

From Analysis to Impact

Partnership Initiative Case Study Series

Organizing People with Disabilities Around Health Rights

SAPDA (Advocacy Centre for Women, People with Disabilities and Children) was established in 2005 to fight for the basic rights of marginalized groups in Indonesia. One such right is the right to health security. This right includes both covering the costs of health care and the provision of appropriate health services.

SAPDA's first step was to organize people with disabilities and teach them advocacy skills so that they could negotiate with government. Two local organizations were established in Sleman and Kulonprogo, and in 2006 and 2007 these organizations obtained funding from the annual municipal budgets. A third organization was established in Klaten for people with physical, sight, hearing, and speech disabilities. Organizations were also established in other cities and provinces.

SAPDA assisted the organizations in identifying and mapping their problems. Together they identified three urgent problems of people with disabilities: a) low income because of no, or poorly-paid, employment; b) low education compared to other citizens; and c) poor health status. The mapping also found that local government budgets did not prioritize the necessary services for people with disabilities.

IDEA is an organization in Yogyakarta that has worked for many years on budget research and advocacy. SAPDA and IDEA collaborated on organizing budget training for members of the organizations. SAPDA and the organizations then used their new skills in advocacy. They also used research done by Handicap International in one of the municipalities.

The organizations engaged with all the relevant institutions with power over health services and budgets. These included the provincial and municipal governments and the elected regional council. In particular, the organizations targeted Bapeljamkesos, the implementing agency for health security. Since 2006 this agency had provided funds to cover health costs of street children, sex workers, and people in institutions for the disabled.

In response to the advocacy, Yogyakarta Province gave SAPDA the responsibility for managing health security for people with disabilities living outside institutions. The government lists the people as health security beneficiaries. SAPDA is then responsible for managing the health security cards. SAPDA must itself finance outreach, provision of assistance, training, and other support.

SAPDA worked with the organizations of people with disabilities to increase understanding of their health security rights. SAPDA volunteers then maintained the database, managed cases, and gave other assistance to ensure that people with disabilities got health security.

By December 2010 SAPDA had organized more than 1,500 people with disabilities to get health security financed by Yogyakarta. In 2007 the province allocated IDR 16 billion for health security. The amount had increased to IDR 30 billion by 2010. In Sleman Municipality, the budget allocation for people with disabilities increased from IDR 25 million in 2006 to IDR 500 million in 2009.

Government also added treatments and medication specifically needed by people with disabilities to the list of costs covered by health security. The special needs of people with disabilities were also included in the draft Regional Regulation on Universal Health Security of Yogyakarta City for debate in the provincial council.