the Pacific dedicated to fostering equitable and inclusive human development based on the universal ethical and human rights frameworks. UNESCO works closely with the governments and the civil society to promote participatory and inclusive processes and policies: making sure that all the relevant voices are heard and everyone benefits equitably from social and economic development. In Indonesia, UNESCO has joined forces with sister UN agencies WHO and ILO and the Network of Mayors for Inclusive Cities to realize a UN initiative on promoting the rights of persons with disabilities (UNPRPD).

ABOUT KOTA KITA

Yayasan Kota Kita or Our City Foundation (www.kotakita.org) is an Indonesian non-profit organization helping people make thoughtful and inclusive decisions about the development of their cities – by facilitating citizen participation and collective action. We aim to empower a generation of people by promoting democratic and participatory approaches to improve urban areas. The Foundation has experience carrying out projects in more than 12 rapidly urbanizing cities.

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GLOSSARY

APBD	<i>Anggaran Pendapatan dan Belanja Daerah</i> , local government budget
BKMKS	<i>Bantuan Kesehatan Masyarakat Kota Surakarta</i> , A social security mechanism and card that cover health assistance only for citizen Solo with minimum stay of 3 years
BPJS Kesehatan	<i>Badan Penyelenggara Jaminan Sosial Kesehatan</i> , National Social Security Administrator for Health; implemented nationwide since January 1, 2014
BPS	<i>Badan Pusat Statistik</i> , National Statistical Bureau
CSOs	Civil Society Organizations
DPOs	Disabled Persons Organizations
FGD	Focus Group Discussion
Gerkatin	<i>Gerakan untuk Kesejahteraan Tunarungu Indonesia</i>
Kabupaten	Municipality, administrative unit under Province, equal to City
Kecamatan	District, administrative unit under City / Municipality
Kelurahan	Neighborhood, administrative unit under District / kecamatan
KIS	<i>Kartu Indonesia Sehat</i> ; Indonesia Health Insurance Card managed under BPJS mechanism, with specific target users of citizens who live in poverty and/or socially marginalized
Kota	City, administrative unit under Province
NGO	Non-Government Organizations
PPRBM	<i>Pusat Pengembangan dan Latihan Rehabilitasi Para Cacat Bersumberdaya Masyarakat</i> , Community-based Rehabilitation-Development and Training Center for Persons with Disabilities
RT	<i>Rukun Tetangga</i> , a smallest territorial unit of Indonesian cities which consist around 20-30 households
RW	<i>Rukun Warga</i> , a territorial and administrative ordering system above RT level
Sekolah inklusi	Disability-inclusive school, public school that able to provide facilities for persons with disabilities
SLB	<i>Sekolah Luar Biasa</i> , school for special needs
UMK	<i>Upah Minimum Kota</i> , City Minimum Wage Rate; Solo's 2017 UMK is based on the Presidential Decree 78/2015
UNCRPD	United Nations Convention on the Right of Persons with Disabilities
UNESCO	United Nations Educational, Scientific and Cultural Organization
UNPRPD	United Nations Partnership on the Rights of Persons with Disabilities
UU	<i>Undang-Undang</i> , law
YPAC	<i>Yayasan Pembinaan Anak Cacat</i> , Foundation for the Development of Disabled Children

FOREWORD

UNITED NATIONS EDUCATIONAL SCIENTIFIC AND CULTURAL ORGANIZATION
(UNESCO)



Dr. Shahbaz Khan

Director and Representative

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Leste*

"Leaving no-one behind" is the central theme of the 2030 Agenda and a transversal objective for all the 17 Sustainable Development Goals. With an estimated 15% of the world's population – close to one billion people – living with some form of disability, it is clear that the fulfillment of the rights of persons with disabilities towards social inclusion is one of the necessary preconditions to achieve these Goals. This is especially important in light of the rising prevalence of disabilities, due to the ageing population and their associated health risks, as well as the global increase in chronic health conditions such as diabetes, cardiovascular disease, cancer and mental health disorders.

When it comes to promoting the rights of persons with disabilities, cities play a crucial role. Today around half of the human population lives in urban environments and this figure is set to increase to two thirds by 2050. Cities are centers of migration and diversity, offering significant opportunities for innovation, intercultural exchange and economic growth. At the same time, rapid urbanization and profound social transformation can pose serious threats to the inclusivity of urban developments, making it difficult for city authorities to adequately understand and respond to the needs of all citizens, particularly those populations most prone to marginalization and exclusion, such as persons with disabilities.

In Indonesia, cities are often at the forefront of inclusive social policy innovation, especially in regards to marginalized and vulnerable populations. In order to use the potential for positive social transformation at a city level, UNESCO partnered with the municipal governments to establish the Network of Mayors for Inclusive Cities. Conceived within the United Nations project on Promoting the Rights of Persons with Disabilities in Indonesia, the Network is hosted by APEKSI (Association of Indonesia Municipalities).

Like in many other countries, the efforts of city governments and civil society in Indonesia to enact effective policies are often frustrated by the lack of relevant up-to-date and accurate data. One way for city authorities to bridge the data gap and to strengthen the inclusive character of urban environments is by fostering closer relationships with persons with disabilities

and facilitating their participation in knowledge production and policy processes. The evidence indicates that enhanced participation leads to higher impact and effectiveness of city-level policy and action. Such participatory approaches can also offer the possibility of mobilizing the skills and expertise of persons with disabilities and their organizations in inclusive planning.

The Disability-Inclusive City Profile presented in the current publication is the result of UNESCO's collaboration with Kota Kita Foundation, based on the shared understanding that the reliable, disaggregated and fit-for-purpose data is essential for the design, implementation and evaluation of any policy that aims to promote social inclusion of vulnerable groups, including persons with disabilities. The project demonstrated the power of participatory data gathering and usage in the city of Solo. The choice of the pilot city is based on its historic commitment to disability rights, and the Mayor's enthusiasm in using innovative approach to tackle the challenges of disability inclusion.

The Disability-Inclusive City Profile, and its accompanying Participatory Data Collection and Mapping Tool represent a scalable model that can be replicated in other cities of Indonesia – by the Network of Mayors for Inclusive Cities, or other actors working towards the fulfillment of the rights of persons with disabilities. We hope that this inclusive and participatory exercise will strengthen the relationship between city authorities and the citizens living with disabilities in Solo. We also hope that similar collaborative approaches will be adopted by other city governments throughout Indonesia.

UNESCO, together with its partner UN agencies will continue to build bridges between the key national stakeholders – the government, civil society, research community and media towards the fulfillment of fundamental rights, and the realization of inclusive social development goals in Indonesia.

FOREWORD

CITY GOVERNMENT OF SURAKARTA



F.X. Hadi Rudyatmo

Mayor of Surakarta

Solo is serious about ensuring social inclusion and accessibility for persons with disabilities. The city has welcomed many persons with disabilities to seek rehabilitation and obtain health services, to study, and overall, to secure a better quality of life. Solo City Government commits to ensure that the city is inclusive and accessible for all, especially for persons with disabilities. In order to realize that vision, the city seeks collaborative thinking and work between the different stakeholders in the city, including persons with disabilities.

I hope that participatory data-collection methodology in Solo could help map the current conditions and reveal any room for improvements for persons with disabilities living in the city. I am sure that city governments everywhere, civil society organizations, and disabled people's organizations who are working on the issue would be able to benefit from the document to help with planning and effective policy-making to ensure disability inclusion.

Let us work together to make Solo a more disability-inclusive city!



This report provides useful information about the conditions and experiences of persons with disabilities in Solo, Indonesia. It aims to help the city government and other city stakeholders better develop and implement disability-inclusive regulations and policy.



1 INTRODUCTION

About the Study

Following Indonesia's ratification of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD) in 2011, officials and activists have felt the need "for improved data collection mechanisms and for a more coordinated disability rights movement with stronger capacity to engage in policy dialogue" (UNPRPD, 2016). This document fits into that context, by both developing a "more effective system for disability data collection" (ib.) and implementing that system into the model fieldwork.

In 2017, UNESCO and Kota Kita Foundation, in partnership with the government of Solo, developed and launched a pilot participatory data collection survey that investigated the experiences of persons with disabilities by neighborhood, in each Rukun Tetangga (RT), Indonesia's smallest urban administrative unit/scale. These data and maps will aid disability-inclusive initiatives in Solo by supporting the development of tools that strengthen the voice of persons with disabilities in issues of urban development and public finance.

The information presented in this document was collected using a participatory model. This approach is elaborated in a separate document – *Participatory Data Methodology for Disability Inclusive City*, which is complementary to this volume and available for free distribution. A group of volunteers collected data by going door to door in each RT, surveying 1,167 persons with disabilities. In addition, to obtain additional qualitative information, the project conducted discussions with five focus groups at the community level, analyzed geographical and professional diversity, and held a citywide workshop with key stakeholders to design policy recommendations.

This process resulted in a greater understanding of the conditions of persons with disabilities living in Solo, as well as the state of accessibility in the city. Thus, the information presented in this document, the "Solo City: A Disability-Inclusive City Profile", can be used by the city governments and other city stakeholders to better develop and implement disability-inclusive regulations and policy.

FIGURE 1: DIFFERENT AUDIENCES THAT THE REPORT MIGHT BE APPLICABLE TO



Methodology

The Disability-Inclusive City Profile was created from a six-month long participatory study that engaged with a diverse set of stakeholders: the city government, Civil Society Organizations (CSOs), and Disabled Persons Organizations (DPOs). The process includes three main phases:

- PHASE I: Assessment of the existing, available data on disability from different sources and consultation with practitioners and policy makers;
- PHASE II: Citywide participatory data collection, which includes the RT-level data collection and five focus group discussions (FGDs), data analysis, and consultation; and
- PHASE III: Development of a disability-inclusive profile of the city of Solo.

FIGURE 2: STEP-BY-STEP PROCESS DIAGRAM OF THE “DISABILITY-INCLUSIVE CITY PROFILE”



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2 BASIC CONCEPTS

This document draws on terms and concepts from one international, one national, and two local documents: the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD); the National Law No. 8/2016 on Persons with Disabilities; the Local Law No. 2/2008 on Disability Rights; and the Mayoral Regulation No. 9/2013 Guidance on the implementation of Solo Local Law No. 2/2008 on Disability Rights.

By better understanding basic concepts associated with the rights of persons with disabilities, policymakers and the public will more efficiently uphold and strengthen these rights.

Persons with disabilities:

UNCRPD defines 'persons with disabilities' as "those who have long-term physical, mental, intellectual, or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." Subsequent to Indonesian ratification of the UNCRPD in 2011, the 2016 National Disability Law repealed and replaced all existing laws regarding disability rights, bringing formal classification of disabilities in line with international standards: physical, mental, intellectual, and sensory.

The Local Disability Law and Mayoral Regulation categorize only two types of impairment: physical and mental. These local documents classify sensory impairment as a form of physical impairment, and intellectual impairment as a form of mental impairment.

This document follows UNCRPD precedent but uses more precise categories for sensory impairments — physical, mental, intellectual, aural, and visual.

Accessibility:

UNCRPD views accessibility as a basic right: governments must make reasonable accommodations "to ensure persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications technologies and systems, and to other facilities and

services open or provided to the public, both in urban and in rural areas."

UNCRPD defines reasonable accommodation as "necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms." An alternative to reasonable accommodation is 'universal design,' which seeks the universal usability of products, environments, programs, and services — without need for modification.

Indonesian law differentiates accessibility from *inklusi*, or inclusivity. 'Accessibility' refers specifically to the physical accessibility of infrastructural, public, and economic spaces; while *inklusi* is a principle by which one may evaluate 'basic rights' — such as the rights to education, work opportunities, participation in development, and social aid. Indonesian documents also clearly differentiate 'special needs facilities' from accessible environments.

The local disability law mandates accessibility in three cases: education, rehabilitation and vocational training centers, and urban infrastructure.

This document uses the term 'accessibility' as a broad imperative that physical, programmatic, and institutional systems support the needs of persons with disabilities.



3 DISABILITY AND THE CITY

Solo – formerly known as Surakarta – is a city in Central Java, Indonesia. The municipality covers a 44-square-kilometer area and, as of 2016, had 557,606 registered residents. Often referred to as the ‘Spirit of Java,’ it lies in the geographic center of the island and is a real hub of Javanese culture.

Solo has earned recognition as a home for persons with disabilities. Following the Indonesian National Revolution (1945-1950), Prof. Dr. Soeharso, a pioneer in prosthetics, led a national effort to rehabilitate physically disabled veterans. In 1951, he founded Indonesia’s first panti rehabilitasi, a rehabilitation center in Solo. These

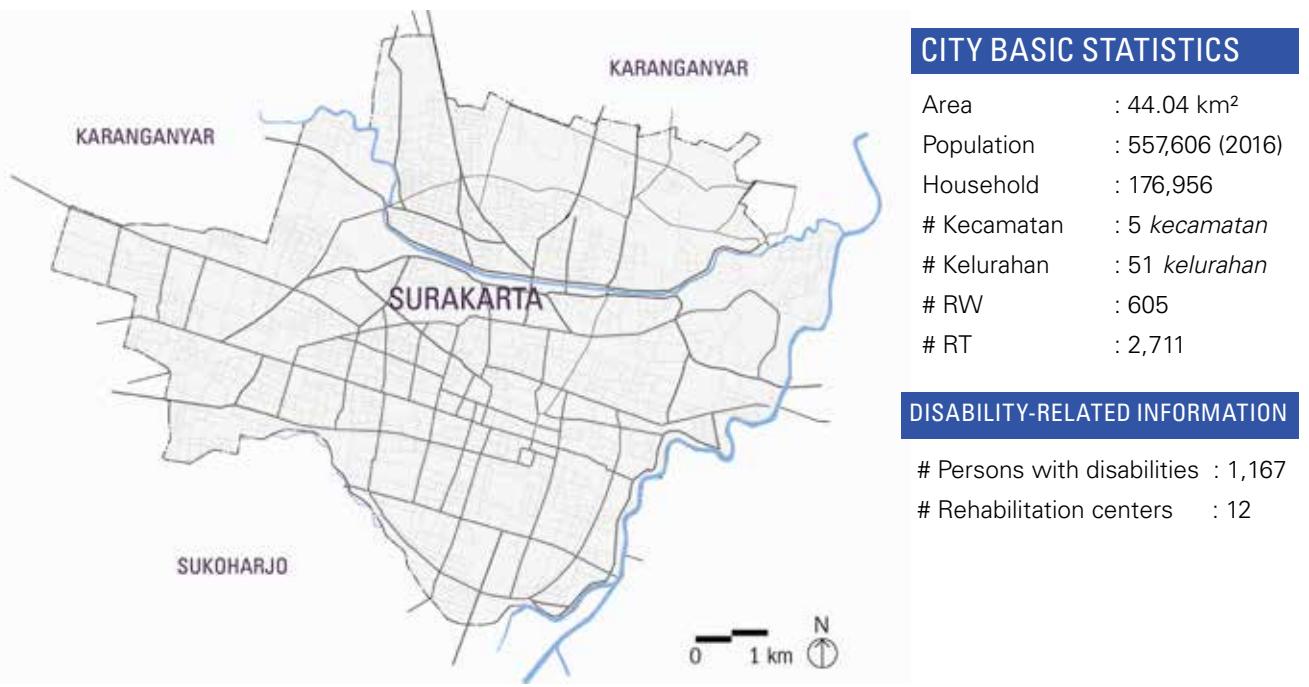
group homes provide shelter, vocational training, and medical care. The Prof. Dr. Soeharso Rehabilitation Center remains Indonesia’s national center for persons with physical disabilities and one of the largest facilities of this kind in Southeast Asia. This home catalyzed the establishment of related institutions in Solo, including an orthopedic hospital, a school of physiotherapy, a special needs school for students with disabilities, and a sports club for persons with disabilities. Persons with disabilities from throughout Indonesia come to Solo to make use of these facilities, and thus many stay in Solo permanently.

FIGURE 3: ORIENTATION OF SOLO



Solo located in the center of Java Island. As secondary city in Central Java Province, it provides services to the surrounding cities and municipalities.

FIGURE 4: SOLO AND DISABILITY - BASIC STATISTICS



Solo is also home to many prominent nonprofit organizations that work and advocate for disability-inclusive policy and development. These include Interaksi, Yayasan Talenta, Pusat Pengembangan dan Pelatihan Rehabilitasi Bersumberdaya Masyarakat (PPRBm), Yayasan Pendidikan Anak Cacat (YPAC), Sanggar Dunia Sunyi, Gerakan untuk Kesejahteraan Tunarungu Indonesia (Gerkatin Solo), Rumah Blogger Indonesia, and several others.

Thanks to vigorous civil society engagement, Solo was the first city in Indonesia to formalize UNCRPD by adopting a “rights-based approach to disability” (UNCRPD, 2016). The stated purpose of this international convention is “to promote, protect, and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.” However, the city legislature had already passed the Local Law No. 2/2008 on Disability Rights, which was hailed as a breakthrough as it preceded the national ratification of UNCRPD in 2011. The city executive reaffirmed and elaborated the law with the Mayoral Regulation

No. 9/2013 on Guidance on the implementation of Solo Local Law No. 2/2008 on Disability Rights. This regulation declared Solo an ‘Inclusive City,’ and called for, among other things: disability-inclusive schools, pedestrian guiding blocks, and ramps and elevators at public buildings.

Despite formal attention and good regulations concerning persons with disabilities in Solo, this group remains marginalized in their daily lives. A lack of reliable data has hindered the government’s successful amelioration of these problems. Persons with disabilities confront restricted access to education, physical infrastructure, social security, and livelihoods. Significant room for improvement still exists in the implementation of local laws and regulations: capacity building of relevant human resources, financing required facilities, and increasing public awareness. This last point is perhaps most important: citizens must first begin with the acceptance and inclusion of persons with disabilities in their own families. If these goals are met, persons with disabilities could better exercise their rights and responsibilities as active members of society.



F.X. Hadi Rudyatmo
Mayor of Surakarta

“Solo is serious about ensuring social inclusion and accessibility for persons with disabilities. The city has welcomed many persons with disabilities to seek rehabilitation and obtain health services, to study, and overall, to secure better quality of life.”



Improving public services and infrastructure is congruous to the efforts to improve accessibility and enjoyment of the city for all.



4

PROFILE OF PERSONS WITH DISABILITIES IN SOLO

The following sections profile the conditions of persons with disabilities living in Solo. This information — the result of participatory data collection conducted by UNESCO and Kota Kita Foundation — sheds light on the opportunities and constraints facing this community.

Number and Spatial Distribution

This survey determined that 1,167 persons with disabilities live in Solo. Of the city's five districts, Laweyan (278 persons), Banjarsari (310), and Jebres (287) each accommodates about a quarter of the total number of persons with disabilities in Solo, while the adjacent districts, Serengan (172) and Pasar Kliwon (120) together accommodate the final quarter.

Distribution is more uneven at the neighborhood level. Of the total 51 neighborhoods, three accommodate by

far the greatest number of persons with disabilities: Kadipiro (123), Jebres (108), and Pajang (98). The locations of certain institutions explain these distributions. *Panti Bakti Candrasa*, a home for blind persons, is in Pajang. Jebres is home to the *Prof. Dr. Soeharso Rehabilitation Center*, and this center resettles many of its residents in Kadipiro. The existence of *Sekolah Luar Biasa*, or special needs schools, accounts for notable numbers of persons with disabilities in other neighborhoods, such as Jagalan and Serengan.

FIGURE 5: DISTRIBUTION OF PERSONS WITH DISABILITIES BY KELURAHAN

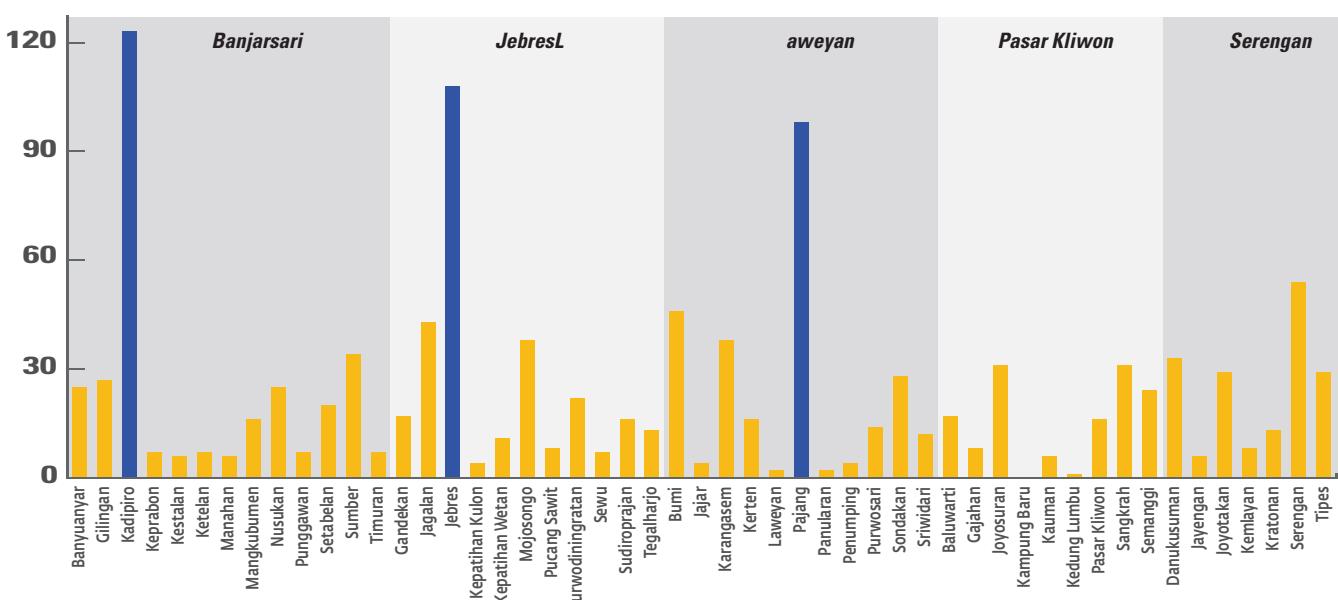
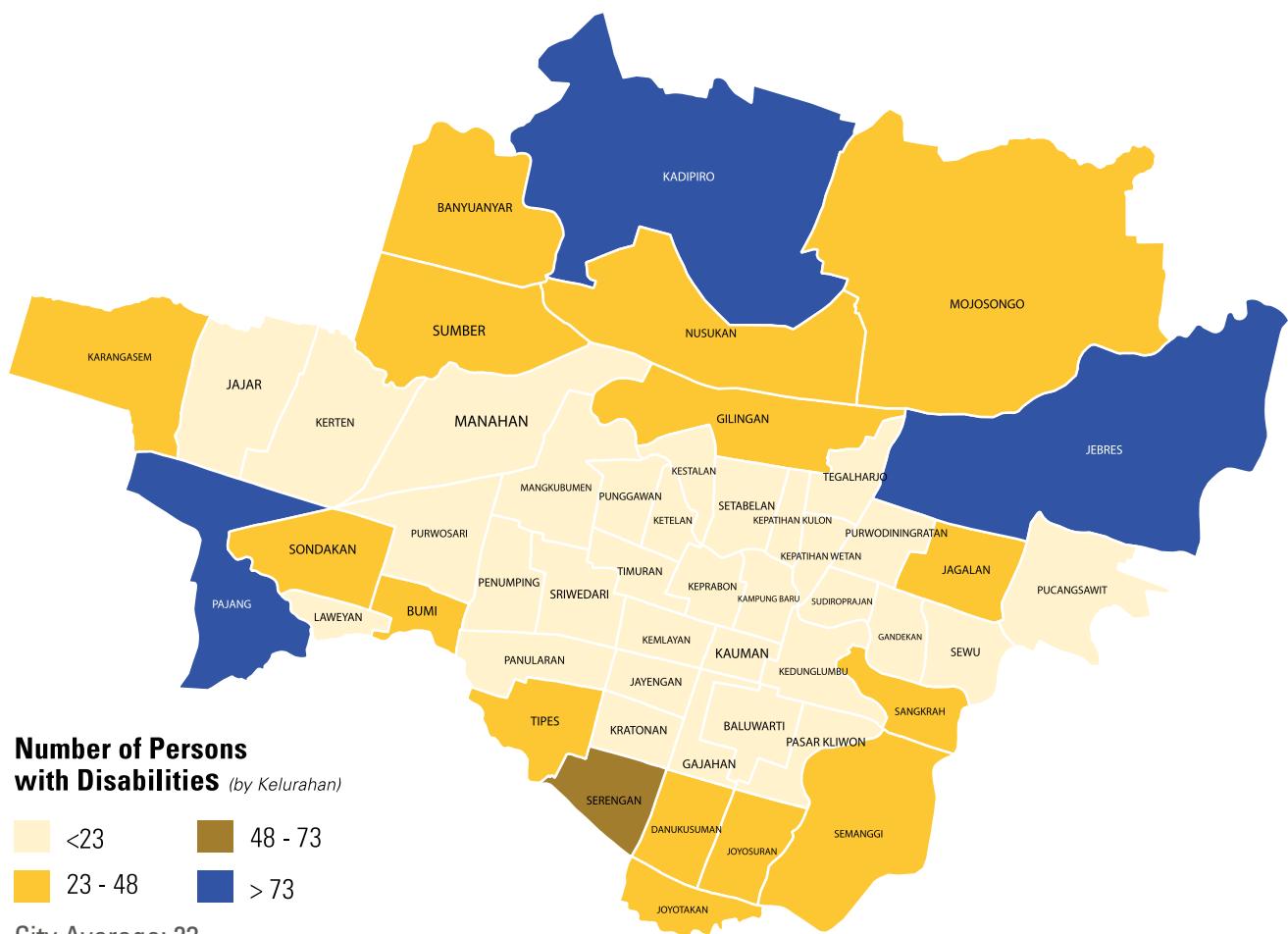


FIGURE 6: AGGREGATED DISTRIBUTION OF PERSONS WITH DISABILITIES BY KELURAHAN



Persons with disabilities are concentrated in the north, the east, the south, the southwest, and the west due to relatively inexpensive land and housing, which in part affect this spatial pattern. When it comes to accessing places of work, health facilities, and educational facilities, this pattern has implications for persons with disabilities as the aforementioned facilities are normally located in the center, far from the residential areas. This document further details the relationship in 'Chapter 5: Accessibility for persons with disabilities in Solo.'

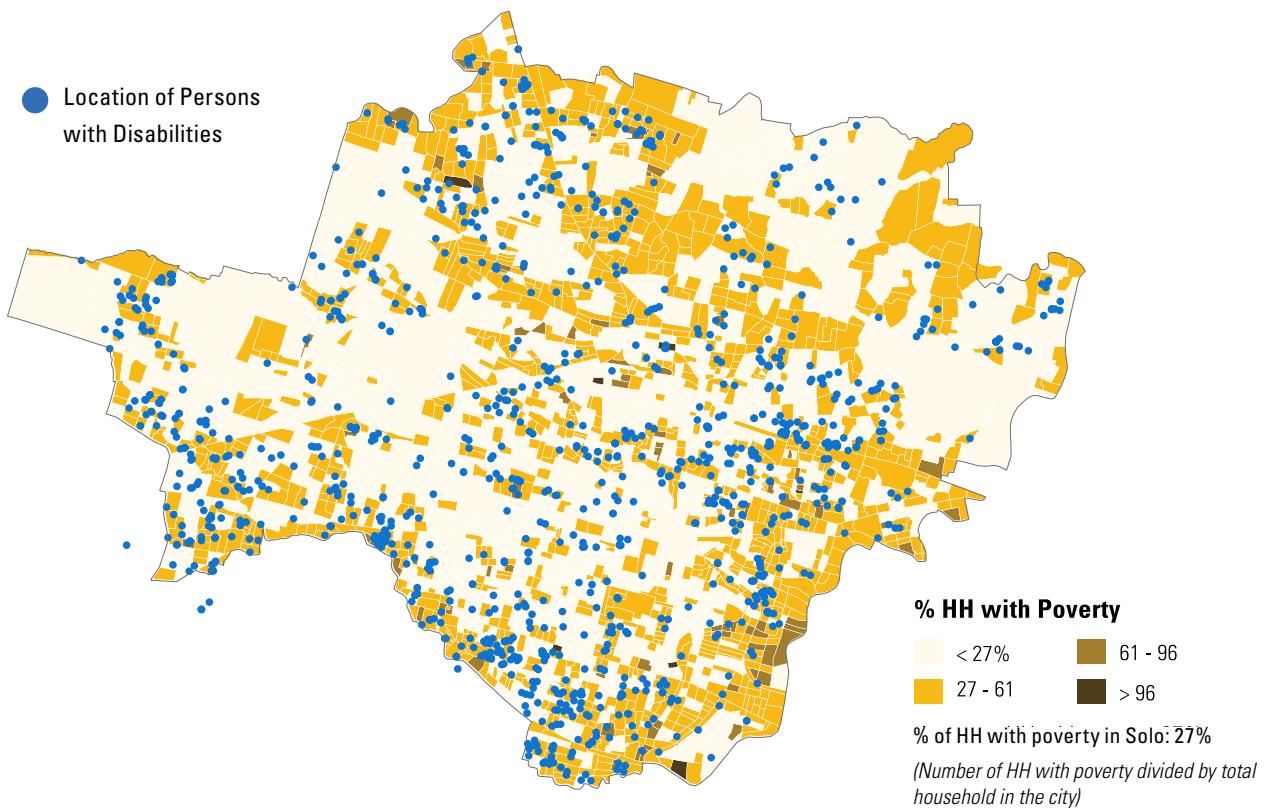
According to the analysis conducted using Geographic Information System (GIS), 60% of persons with disabilities live in the area where the poverty level is high. This points to a positive correlation between the concentration of persons with disabilities and the concentration of poverty in the city. The following map illustrates the spatial

distribution of persons with disabilities and poverty level by RT (See Figure 7).

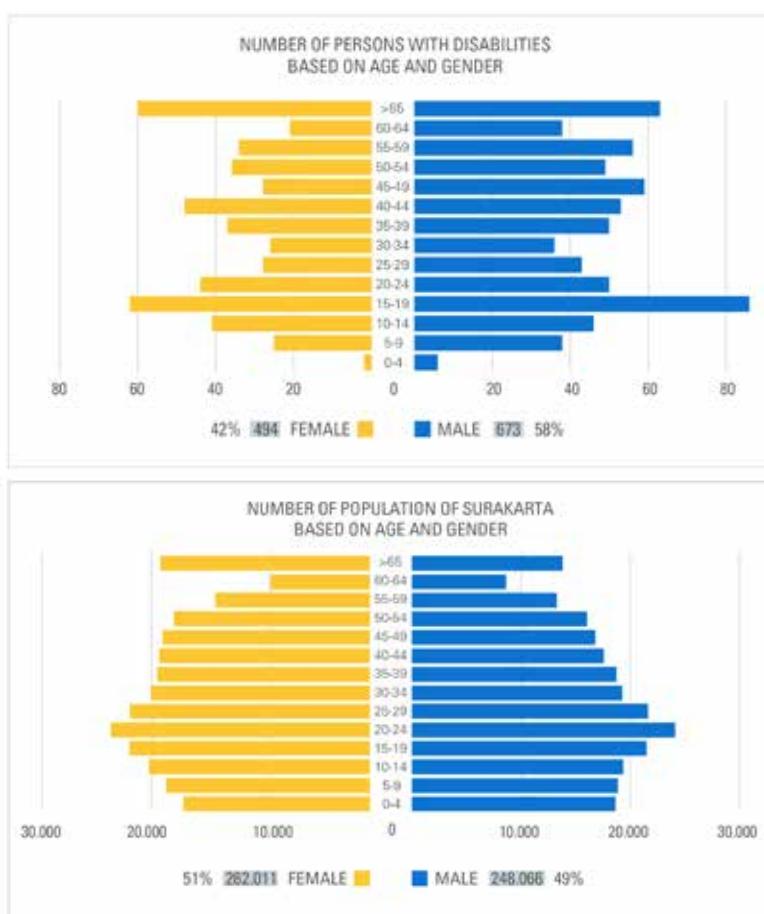
Persons with disabilities tend to live more in the geographic outskirts of Solo than in the center.

Dense concentrations of persons with disabilities appear in the city peripheries in the north, the east, the south, the southwest, and the west. Relatively inexpensive land and housing account for this spatial pattern. This distribution has implications for persons with disability in terms of their access to work, health, and educational facilities, as these are normally located in the center, relatively far from the residential areas. This document further explains the spatial patterns in the section on Accessibility.

FIGURE 7: SPATIAL DISTRIBUTION OF PERSONS WITH DISABILITIES AND POVERTY LEVEL



PERSONS WITH DISABILITIES BASED ON AGE AND GENDER



In terms of age and gender, the proportion of persons with disabilities in Solo is quite different from the usual population proportion in most Indonesian cities. Even though the proportion of male and female population in Solo is quite balanced, with 49% male and 51% female, the proportion of persons with disabilities is dominated by males, which account for 58% of the total population. In terms of age, the highest proportion of persons with disabilities in Solo are within the age range of 15-19, followed by the category of over-65 years old.

Type

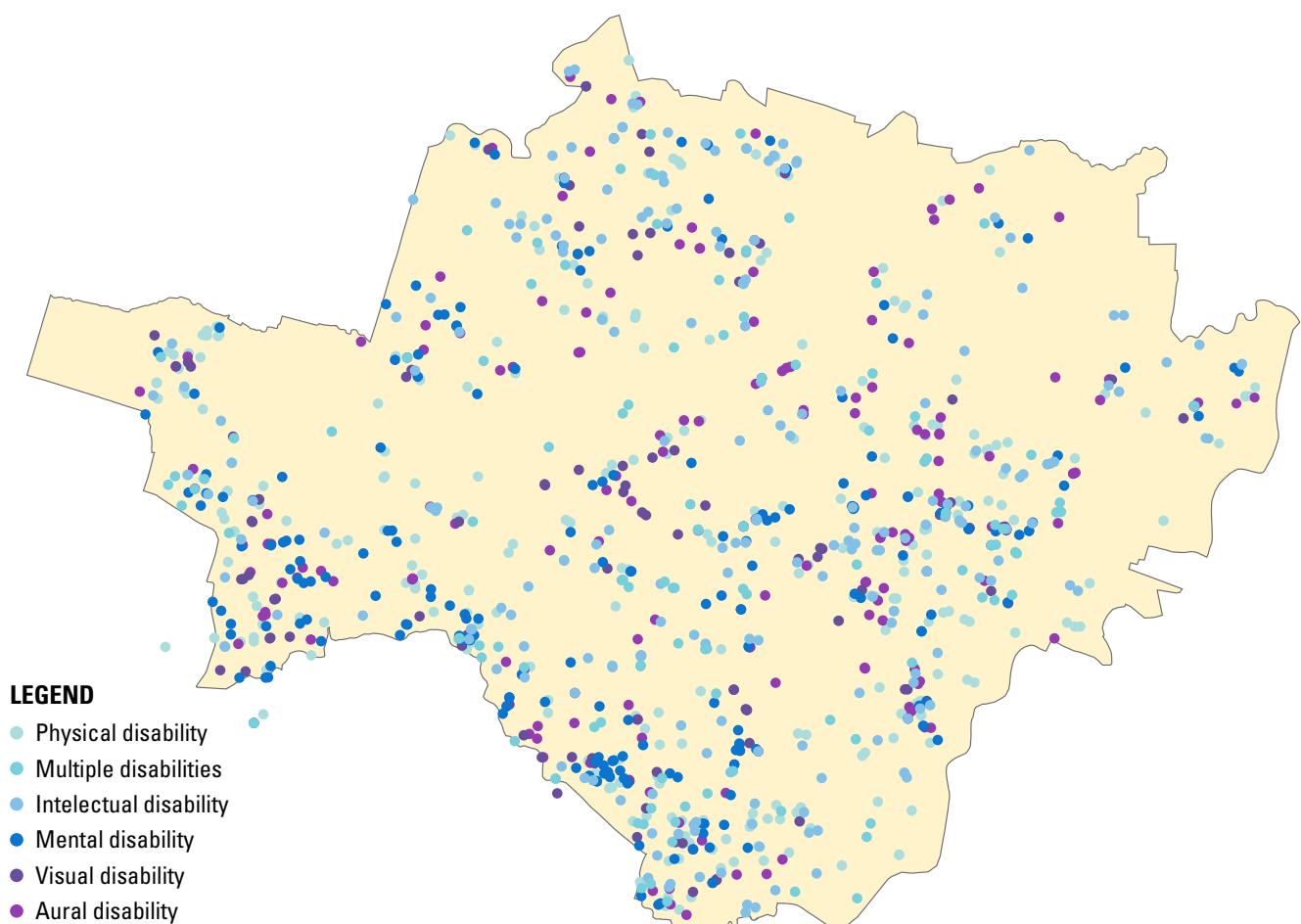
This report classifies disabilities into five types: physical, mental, intellectual, aural, and visual, following the national classification. Some persons have multiple conditions.

In Solo, there are 336 persons with physical disabilities, 206 persons with mental disabilities, 223 persons with intellectual disabilities, 170 persons with aural disabilities, 125 persons with visual disabilities, and 107 persons with multiple disabilities. Physical disabilities are the most common type in Solo, likely explained by

the wish of persons with disabilities to be close to *Prof. Dr. Soeharso Rehabilitation Center*.

In many instances, persons with disabilities live close to their related institutions, resulting in unique spatial distribution by type. For example, many persons with visual disabilities live in Pajang, home to Panti Bhakti Candrasa, a rehabilitation center for persons with visual disabilities; persons with physical disabilities often live in Kadipiro and Jebres, due to these neighborhoods' connections with the *Prof. Dr. Soeharso Rehabilitation Center*; and other people with physical disabilities live by a military center for paraplegics in Karangasem.

FIGURE 8: SPATIAL DISTRIBUTION OF PERSONS WITH DISABILITIES BY TYPE





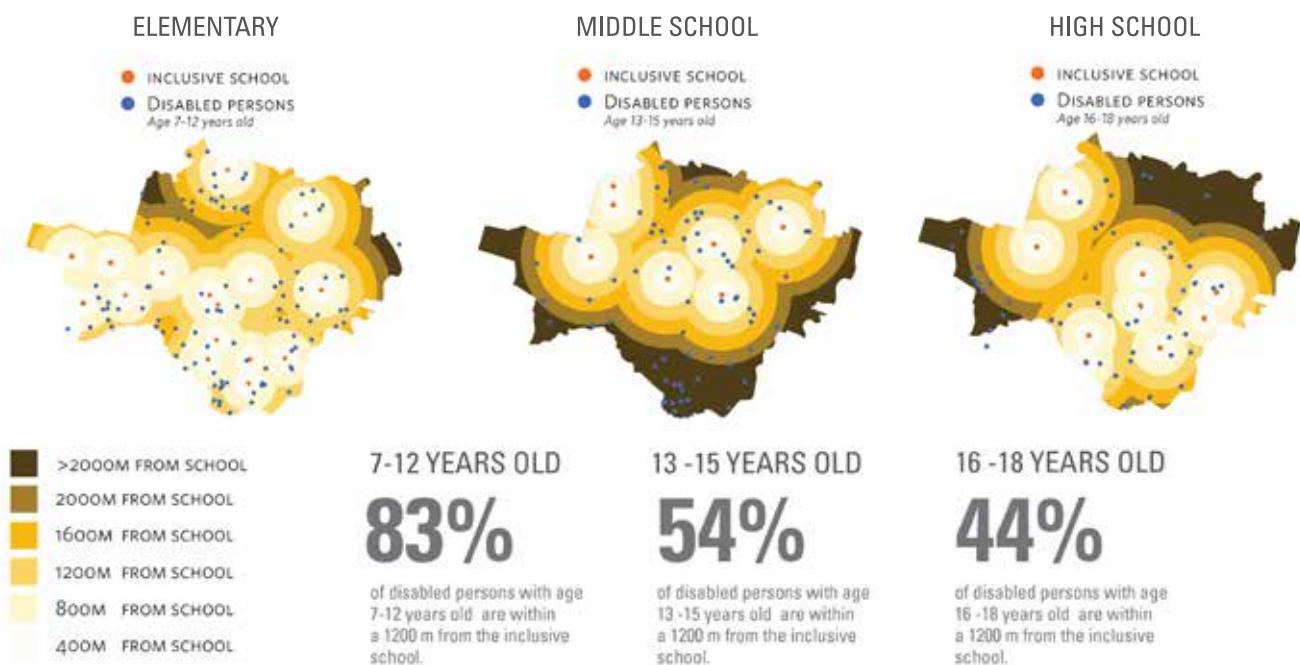
Educational Attainment

Persons with disabilities in Solo face serious deficiencies in educational attainment. One in five persons with disabilities living in Solo has never received any formal education.

The Indonesian Ministry of Education and Culture mandates *sembilan tahun wajib belajar*, or nine years of compulsory education until the end of middle school. However, of the 244 persons with disabilities within school age between seven to eighteen, only two-thirds (164) currently attend school. The remainder either works (6) or has no formal occupation (74). And of the 967 persons with disabilities within the working age, including those over 15 years old^[1], only 54% have completed middle school.

Public stigma, inaccessible physical infrastructure, and non-inclusive schools result in low levels of educational attainment. General ignorance of disability issues leads many to think of disability as a curse, leading some parents to prevent children with disabilities from attending school out of shame. Concealment of children with disabilities from the public keeps pressure off the government to tackle this involuntary truancy. Inaccessible urban infrastructure adds a further obstacle to school attendance. School buildings as well as transportation systems are routinely unreliable and unsafe, forcing students with disabilities to depend on others for their mobility. Finally, many Solo public schools do not accommodate students with disabilities, obliging students to seek out less common *sekolah luar biasa*, special needs schools, or vocational training programs.

FIGURE 9: SPATIAL DISTRIBUTION OF PERSONS WITH DISABILITIES BY TYPE



[1] According to National Statistical Bureau (Badap Pusat Statistik - BPS), people within age 15 years old and above is considered a working age. (<https://www.bps.go.id/subjek/view/id/6>)



Breakout Session

Education Group (26/09/2017)

"The availability of Sekolah Inklusi in Solo needs significant improvement in the day-to-day operation, especially in the readiness of human resources and in taking the extra measure to provide for a reasonable accommodation for persons with disabilities. To correspond with the local law, city educational department and schools must work to improve on the number of skilled teachers and facilitators, adjustment in curriculums, and ways to deliver it to the students; they also need to improve physical accessibility in the school environment."

(Comments synthesized from the discussion session during the Public Workshop "Participatory Data for Disability-inclusive Solo City Profile," Solo, September 26, 2017)



Left & Below-Right: The picture show the learning experience at Balai Rehabilitasi Sosial Bhakti Candrasa (Rehabilitation Center Bhakti Candrasa) accommodating for persons with visual impairment. The center serves as a residential with health and educational facilities, focusing on religious classes and vocational training to ready the patients for life after the rehabilitation period. **Up-Right:** Regulation mobility orientation skills training is given to the patients to heighten their senses and improve their confidence and independence to partake in daily activities in the city.

Livelihoods

At the time of the survey, most persons with disabilities of working age — defined as those between the ages 15 to 64 by the National Statistical Bureau — were either unemployed or not in the labor force. About 60% had no work, 30% had work, and 10% were students.

Low educational attainment — as described previously — is a principal cause of this low employment rate. Companies often do not trust the capacity of workers with disabilities and consider accommodating persons with disabilities in the workspace as big monetary investment. The National Disability Law requires that at least two percent of the workforce of government institutions and public companies be persons with disabilities, and that at least one percent of the workforce of private companies be persons with

disabilities. Few big businesses^[2] report compliance with this law, although the number could be improved. The government of Solo has taken some steps to promote compliance, as well as tailor vocational training to local economic needs.

The type of disability often limits the options of occupation. Persons with aural disabilities in many instances work as parking attendants, persons with physical disabilities typically have informal entrepreneurial jobs and almost 70% of persons with visual disabilities in Solo work as massage therapists. A local myth holds that the blind are destined to become massage therapists, so, the *Solo panti rehabilitasi* for the visually impaired specifically instructs residents in massage skills.



Agatha Febriany A.

Staff of Pusat Pengembangan dan Pelatihan Rehabilitasi Bersumber Daya Masyarakat (PPRBM) and contributor for Solider, an online media channel reporting on issues of disability

The interview was done in person in September 2017 and was followed-up through e-mail. The interview was conducted in Bahasa Indonesia and English translation was done by the researcher.

Q: *Can you describe yourself?*

A: My name is Agatha Febriany Anjarsari, I am 33-year-old and I have two sons. I am a blind person but it is not a birth condition. I got sick with glaucoma and have lost my vision entirely ever since.

Q: *Are you currently working? Can you describe your experience?*

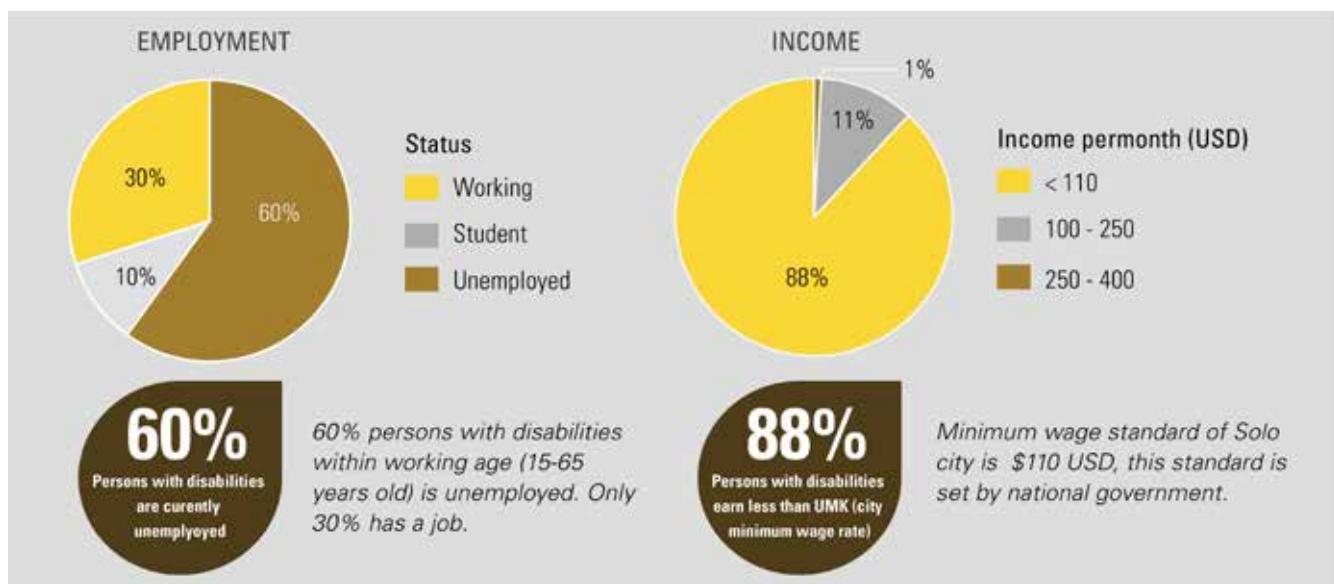
A: Even with a Bachelor degree, I struggled to get a job. So, I decided to join a rehabilitation center to get training on massaging skills. However, I have a strong desire to make use of my intellectual capacity and work as an executive staff. I applied to many companies and attended many interviews without a single success. Later, I opened up a massaging service with my friends. It was not the most fulfilling decision I made, but I needed to make a living. I kept trying to look for better options. In 2015, I came across a job opportunity in PPRBM, a disabled person organization that was working on a program called "Inclusive Indonesia: Combating Stigma and Discrimination of Woman and Children with Disabilities in Central Java" and I got accepted. To date, I have been working in PPRBM as a clerical assistant and I am currently contributing to an online magazine, *Solider*, that covers about the issues of disability in the city.

Q: *What can be done to support a workplace to be more inclusive?*

A: I think every person should have grit and perseverance to want the best for themselves and work towards that. I am grateful of where I am at the moment. Another way to ensure inclusion in a workplace is regulations and commitment to provide reasonable accommodation for persons with disabilities. PPRBM is committing to a 50:50 quota of acceptance for general staffs and staffs with disabilities. PPRBM's Director, Mr. Sunarman is also generally very supportive, he does not mind if I pursue a side job other than my current assignment.

[2] Based on the Focus Group Discussion (hereinafter FGD) with Solo city stakeholders (May 2017) that was held to consult the quantitative results of the participatory data collection, the researchers noted few progressive, disability-inclusive businesses in Solo, including Nakamura Holistic Therapy (wellness and health treatment), PT Tiga Serangkai (book publisher), PT. Tyfountex (textile manufacturer), and PT.Triangga Dewi (textile manufacturer)

FIGURE 10: EMPLOYMENT AND INCOME



Persons with disabilities living in Solo work as laborers, massage therapists, sewing professionals, and informal entrepreneurs. These jobs have low educational requirements and can be usually done from home. This is partially due to the inaccessible urban infrastructure and public facilities that may prevent persons with disabilities from traveling long distances.

Even with an occupation, majority of workers with disabilities living in Solo experience economic vulnerability. Of the 30% of persons with disabilities living in Solo that have jobs, 88% earn less than Rp. 1,500,000 per month. This income level is lower than a living wage by Solo municipal indicator^[3], and these workers require social assistance to meet basic needs.



Joko Murtanto
Illustrator

The interview was done in person in September 2017 and was followed-up through e-mail. The interview was conducted in Bahasa Indonesia and English translation was done by the researcher.

Q: Can you describe yourself?

A: My name is Joko Murtanto but widely known as Jaka Balung. I am 37 year old and my last education background is high school. I am a digital illustrator. My expertise is drawing face caricatures; I use Microsoft Word to help my work.

Q: Can you describe your working experience?

A: As you can see I have my weaknesses, [Mr. Joko has a physical disability as a birth condition], but I believe that if you practice and pursue something for 10,000 hours, you would become an expert in the subject matter. I have been drawing since 2010 since I truly enjoy it.

Q: Any tips for a self-starter like you in finding out career opportunities?

A: I think most importantly, one needs to have self-motivation and perseverance to be a better person. I also believe in having a support system of people who would motivate you and lift you up when there are problems. I would say that we [self-reference as a person with disability] should expand our network; I know one of the biggest obstacles is communication between persons with disabilities and the public in general. They are afraid to offend us, while persons with disabilities are not confident to enter the conversation and relationship. Mainstreaming the discussion about inclusion would help to minimize the gap.

[3] <http://www.solopos.com/2016/10/14/umk-solo-2017-disepakati-rp1-532-500-760814> The article described the regulation: Presidential Decree 78/2015 that serves as the base of the Solo City 2017's UMK (minimum wage rate)



5

ACCESSIBILITY FOR PERSONS WITH DISABILITIES IN SOLO

Solo has made strides in increasing accessibility for persons with disabilities, but much remains to be done. The discussion on accessibility in this section will be divided into two parts: (5.A) Physical accessibility which includes access to transportation services, public spaces, markets and (5.B) Access to basic rights including access to education facilities, rehabilitation, health facilities, health and social insurance, and political participation.

5.A PHYSICAL ACCESSIBILITY

Transportation Services

Independent movement is a precondition for independent living and full participation of persons with disabilities (UNCRPD, 2016)

Urban mobility services in Solo do not sufficiently consider the transportation needs of persons with disabilities. Solo contains both public and private transportation services. The former includes trains, buses, and *angkutan kota* (share taxis); the latter includes *becak* (pedicabs), *ojek* (motorcycle taxis), and taxis. Only 52% of persons with disabilities have indicated having used public transportation services. Of the 52%, 31% found the services comfortable, 8% did not, and 61% were neutral.

Related facilities — such as bus stops, train terminals, and sidewalks — often lack chairs, adequate space, and accessible entrances, likely exacerbating low levels of

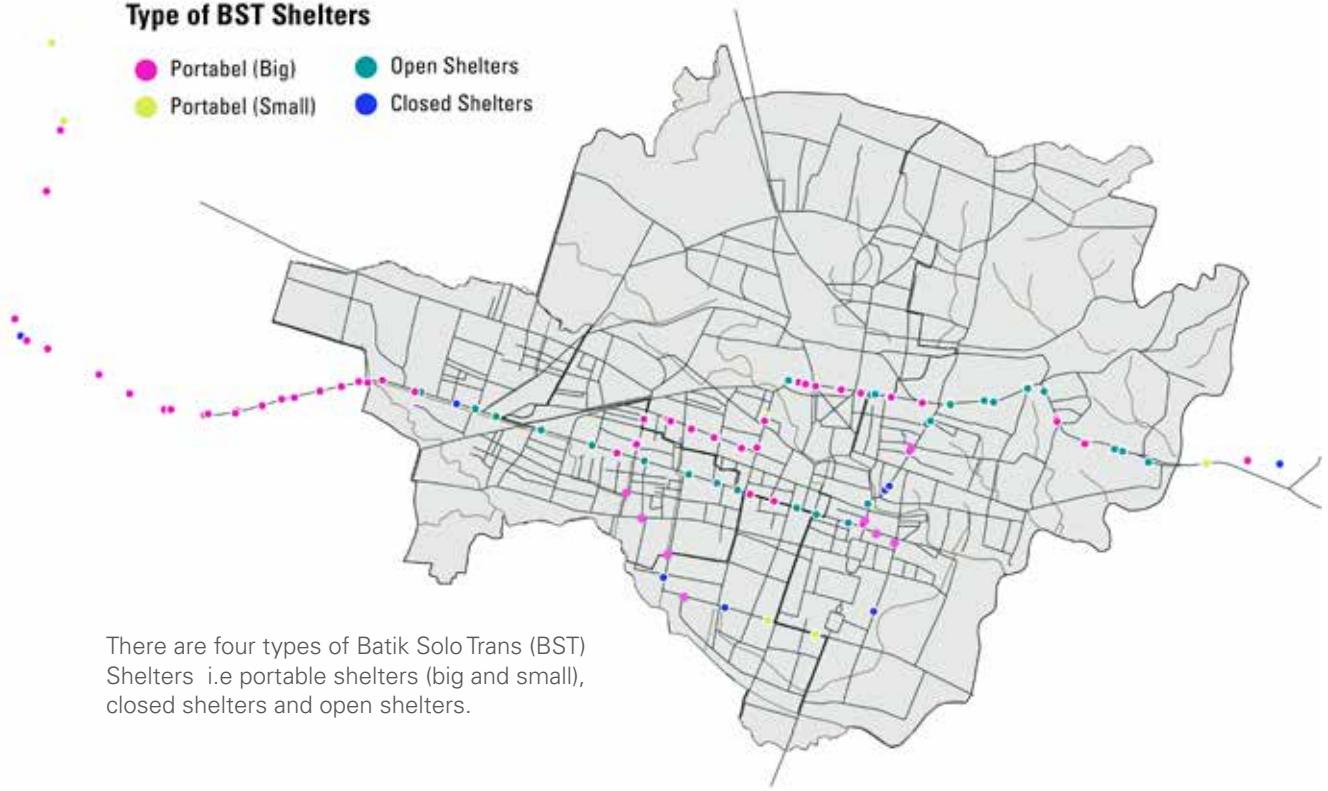
use and comfort. For example, of the 151 bus stops in the existing two bus corridors in Solo, only 24 bus stops have provided accessibility for persons with disabilities in the form of ramp and guiding blocks, particularly those located in the downtown. Some shelters still lack accessible entrance; the ramps are too high, or the standardized design is not implemented due to limited land. However, despite various inconveniences, urban mobility services and related facilities become more accessible as one approaches downtown Solo.

Usually, all types of vehicles share the road, and there is a lack of sidewalks. Where there are sidewalks, 69% of persons with disabilities in Solo report using them. Of these, 33% found the sidewalks comfortable, 7% did not, and 60% were neutral. Among the persons with physical and visual disabilities, 13% reported discomfort on sidewalks. Sidewalks, curb ramps, and pedestrian guiding blocks become more common closer to the city center.

FIGURE 11: ACCESSIBILITY BATIK SOLO TRANS (BST) SHELTER FOR PERSONS WITH DISABILITIES

Type of BST Shelters

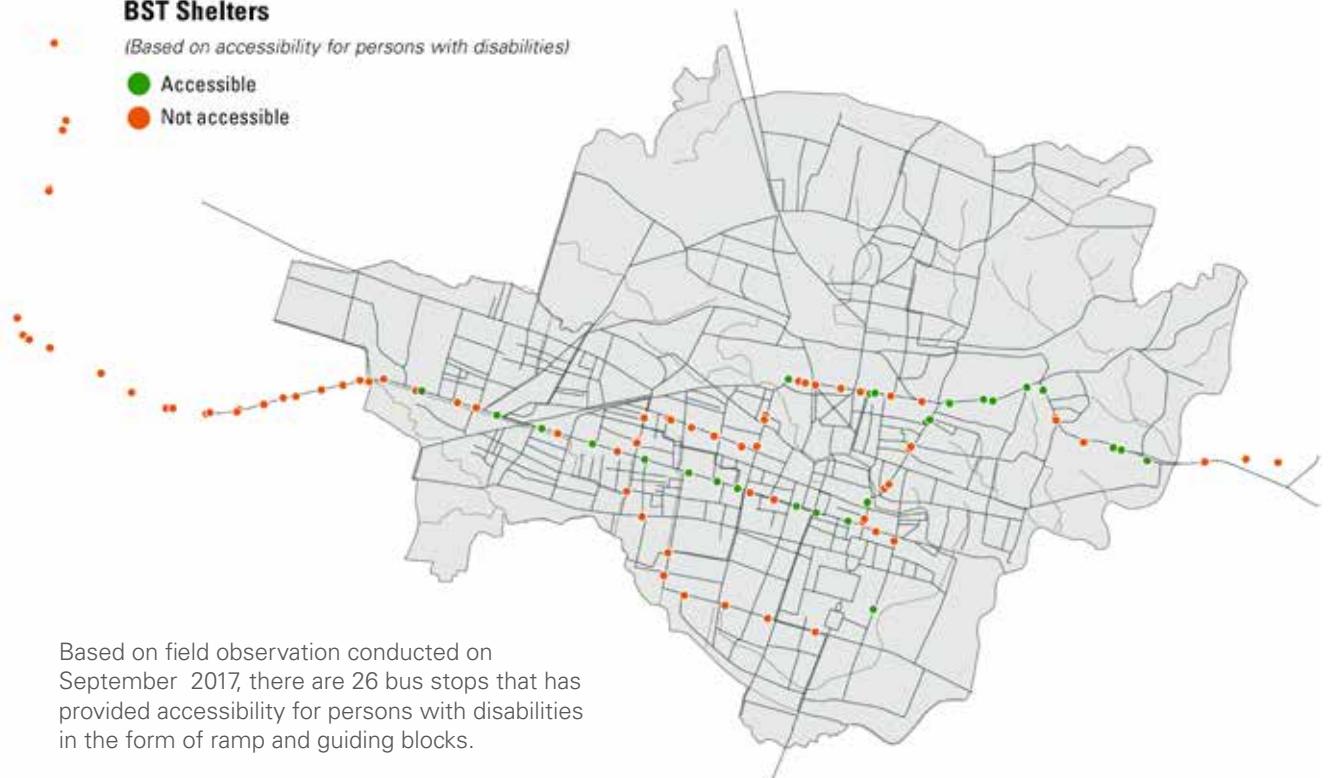
- Portabel (Big)
- Open Shelters
- Portabel (Small)
- Closed Shelters



There are four types of Batik Solo Trans (BST) Shelters i.e portable shelters (big and small), closed shelters and open shelters.

BST Shelters

- (Based on accessibility for persons with disabilities)
 - Accessible
 - Not accessible



Based on field observation conducted on September 2017, there are 26 bus stops that has provided accessibility for persons with disabilities in the form of ramp and guiding blocks.

BUS SHELTER

ISOLATED INITIATIVES TO IMPROVE PUBLIC TRANSPORTATION FACILITIES

CASE STUDY: PURWOSARI SHELTER AND UNIVERSITAS SEBELAS MARET SHELTER

CONDITIONS

Majority of bus shelters in Solo have provided accessibility for persons with disabilities. From 2015 to 2017 there were 14 bus shelters that have been improved throughout the city, accommodating the principle of the universal design. We consider the bus shelter located in front of Purwosari Station as a good illustrative example of how to analyze, improve, and manage factors that ensure inclusiveness in public facilities. After the improvements made in 2016, the bus station now provides low elevation ramps and guiding blocks connected to the sidewalk in Slamet Riyadi Street. In contrary, the improvement done in the bus shelter and road connecting to it in front of Sebelas Maret University was made in isolation and not in conjunction with the other complementary changes needed for the persons with disabilities to take the full advantage of the ramp access. Since the sidewalks next to the ramp are still uneven, the facilities remain inaccessible.



IMPLICATIONS

- The improvements of facilities towards easier accessibility should be designed and carried out as an integrated, holistic approach that takes all complementary needs into account. Leaving out an important structural barrier – such as the uneven sidewalk will negative the potential benefit of an improved facility for social inclusion.
- The size of the investment in infrastructure improvement is not directly proportional to the degree of benefit for the targeted citizens and communities; well thought through, evidence-informed solutions derived with the direct participation from the target communities make the real difference.

ROOM FOR IMPROVEMENTS

- The mechanism and collaboration between departments, public service providers, and citizens is needed to implement an integrated approach for improvements.
- Involving persons with disabilities in the planning process would open a direct and practical insight for policymakers and help avoid missing important components for the effective inclusive design.

NO	ISSUE	IMPLICATIONS	RECOMMENDATION
1	Isolated improvement effort by the Department of Transportation to provide for disability-friendly facilities i.e bus stops	The size of the investment in infrastructure improvement is not directly proportional to the degree of benefit for the targeted citizens and communities; well thought through, evidence-informed solutions that would resulted in integrated solution are the ones that make a real difference	Mechanism and collaboration between departments, public service providers, and citizens is needed to implement an integrated approach for improvements.
2	Lack of awareness and knowledge of the general public about the existing facilities for people with disabilities	The existing facilities (like ramps and guiding blocks) do not fully function as people block them by parking or building non-permanent structures	Need to collaborate with various stakeholders to raise awareness to the general public about the facilities' functions.
3	Limited public transportation options for persons with disabilities	Persons with disabilities often have low mobility and rely on their relatives to move around the city.	Improving public transportations systems and legalizing online transportation systems.

Public Spaces

Due to the lack of wheelchair ramps and pedestrian guiding blocks, only 39% of persons with disabilities have reported the use of public parks and gardens. Parks, gardens, and open spaces in Solo include Taman Balekambang (in Manahan neighborhood), Taman

Sriwedari (Sriwedari), Alun-alun Lor (Kedung Lumbu), Benteng Vastenberg (Kedung Lumbu) Alun-alun Kidul (Gajahan), Taman Cerdas (Jebres), Jurug Zoo (Jebres), and others.

CITY WALK-PEDESTRIAN ACCESSIBLE VERSUS COMFORTABLE CASE : CITY WALK OF JALAN SLAMET RIYADI

CONDITION

One of the city's most significant infrastructure improvements is the city walk alongside Slamet Riyadi Street. The improvements made in 2010 ameliorated the general pedestrian friendliness (a good ratio of the width of the sidewalk to the road, and amount of benches and trees), implemented stricter regulations and penalty system to curb informal vendors and vehicles parked in the vicinity, and installed guiding blocks to assist those who are visually impaired. However, based on the observations and testimonials from persons with disabilities, the guiding blocks still need improvement.

IMPLICATIONS

Limited use and poorly constructed guiding blocks on the sidewalk, i.e. wrong patterns, midway obstacles, and misguided decorative blocks, do not provide accurate guidance for the persons with visual impairments. Some people prefer to use the railway in the main road as a guide. Even though they are exposed to bigger risks, they admit that they are "more comfortable" using the railway as a guiding measure as the railway is "a consistent straight line" from the East to West, or as far as the Jalan Slamet Riyadi stretches.

ROOM FOR IMPROVEMENTS

- Public consultations and socialization efforts engaging representatives of government, contractors, and the general public before the development of facilities for people with disabilities.



Markets

There are 44 traditional markets in Solo, with one in most neighborhoods. Many local resident rely on these markets for daily necessities, especially food. The city government has placed special attention on improving these markets for purposes of economic development. However, these spaces are often inaccessible to persons with disabilities. About 57% of persons with

disabilities living in Solo say that they go to the market. 39% of these people feel that the market is comfortable while 57% feel that the market is uncomfortable. Few traditional markets — except Pasar Gede, Pasar Tanggul, and Pasar Klewer — feature signs, ramps, elevators, or other accommodations for persons with disabilities.



The diagram above illustrates the ideal condition for disability-friendly facilities. The public market that is located on the eastern part of the city features a low elevation ramp entrance and an inclined moving walkway.

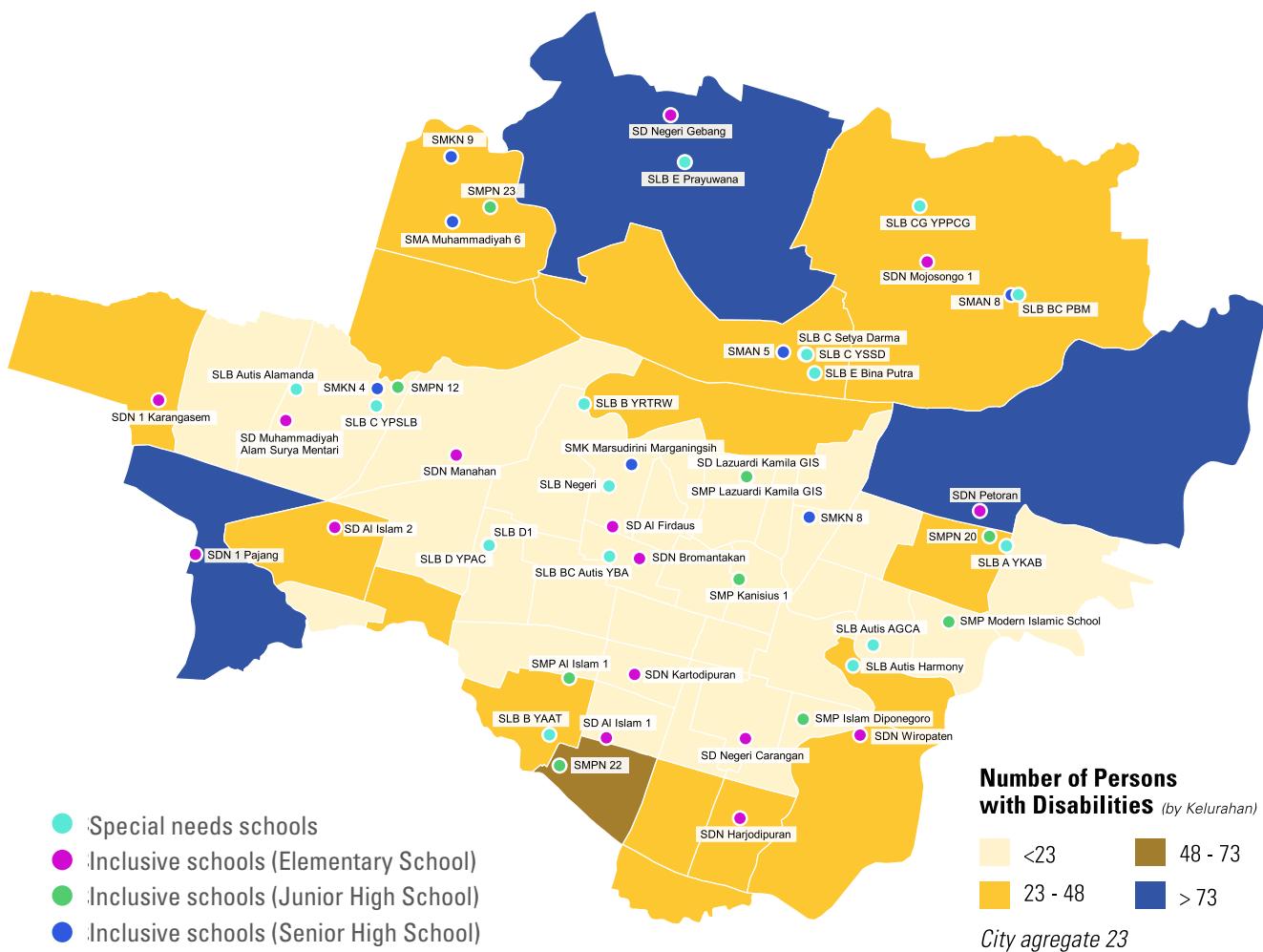
5.B ACCESS TO BASIC RIGHTS

Educational Facilities

There are two types of schools that accommodate students with disabilities in Solo: special needs schools (17) and disability-inclusive schools (32). Since 2012, the government has mandated inclusive public schools, but several special needs schools that are intended for students with various types of disabilities still operate.

Many of these disability-inclusive schools, however, have severe limitations in accommodating students with disabilities. Poorly trained teachers and improper facilities are major concerns. A lack of public understanding of disability issues prevents pressure on the government to actively promote educational inclusivity.

FIGURE 12: DISTRIBUTION OF SPECIAL NEEDS SCHOOL AND DISABILITY-INCLUSIVE SCHOOLS



KEY POINTS: ACCESS TO EDUCATION FACILITIES

NO	ISSUE	IMPLICATIONS	RECOMMENDATION
1	Lack of human resources in inclusive schools that have the capacity to assist students with disabilities. Usually, only one teacher in each inclusive school have the capacity.	In case the designated teacher is absent, the students with disabilities cannot be accommodated in class because there is no assistance.	<ul style="list-style-type: none"> • Recruitment of more teachers • Increase capacity through trainings on skills i.e. sign language and assistive learning to create a more inclusive environment.
2	Lack of reliable public transportation	It hinders students and students with disabilities to get to school	<ul style="list-style-type: none"> • Creating a city-coordinated school bus system with accessible drop off and pick up points • Collaboration with transportation providers (if applicable, including with online-based transportation) to provide for reliable and affordable transportation.



Health Facilities

The most common health facility used by persons with disabilities in Solo is *Pusat Kesehatan Masyarakat (Puskesmas)*, or Community Health Centers. These are government clinics that provide limited health care to all, including primary care and medical referrals. There are 17 Puskesmas distributed through Solo. Hospitals are the second most common health facility used by persons with disabilities in Solo. There are four public hospitals and nine private hospitals.

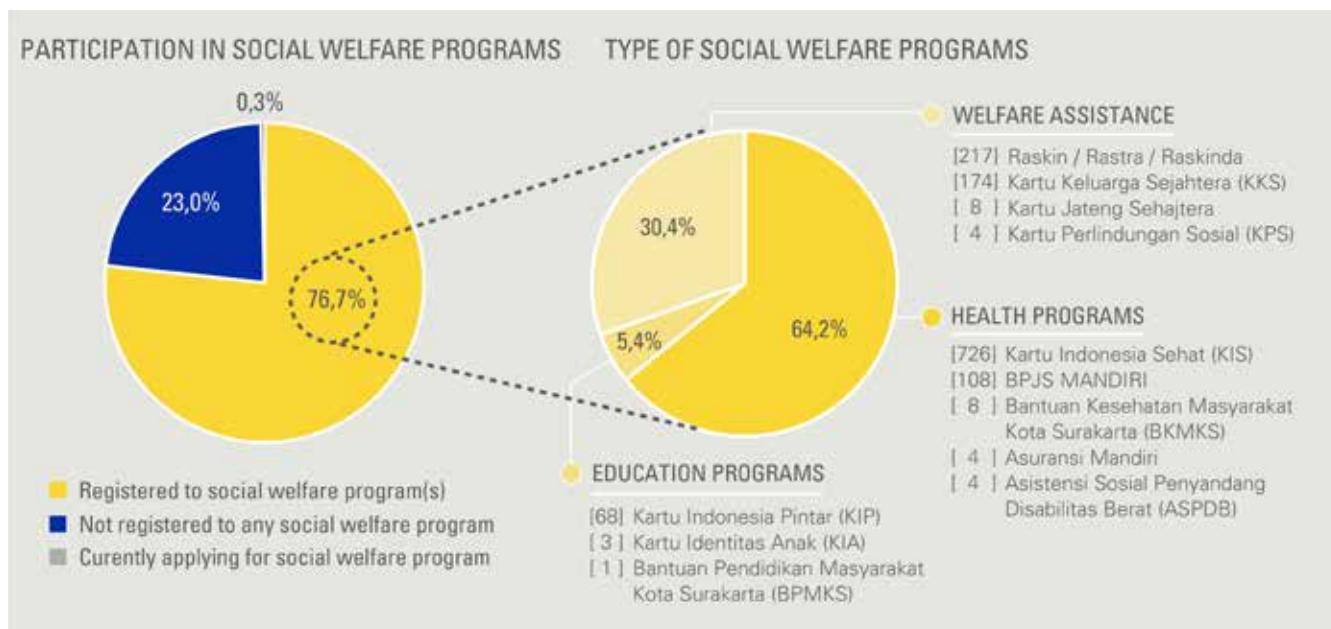
42% of persons with disabilities in Solo say that they usually get medication from Puskesmas, 22% from hospitals, and 14% from physicians' practices. 15% report that they do not generally use medications.

Social Insurance

Several welfare programs assist persons with disabilities in Solo, in line with the city vision of '*Waras, Wasis, Wareg, Mapan, Ian Papan*' — Javanese for medical, educational, food, financial, and housing security.

62% of persons with disabilities participate in Kartu Indonesia Sehat (hereinafter, KIS), more than any other welfare program, while 23% of persons with disabilities do not participate in a welfare program.

FIGURE 13: SOCIAL WELFARE PROGRAMS



The membership to KIS is relatively high. Our study revealed a positive attitude towards national health and social insurance plans. While working to coordinate for even bigger coverage of the KIS in Solo, since the beginning of 2017, the local government has also reactivated *Bantuan Kesehatan Masyarakat Kota Surakarta* (hereinafter, BKMKS) or the site-specific support for the citizens of Solo, especially for poor citizens. It is a temporary method to make sure that

marginalized citizens in Solo get social support from the government. Meanwhile, there has been an ongoing process made by the local government of Solo to better integrate and collaborate between responsible agencies, including *Dinas Sosial* (Social Department), *Dinas Kesehatan* (Health Department), BPJS, and Kelurahan officials to improve the accuracy of data and profiles of the citizens that suit the social and health insurance for which they are eligible^[4].

FIGURE 14: CHARACTERISTICS OF THE TYPES OF HEALTH INSURANCE

NO	CHARACTERISTICS	TYPE OF SOCIAL WELFARE PROGRAMS		
		BPJS Kesehatan	Kartu Indonesia Sehat (KIS)	Bantuan Kesehatan Masyarakat Surakarta (BKMKS)
1	FUNCTION	A national institution that provides social-health insurance	The follow-up to the BPJS Kesehatan system to make sure that the social and health insurance would cover poor and marginalized citizens	Site-specific health insurance that covers Solo citizen only. It targets marginalized citizens
2	SERVICE COVERAGE	Curative treatment	Covers most health treatments, check-up and curative treatment	Cover most health treatments; check- ups and curative treatment
3	PAYMENT	Regular insurance premium paid by the member	Paid by the national government from <i>Anggaran Pendapatan dan Belanja Negara (APBN)</i> or National Budget	Paid by local budget
4	COVERAGE AREA	National. In registered, following medical institutions	National, in almost every medical institutions including Puskesmas, hospital, and clinic	Only applicable for selected citizens in Solo

[4] <http://surakarta.go.id/?p=4313>. <http://solo.tribunnews.com/2016/12/30/warga-solo-bisa-langsung-manfaatkan-bkmks-mulai-3-januari-2017>

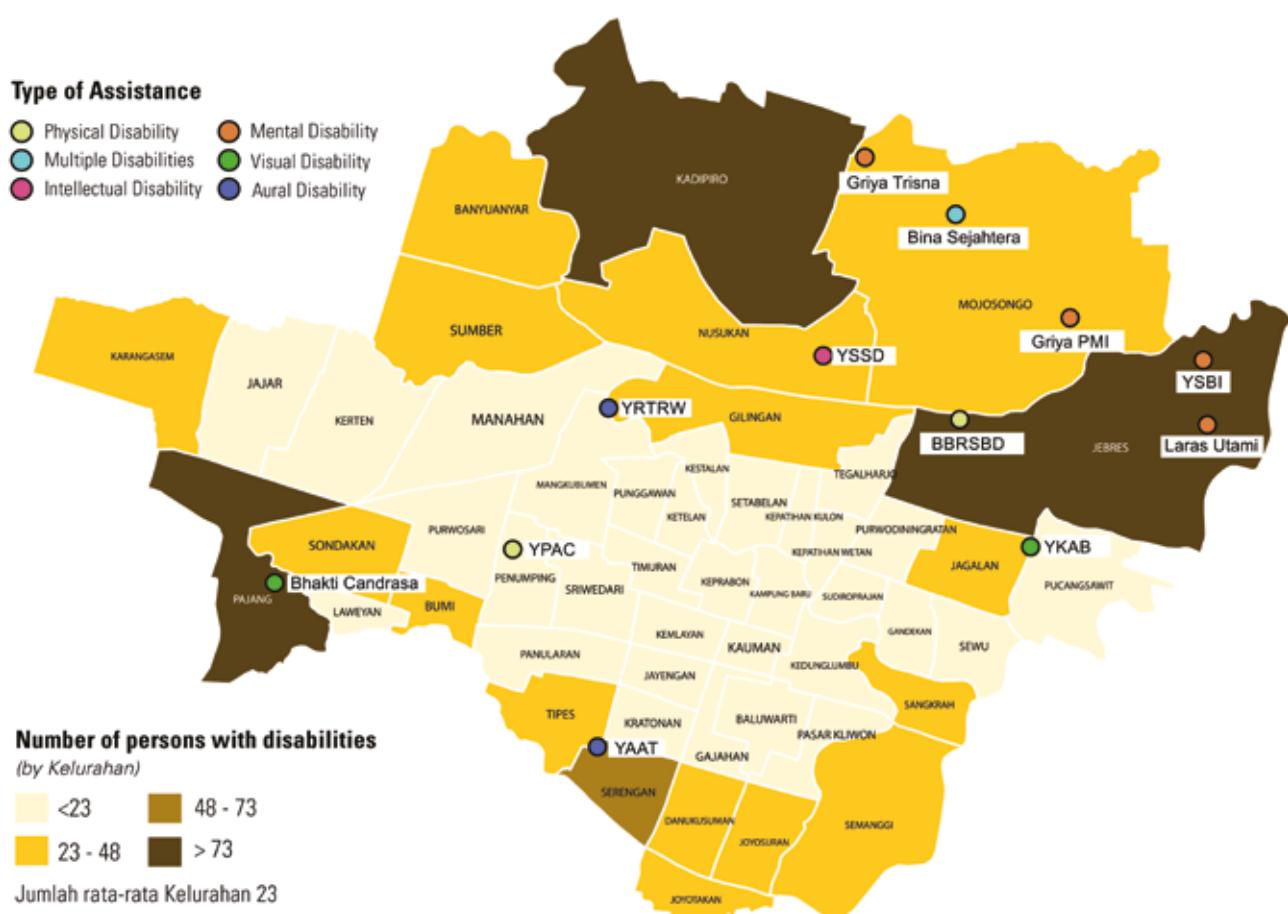
Panti Rehabilitasi

Solo houses 12 *panti rehabilitasi*: group homes that offer medical and vocational assistance, including few Foundations that offer school facilities. Different homes cater towards persons with physical, mental, intellectual, aural, and visual disabilities. Persons with disabilities are clustered around these institutions, as explained in the 'Spatial Distribution' section. As we learned from the experience in Kelurahan Semanggi^[5], the geographical placements of the institutions have an effect on the perception of the people living in the area towards persons with disabilities. Absence of

disability-related institutions decreases the exposure of citizens to persons with disabilities and subsequently the awareness of their needs.

Families often do not admit relatives with disabilities, especially those with mental and intellectual disabilities, to *panti rehabilitasi* because of the taboo associated with these conditions. There is also a misperception that these homes are prohibitively expensive for patients and hinder people from signing up for the assistance.

FIGURE 15: DISTRIBUTION OF REHABILITATION CENTERS



[5] The experience was learnt from the stories shared by the participants of the FGD held in Kelurahan Semanggi, March 2017. These participants said that people often stare at them and show little sympathy to offer help and assistance on the street, and they attributed it to the general unfamiliarity, Semanggi being geographically distant from any rehabilitation centers.



Some of the activities in rehabilitation center. Up- Left: Music classes given to students with visual impairments in Bhakti Candrasa Rehabilitation Center. Up- Right: One of the classes in the center is a massaging skill training for the persons with disabilities. This skill is considered as the most effective skill to possess to access employment. Up-Right: Regulation mobility orientation skills training is given to the patients to heighten their senses and improving their confidence and independence to do daily activities in the city.

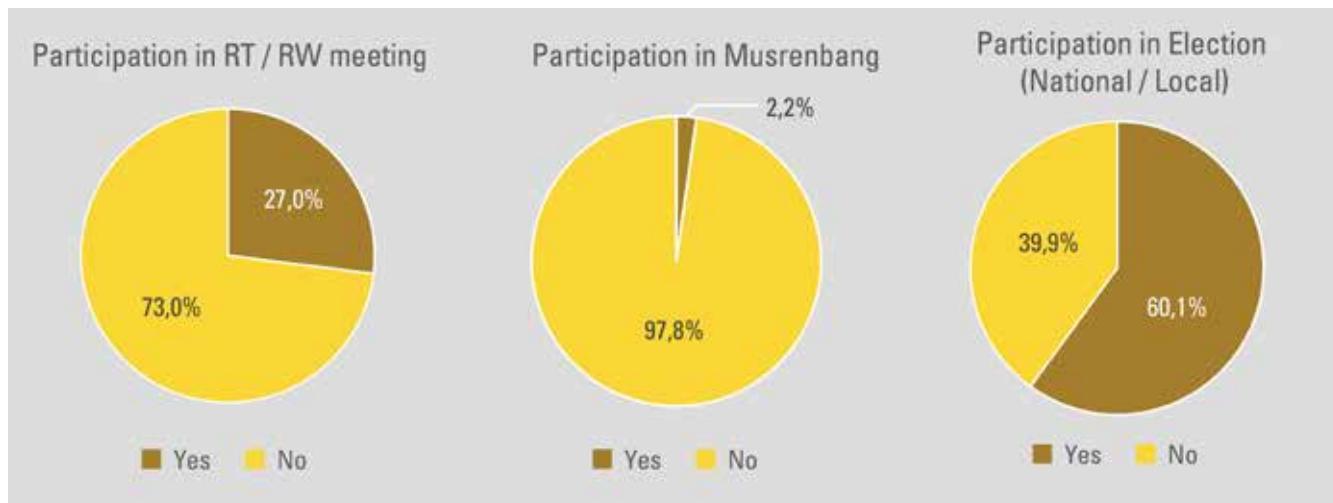
Political Participation and Community Engagement

Persons with disabilities are often marginalized politically and socially. Solo has a vibrant civil society, but the city has not made sufficient accommodations to ensure and promote the full and effective political participation of residents with disabilities. Despite the UNCRPD stipulation that governments "guarantee to persons with disabilities political rights and the opportunity to enjoy them on an equal basis with others," participation often remains out of reach for this marginalized community.

High electoral participation rates belie low levels of meaningful engagement. About 74% of eligible voters with disabilities have said that they voted in general

elections. But persons with disabilities, suffering from discrimination and limited public understanding, typically hesitate to propose programs or voice concerns. In the 2014 local election, there were no persons with disabilities running for elected office; the 2004 and 2009 local elections each featured one candidate with a disability. Persons with disabilities rarely participate in neighborhood meetings the *Musrenbang (Musyawarah Perencanaan Pembangunan)*, or the participatory budgeting forum. Participation at the lowest level, in neighborhoods, should be improved as they allow persons with disabilities to express their hopes and needs to the neighborhood officials and ultimately to the local government.

FIGURE 16: POLITICAL PARTICIPATION AND COMMUNITY ENGAGEMENT OF PERSONS WITH DISABILITIES IN SOLO





URIP PISAN PIKNIK
URIP PINDHO PLESIR
BALAWASE URIP DINGGO HEPP!
TELOMPOHLAKON Nas. 301 Budaya

6 KEY TAKEAWAYS

Building on the analysis of conditions of persons with disabilities and accessibility in Solo, we identified a number of issues that remain a concern and could be improved.

Access to public services is uneven and can be distant

Solo City has a lot of services and social welfare programs that cater to citizens, targeting especially the urban poor to ensure better distribution of access and opportunities. However, it is undeniable that the urban poor are also geographically marginalized in accessing services that are often located in the center; evidently, persons with disabilities are concentrated in the periphery areas. Therefore, it is crucial to advocate for better urban mobility by providing public transportation, improve pedestrian conditions, and equip public buildings to handle the needs of the persons with disabilities.

Sub-standard educational achievement hinders inclusion in job markets

For a number of reasons, from social stigma and inaccessible physical infrastructure, to non-inclusive schools, persons with disabilities are not going to school and this reduces their opportunity to be employed. This creates a positive feedback loop where low education levels result to a low socio-economic status, and further isolation and stigmatization, which results to more students with disabilities not attending schools. However, we also have to recognize and shed light to the story of successful job inclusion,

including persons with disabilities that holds strategic position. This would create a more positive and uplifting environment to overturn the public stigma. The issue with improving educational attainment is a big societal, institutional and policy issue. The city government should raise awareness, reduce stigma attached to persons with disabilities, and most importantly improve the quality of policies that elevate educational institutions and educators' capacity to cater to persons with disabilities. The government could complement the efforts by improving access to vocational training that is relevant to the labour market, and advocating policy that guarantees equal employment opportunities for persons with disabilities in government institutions and private institutions.

Disability-friendly infrastructure is inconsistent

In the last few years, the City Government of Solo has put a lot of effort to improve the condition of infrastructure in the city to be more accessible and friendly for persons with disabilities, by providing guiding blocks in the pedestrian ways, and ramps in the bus stops, markets, and other public facilities. However, many of these efforts were inconsistent, made in isolation, and not integrated with other facilities needed for the persons with disabilities to fully use the facility. For example, the improvement of bus stops did not serve their purpose because they were not integrated

with the improvement of all bus stops in the city and the connection from the bus stop and sidewalk was blocked. If the improvements are not consistent, it threatens the integrity of the whole system. Involving persons with disabilities in the planning process would open a direct and practical insight for policymakers and help avoid missing important components for creating an effective inclusive design.

Persons with disability do not have a strong voice nor participate fully in civic life

The study found that persons with disabilities in Solo do not have a strong voice in the development process. High electoral participation of the persons with disabilities is

a good signal, but it needs to be followed by meaningful engagement in the day-to-day civic and political process such as in neighborhood meetings, participatory budgeting forums, and other neighborhood to city-level engagements. We believe that through this everyday platform, their participation, by expressing their needs and advocating for better policies, carry more weight and result in creating a more inclusive society. However, to improve and support their civic participation, the city needs to first eliminate discrimination of persons with disabilities.

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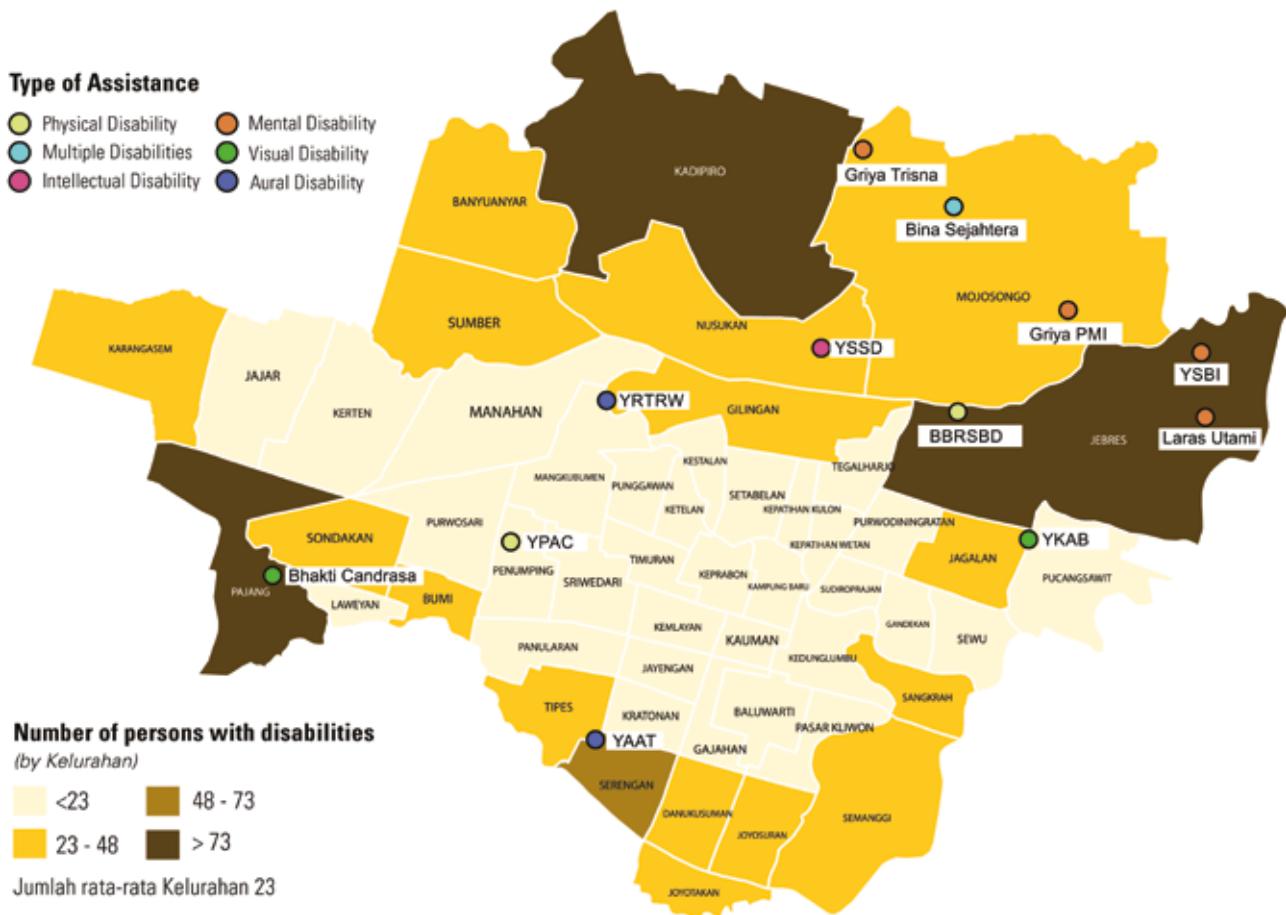
ANNEX

ANNEX 1 | OPERATIONAL DEFINITIONS

Definition of type of disabilities according to the National Law 8/2016.

NO	TYPE OF DISABILITIES	DEFINITION
1	Physical disability	The impediment of movement function such as amputation, flaccid paralysis or limb stiffness, paraplegia, cerebral palsy, stroke side effects, leprosy, or dwarfism.
2	Sensory disability <ul style="list-style-type: none">• Aural• Visual	The impediment of part of sensory nervous system such as visual impairment, hearing impairment and/or speech disorder.
3	Mental disability	The impediment of thinking, emotional, and behavioral functions such as: a) Psychosocial such as schizophrenia, bipolar disorder, anxiety disorder, and personality disorder. b, Development disability that affects social interaction ability such as autism and hyperactivity.
4	Intellectual disability	The impediment of cognitive function that was caused by intelligence that below the average such as slow learning, comprehension disability, and down syndrome

ANNEX 2 LIST OF REHABILITATION CENTERS



NO	NAMA	TYPE OF DISABILITY	CAPACITY	LOCATION
1	Yayasan Pembinaan Anak Cacat (YPAC)	Physical Disability	150	Penumping
2	Yayasan Asuhan Anak Tuna (YAAT)	Aural Disability	130	Serengan
3	Yayasan Rehabilitasi Tuna Rungu Wicara (YRTRW)	Aural Disability	100	Gilingan
4	Yayasan Kesejahteraan Anak-Anak Buta (YKAB)	Visual Disability	44	Jagalan
5	Laras Utami	Mental Disability	70	Jebres
6	Griya PMI	Mental Disability	200	Mojosongo
7	Yayasan Sosial Setya Darma (YSSD)	Intellectual Disability	79	Nusukan
8	Bhakti Candrasa	Visual Disability	65	Pajang
9	Yayasan Pelayanan Penyandang Cacat Ganda Bina Sejahtera	Multiple Disabilities	59	Mojosongo
10	Balai Besar Rehabilitasi Sosial Bina Daksa (BBRSBD)	Physical Disability	155	Jebres
11	Griya Trisna	Mental Disability	20	Mojosongo
12	YSBI	Mental Disability	40	Jebres

ANNEX 3 | WORKSHOP DOCUMENTATION

FOCUS GROUP DISCUSSION (FGD)

Location : Bhakti Candrasa Rehabilitation Center
Date : March 2017



FOCUS GROUP DISCUSSION (FGD)

Location : Kelurahan Jebres
Date : March 2017



PUBLIC CONSULTATION 1 - DISCUSSING THE WORK IN PROGRESS

Location : Hotel Indah Palace Surakarta
Date : April 2017



PUBLIC CONSULTATION 2 - OBTAINING INPUTS AND RECOMMENDATIONS

Location : Kelurahan Jebres
Date : September 2017



SOLO CITY

**A DISABILITY-INCLUSIVE
CITY PROFILE**