



The Wait that Kills Hope

Monitoring Report
on Women Refugees
in Three Regions:
The Urgent Need to Reform
Indonesia's Refugee Policy

2024

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Komisi Nasional Anti Kekerasan terhadap Perempuan
National Commission on Violence Against Women
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Monitoring Report on Women Refugees in Three Regions: The Urgent Need to Reform Indonesia's Refugee Policy

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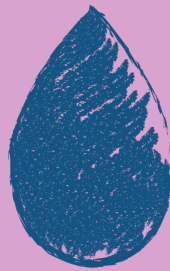
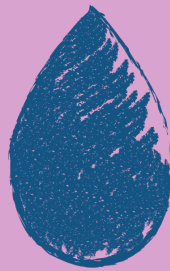
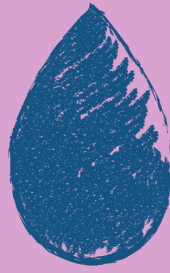
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Foreword

In a cross-institutional focused discussion, the International Advocacy Team of Komnas Perempuan was once asked why Komnas Perempuan conducts monitoring of refugees for advocacy purposes, even though Indonesia has not ratified the 1951 Convention Relating to the Status of Refugees and the 1967 Protocol Relating to the Status of Refugees.

It is true that Indonesia has not ratified the 1951 Refugee Convention, but the country has a long history related to the presence of refugees within its territorial boundaries. In 2024, the United Nations High Commissioner for Refugees (UNHCR), the UN agency responsible for refugee matters, marked its 45th year of presence in Indonesia. The presence of refugees in Indonesia can be traced back to the arrival of 250,000 “boat people” on Galang Island between approximately 1969 and 1996—Indochinese refugees fleeing conflict in Vietnam and Cambodia using makeshift boats.

Thus, although Indonesia has not ratified the 1951 Refugee Convention, its territory has become one of the places of refuge for those forced to flee their countries due to war or armed social conflict. The number of refugees in Indonesia in 2023 has reached 12,295 individuals, the majority of whom are from Afghanistan. In 2016, the Indonesian Government issued a Presidential Regulation on the Handling of Refugees, commonly known as the Perpres Pengungsi, as a state policy umbrella for addressing the refugees arriving in Indonesia.

Komnas Perempuan notes that the Perpres Pengungsi presents challenges, particularly concerning basic rights such as education and employment. This regulation also lacks a gender perspective, including in addressing the needs related to gender-based violence experienced by refugee women, such as domestic violence (KDRT) and other forms of violence occurring in public spaces or refugee accommodation sites. Refugee women experience domestic violence and other forms of violence, and they require safe spaces, case handling, and recovery from the impacts of the violence they have endured.

Findings from Komnas Perempuan’s monitoring show that it is not easy for women survivors to report or speak out about domestic violence or other forms of violence they have experienced. In addition to the cultural taboo surrounding the disclosure of domestic issues between husband and wife, survivors also face obstacles from the perpetrators and their families. On the other hand, handling such cases requires dedicated time, which means that survivors must leave behind domestic responsibilities, including caring for their children.

Another finding is that refugee women continue to face barriers in accessing basic rights such as health services, including reproductive health and maternity needs such as childbirth. Fulfilling the right to education for refugee children also remains a particular challenge, alongside access to clean water in accommodation sites, psychological pressure due to limited family finances, and the uncertainty of the resettlement waiting period in receiving countries.

The elimination of all forms of gender-based violence against women and the provision of legal and policy recommendations to the Government are part of the mandate carried by Komnas Perempuan. Efforts to eliminate violence against women and to provide input and recommendations by Komnas Perempuan include regular reporting to international mechanisms. These are among the reasons that prompted Komnas Perempuan to conduct monitoring of refugees in 2023–2024 in three areas: Cisarua, Tangerang, and Makassar.

Indonesia is a State Party to several core human rights instruments, including the Universal Declaration of Human Rights (UDHR), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the International Covenant on Civil and Political Rights, the International Covenant on Economic, Social and Cultural Rights, the Convention on the Rights of Persons with Disabilities, the Convention on the Rights of the Child, and the Convention against Torture. Komnas Perempuan holds the view that the elimination of gender-based violence against women, as well as the fulfilment and advancement of women's rights, requires an intersectional approach, including consideration of relevant international human rights instruments.

Based on reports from national human rights institutions and civil society organizations concerning civil and political rights as well as economic, social, and cultural rights—including in urgent situations that require government attention, such as refugees—the UN Human Rights Committee has recommended improvements in the implementation of civil and political rights and economic, social, and cultural rights. The Committee expressed regret over the lack of information regarding legal, policy, and practical measures taken to ensure access to basic services and essential needs for refugees and asylum seekers (Human Rights Committee, 2024).

In the *Concluding Observations* issued by the Human Rights Committee for the International Covenant on Civil and Political Rights and the International Covenant on Economic, Social and Cultural Rights, the Committee noted its review of Presidential Regulation No. 125 of 2016 on the Handling of Refugees and encouraged the Government of Indonesia, as a State Party, to reconsider its position regarding the ratification of the 1951 Convention Relating to the Status of Refugees and its Protocol.

Based on the aforementioned matters, Komnas Perempuan, through its International Advocacy Team, considers it important to conduct monitoring of refugees. To gather input

related to the fulfilment of basic rights and the handling of gender-based violence against women, Komnas Perempuan also held a series of dialogues with relevant stakeholders, including the International Organization for Migration (IOM), UNHCR, the Ministry of Foreign Affairs, the Coordinating Ministry for Political, Legal, and Security Affairs, local governments, the Office for Women's Empowerment and Child Protection (DP3A), and civil society organizations, including service provider organizations, Jesuit Refugee Service, and SUAKA.

Komnas Perempuan hopes that this monitoring report on refugees will encourage the Government of Indonesia to improve policies on the handling of refugees in the country, including the handling of gender-based violence cases against women and the fulfilment of women's specific needs. For the broader readership, Komnas Perempuan also hopes that this monitoring report will provide a more detailed picture of the living conditions of refugees, particularly women and girls, in Indonesia during their prolonged wait for resettlement in receiving countries, and strengthen awareness of the importance of fulfilling their basic rights.

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Executive Summary

Indonesia has ratified several international covenants, namely the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), the Convention Against Torture (CAT), and the Convention on the Rights of the Child (CRC). These ratifications have been enacted into national law and, as a State Party, Indonesia is obligated to submit periodic reports to the UN Human Rights Committee.

As a State Party to the International Covenant on Civil and Political Rights (ICCPR), following its ratification through Law No. 12 of 2005, Indonesia fulfilled its obligation by submitting its *Initial Report* as well as its first periodic report in 2012. For the second periodic report, Indonesia submitted a report in the form of responses to the *List of Issues Prior to Reporting (LoIPR)*, which was published on the UN website on 27 May 2022.

Komnas Perempuan notes the emphasis made by the UN Human Rights Committee on the need for improvements in the implementation of civil and political rights, as well as economic, social, and cultural rights, based on reports from national human rights institutions and civil society organizations—including in specific situations that require particular attention, such as refugee issues. The Committee expressed regret over the lack of information regarding existing measures, both legal and practical, aimed at ensuring that refugees and asylum seekers are provided with adequate services to meet their basic needs.

The Human Rights Committee issued *Concluding Observations* for both covenants, noting the ongoing review of Presidential Regulation No. 125 of 2016 on the Handling of Refugees, and encouraging the Government of Indonesia, as a State Party, to reconsider its position regarding the ratification of the 1951 Convention Relating to the Status of Refugees and its Protocol.

The United Nations High Commissioner for Refugees (UNHCR) recorded a total of 12,097 refugees in Indonesia as of July 2023. Adults made up 73% of the total refugee population, while children accounted for 27%. Female refugees comprised 27%, and male refugees 73%. To sharpen its reporting on the fulfilment of civil and political rights by examining all layers of vulnerability and intersectionality, Komnas Perempuan intended to carry out monitoring in three refugee settlement locations.

Monitoring findings show that refugees are still not permitted to work, making them heavily dependent on service- or aid-providing organizations such as UNHCR, JRS, and IOM to meet their daily needs. While they have access to education and healthcare, these services are not yet fully optimal. Rigid bureaucracy poses significant challenges, especially in emergency situations. Some refugee women were found to experience various reproductive health issues, such as irregular menstruation, ovarian cysts, and child mortality during childbirth. The uncertainty they face triggers anxiety, fear, and profound loneliness, leading to serious mental health concerns due to prolonged depression.

Although they are given opportunities to attend courses, the certificates they receive are not sufficient to secure decent employment. This is not only due to the limitations of the certification itself, but also because the available resources in Indonesia appear unable to meet the demand for decent work—especially considering that the national unemployment rate remains relatively high.

Some refugee women experience gender-based violence, such as sexual harassment or domestic violence (DV), which cannot easily be resolved within the community—let alone through legal channels. They face numerous challenges, particularly as asylum seekers. Many refugee women reported that they are often discouraged from speaking out due to intimidation from family members or because of cultural taboos. Nearly all Afghan refugee women stated that they come from a culture where disclosing experiences of violence is considered a family disgrace. In addition, they do not fully trust that the police will handle their cases promptly. Unfortunately, the handling of gender-based violence is entirely absent from the provisions of Presidential Regulation No. 125 of 2016.

Nevertheless, a good practice in handling domestic violence against refugee women was demonstrated by the Women's Empowerment and Child Protection Technical Implementation Unit (UPTD PPA) of South Tangerang, with support from IOM, showing the role of local government in addressing such cases. This can serve as a positive step toward the prevention and handling of violence against women.

Based on these findings, Komnas Perempuan offers the following recommendations to the central government:

Ministry of Foreign Affairs (Kemenlu): Ensure that policies related to the handling of refugees are grounded in a human rights framework, incorporate a gender perspective, and refer to universal legal instruments already ratified by the Indonesian Government, such as CEDAW, CAT, and CRC.

Coordinating Ministry for Political, Legal, and Security Affairs (Kemenko Polhukam): Develop clear policies to ensure programmes and budget allocations for the establishment and functions of the Task Force on Refugees (Satgas PPLN), particularly in areas where temporary shelters for refugees are located.

Ministry of Women's Empowerment and Child Protection (Kemen PPPA): Ensure that the integrated services for handling violence against women (KtP) developed by relevant ministries/agencies also include refugee and asylum-seeking women.

For local governments, the recommendations are to:

1. Strive to ensure that integrated services for handling violence against women (KtP) at the regional level include refugee and asylum-seeking women, as demonstrated in good practices in South Tangerang and Makassar;
2. Make efforts to ensure that refugee children born in their regions can obtain birth documentation that is valid and usable for accessing essential services; and
3. Promote a harmonious environment free from stigma and discrimination toward refugees in areas where refugee accommodations are located.

To civil society organizations, Komnas Perempuan recommends coordinating and collaborating with the Government in efforts to prevent and respond to gender-based violence against refugee women.

Finally, to IOM and UNHCR, as international organizations mandated to support refugees, Komnas Perempuan recommends:

1. Establishing agreements or MOUs with the Government to mainstream refugee and gender issues within relevant ministries and agencies, for example, with human rights institutions such as Witness and Victim Protection Agency (LPSK) for protection; and
2. Providing assistance for the implementation of refugee-based service standards.

Collaboration is essential in advocating for the rights of refugee women. Therefore, **this monitoring report also recommends that service institutions:**

1. Develop SOPs or integrated service mechanisms with a victim-centred approach that considers the specific needs of refugees;
2. Ensure that services are accessible to refugee women, including survivors of sexual violence; and
3. Allocate budgets for services that address special needs.

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Chapter 1.

Introduction

1.1. Background

The National Commission on Violence Against Women (Komnas Perempuan) is a National Human Rights Institution (NHRI) with a specific mandate based on Presidential Regulation (Perpres) No. 8 of 2024, which amends Presidential Regulation No. 65 of 2005 concerning the National Commission on Violence Against Women. Presidential Regulation No. 8 of 2024 revises several provisions in Presidential Regulation No. 65 of 2005, namely Articles 4, 16, 19, and 20. In carrying out its duties, Komnas Perempuan applies the principles of coordination, integration, and synchronization—both within the institution itself and in collaboration with ministries, agencies, and other relevant stakeholders.

One of Komnas Perempuan's specific mandates is to foster a conducive environment for the elimination of all forms of violence against women and the enforcement of women's human rights in Indonesia. In fulfilling this mandate, Komnas Perempuan grounds its framework in the 1945 Constitution of the Republic of Indonesia, Law No. 7 of 1984 on the Ratification of the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), and Law No. 5 of 1998 on the Ratification of the Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT).

As a national human rights mechanism for women's rights, Komnas Perempuan plays a strategic role in influencing policy at the regional and international levels to advance the fulfilment of women's human rights, particularly through regional and international human rights mechanisms. In addition, Komnas Perempuan actively engages in various international human rights mechanisms by submitting independent reports, encouraging state and civil society organization (CSO) reports to international and regional human rights

bodies, intervening in and contributing findings and knowledge on women's human rights in strategic international and regional forums, strengthening regional and international human rights mechanisms, reinforcing regional and international networks, monitoring and promoting the implementation of recommendations from international and regional mechanisms, and providing updates on developments in women's human rights instruments at the regional and international levels to institutions, strategic networks, and the public in Indonesia.

Indonesia is a State Party to the International Covenant on Civil and Political Rights (ICCPR) following its ratification through Law No. 12 of 2005. As a State Party, Indonesia fulfilled its obligation by submitting the Initial Report as well as the first periodic report in 2012. For the second periodic report, Indonesia submitted a report in the form of responses to the List of Issues Prior to Reporting (LoIPR), which was published on the UN website on 27 May 2022.

Komnas Perempuan has also submitted an independent report in March 2024 in response to the Indonesian Government's answers to the Committee's questions regarding the fulfilment of civil and political rights in Indonesia, including those related to refugee issues. In preparing this response, Komnas Perempuan, as a human rights mechanism, conducted a consultation process with relevant parties, including civil society organizations.

In addition to being a State Party to the International Covenant on Civil and Political Rights, Indonesia is also a State Party to the International Covenant on Economic, Social and Cultural Rights (ICESCR). Komnas Perempuan submitted its independent report in February 2024.

Komnas Perempuan notes the emphasis by the UN Human Rights Committee on the need for improvements in the implementation of civil and political rights as well as economic, social, and cultural rights, based on reports from national human rights institutions and civil society organizations—including in specific situations that require particular attention, such as refugee issues. The Human Rights Committee expressed regret over the lack of information regarding existing measures, both legal and practical, aimed at ensuring that refugees and asylum seekers are provided with adequate services to meet their basic needs (Human Rights Committee, 2024).

In the Concluding Observations issued by the Human Rights Committee for both covenants, the Committee noted the ongoing review of Presidential Regulation No. 125 of 2016 on the Handling of Refugees and encouraged the Government of Indonesia, as a State Party, to reconsider its position regarding the ratification of the 1951 Convention relating to the Status of Refugees and its 1967 Protocol (Ibid).

The United Nations High Commissioner for Refugees (UNHCR) recorded a total of 12,295 refugees who had entered Indonesia as of December 2023. Of that number, 28% were women.¹ The refugee population in Indonesia is predominantly composed of refugees from

1. UNHCR, Fact Sheet, December 2023, p. 1.

Afghanistan, totaling 5,980 individuals, followed by 1,063 from Myanmar and 1,170 from Somalia.² These refugees are spread across several regions in Indonesia, including Aceh, North Sumatra, Riau, Riau Islands, Jakarta, West Java, and South Sulawesi.

From 2022 to 2024, Komnas Perempuan received complaints each year related to refugee cases. These included, among others, a case in 2022 involving the rejection of a woman asylum seeker who was a survivor of domestic violence by her husband. The survivor, who was in the late stages of pregnancy, was turned away by immigration officers at Soekarno-Hatta Airport. She was deported back to her country of origin without receiving any specialized healthcare as a pregnant woman and survivor of domestic violence. In 2023, Komnas Perempuan received a complaint regarding the arrival of Rohingya refugees in Pidie, Aceh, the majority of whom were women. That same year, Komnas Perempuan facilitated access to legal and medical assistance for a refugee who had experienced rape by another refugee in a camp in South Tangerang. Komnas Perempuan then helped establish cross-sectoral coordination with the police, legal aid providers, and the Women's Empowerment and Child Protection Technical Implementation Unit (UPTD PPPA). In 2024, Komnas Perempuan received a complaint concerning support for access to a decent standard of living for refugees.

One of the prominent issues concerning the fulfilment of civil and political rights is the finding of indications of violations against the civil and political rights of refugee women. In order to strengthen reporting on the fulfilment of these rights by examining all layers of vulnerability and intersectionality, Komnas Perempuan intended to conduct monitoring at three refugee settlement locations. In addition to meeting with refugee women, Komnas Perempuan planned to meet with other relevant stakeholders to engage in dialogue and obtain a comprehensive picture of the issues.

In relation to this activity, Komnas Perempuan conducted preliminary consultations with partners who have been working on refugee women's issues to gather input for Komnas Perempuan's monitoring instrument. This instrument was then used to directly observe the situation and conditions of refugee women, particularly in relation to the fulfilment of their rights. To provide a comprehensive overview, this study also outlines the legal framework concerning the fulfilment of refugee rights at both the national and international levels.

1.2. Objectives

1. To identify the national and international legal frameworks related to refugees and their implementation in the handling of refugees in Indonesia;
2. To map the situation and conditions of refugee women and the fulfilment of their basic rights during the waiting period in Indonesia for future resettlement;

2. *ibid.*

3. To gather facts and conduct analysis on the impact of the resettlement waiting period, both in general and specifically related to gender-based violence; and
4. To formulate policy improvement recommendations for refugee handling, especially for women, using a human rights framework and a gender perspective.

1.3. Methodology

1.3.1. Approach and Data Collection Techniques

The monitoring of refugee women's handling used a qualitative approach. Data collection techniques included documentation, focus group discussions (FGDs), interviews, and direct observation in refugee camps and refugee residences.

The documentation technique was primarily used to gather policies and complaint data related to refugees. FGDs and interviews were used to obtain information on the general situation of refugee women, policy implementation, the impact of the resettlement waiting period, fulfilment of basic rights, and the perspectives of various stakeholders on the handling of refugee women in the research areas.

In-depth interviews were also conducted to obtain information, clarification, and deeper insights regarding refugee handling in Indonesia, including with organizations such as IOM and UNHCR. Observation was used to assess the condition of living spaces, their adequacy, and the availability of basic needs such as access to clean water, among others.

This monitoring also needed to hear directly from refugee women about their experiences. Representatives from among them were invited to share the trajectories they had gone through and to illustrate them using the River of Life method—a reflective technique involving simple drawing. The River represents the flow of life. After drawing their migration journeys, the refugee women described their experiences, feelings, and all the emotions they carried through a focus group discussion (FGD).

1.3.2. Monitoring Locations and Timeline

This monitoring was conducted in three areas: Cisarua–Bogor, Ciputat–South Tangerang, and the City of Makassar. The selection of these locations was based on the diversity and unique characteristics of each area. Cisarua is known for hosting self-settled refugees. Ciputat was identified as a location where refugees receive accommodation support from the International Organization for Migration (IOM) and is geographically close to the capital, Jakarta. Makassar was chosen for its recognized good practices in handling refugee women.

The monitoring activities were carried out separately and sequentially in each location, but all followed the same methodology as outlined in Table 1 below:

Table 1. Monitoring Locations and Timeline

No.	Location	Timeline
1.	Cisarua	9-11 November 2023
2.	Ciputat	6-8 December 2023
3.	Makassar	29-31 August 2024

To gather responses from relevant stakeholders regarding refugee handling, additional consultations were conducted in November 2024 in Jakarta and through online platforms.

1.3.3. Sources of Monitoring Information

The sources of information in this monitoring activity were categorized into three groups: (a) refugee women; (b) civil society organizations and/or international human rights organizations with mandates and experience in advocating for refugee women; and (c) accompaniment institutions, whether state-managed or community-based collectives.

The involvement of these various actors served as a process of data triangulation, drawing from multiple parties with diverse authorities but a shared mandate in refugee management. The names of individual sources are written using initials, a choice made due to the sensitivity of many issues surrounding refugees. Data collection in each location was conducted over a three-day period. The number of participants involved in each process is detailed below:

Table 2. Monitoring Activities

Location	Activity	Number of Informants
Cisarua	Visit and discussion with the refugee women's community	1
	Visit and discussion with Jesuit Refugee Service (JRS)	2
	Monitoring visits to refugee homes or Learning Centre	5
	Meeting with relevant stakeholders	1
	In-depth discussion with refugee women	20

Location	Activity	Number of Informants
Ciputat	Visit and discussion at the IOM office	7
	Visit to refugee location and focus group discussion (FGD) with refugee women	18
	Interview and discussion of findings with the subdistrict head of Pisangan	2
	Discussion with the Women's Empowerment and Child Protection Unit (UPTD PPA), South Tangerang City	3
Makassar	Visit and discussion at the IOM office	10
	Visit and discussion with UPTD PPA, accompaniment institutions, and the Office for Women's Empowerment and Child Protection (DP3A)	25
	Focus group discussion with refugee women	21

1.3.4. Monitoring Stages

The involvement of various stakeholders in this monitoring effort aimed to ensure that the data and information gathered were comprehensive. The following is the timeline of the monitoring process, which was carried out in a structured and thorough manner, with the expectation that the resulting analysis will lead to well-informed and appropriate recommendations.

Figure 1. Research Stages

1	2	3	4	5	6	7
Discussion Meetings	Discussion Meetings	FGDs	Findings Analysis	Consultations	Conclusions and Recommendations	Report Finalization
IOM (International Organization for Migration)	UPTD PPA, Accompaniment Institutions, DP3A	Representatives of Refugee Women	Komnas Perempuan Team	Multiple Stakeholders	Komnas Perempuan Team	Komnas Perempuan Team

The numbering in the above scheme does not indicate the order of data and information collection. Each region has different contexts and resources, so the monitoring approach is also adapted accordingly. A discussion meeting with the International Organization for Migration (IOM) becomes the first step that needs to be taken if refugee women in the area

receive support from IOM. In addition to being equipped with human rights instruments that include refugees as subjects regulated within them, the organization has a special mandate in refugee advocacy, so the dynamics of vulnerability and the fulfilment of rights learned from the work they have carried out so far can serve as the foundation for the next monitoring steps—including best practices that they will share.

If the refugee women in the region strugglingly self-settle or do not receive support from IOM or any other international organization, then a visit with IOM can be replaced with discussions and/or visits with local organizations/institutions, or even direct discussion meetings with the refugee women's community.

Local organizations, whether operated by civil society or forming part of state institutions, also serve as important partners in this monitoring effort. The Regional Technical Implementation Unit for the Protection of Women and Children (UPTD PPA), Accompaniment Institutions, and the Office for Women's Empowerment and Child Protection (DP3A) are entities that directly walk side by side with migrant women in navigating their daily lives and striving to integrate with local residents. They also work to ensure the fulfilment of basic rights and access to justice in cases of violence, especially gender-based violence.

1.3.5. Analysis Method

The information and data collected were analysed by the team from Komnas Perempuan. The findings analysis was then consulted with parties who have relevant issue backgrounds and experience, in order to gather input. The results of these meetings served as the basis for formulating conclusions and recommendations.

The technical data analysis employed the Interactive Model by Miles and Huberman (2014), which consists of three stages:

1. Data Reduction, including editing, data grouping, summarizing, and compiling codes and notes;
2. Data Display, including organizing data and aligning written and visual data; and
3. Drawing and Verifying Conclusions, involving analysis, formulation of conclusions, and recommendations.

The findings from the monitoring of refugee women were analysed using human rights principles as outlined in Presidential Regulation (Perpres) No. 125 of 2016 concerning the Handling of Refugees. This report also examines the form of state responsibility as stated in Article 26 of Law No. 37 of 1999, which affirms that the granting of asylum to foreign nationals shall be carried out in accordance with national legislation and with due regard to international law, customs, and practices—even though Indonesia has not ratified the 1951 Convention and the 1967 Protocol.

The universal legal frameworks referenced in the analysis of these monitoring findings include international human rights-based legal instruments such as the International Covenant on Economic, Social, and Cultural Rights (ICESCR), the International Covenant on Civil and Political Rights (ICCPR), the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), and the Convention Against Torture (CAT). In the context of refugee women, CEDAW asserts that the Refugee Convention alone is insufficient as an analytical tool, as it lacks a gender perspective. Therefore, CEDAW General Recommendation No. 30 on Women in Conflict can serve as a relevant reference.

Based on the monitoring findings, namely the presence of gender-based violence, the monitoring analysis refers to several national laws that incorporate gender-sensitive approaches. These regulations include Presidential Instruction No. 9 of 2000 on Gender Mainstreaming, Law No. 39 of 1999 on Human Rights, Law No. 12 of 2022 on Sexual Violence Crimes (UU TPKS), and Law No. 23 of 2004 on the Elimination of Domestic Violence (UU PKDRT). Other aspects related to the fulfilment of basic rights are analysed using Law No. 17 of 2023 on Health and Law No. 20 of 2003 on the Provision of Education.

1.3.6. Monitoring Limitations

As previously mentioned, this monitoring effort focuses solely on refugees who hold refugee and/or asylum seeker status, whether self-settled or residing in accommodations in three regions: Cisarua, Ciputat, and Makassar. Therefore, the findings from this monitoring cannot be generalized to the overall situation and conditions of refugees in Indonesia.

1.4. Principles and Approaches

This documentation adopts the following principles and approaches:

1. Prioritizing the interests of victims
2. The primary sources in this monitoring are refugee women, and the monitoring process places their narratives and experiences as the primary data.

1.4.1. Applying a Human Rights and Gender Perspective

This monitoring is conducted within a human rights framework. The standards used to assess the fulfilment and protection of refugee women's rights include their reproductive and maternity rights. An examination of the specific vulnerabilities experienced by refugee women is also carried out to uncover the layered issues they face—the relational gaps

between women and men within families and society at the social, economic, legal, and cultural levels, which impact the fulfilment and protection of refugee women's rights.

1.4.2. Ensuring the Credibility, Confidentiality, Accuracy, and Objectivity of Data

This monitoring applies the principles of victim and witness protection, including safeguarding the identity of victims. All stories and experiences presented in this monitoring were obtained with the informed consent and permission of the sources. The information from both primary and supporting sources in this monitoring is analysed and processed accurately and objectively.

1.4.3. Collaboration with Multiple Stakeholders

This monitoring was not conducted solely by Komnas Perempuan, but involved various stakeholders including accompaniment personnel, civil society organizations (CSOs), family members, government institutions, and relevant law enforcement agencies at both regional and national levels.

1.4.4. Impartiality or Non-Partisanship Toward Any Group or Particular Interest

This monitoring does not conceal any findings in order to protect the interests of any party or institution. The facts uncovered are based on the actual situations faced by refugee women, as they are the primary sources of testimony—grounded in a victim-centred perspective.

Chapter 2.

Legal Framework

Refugees are regulated by UNHCR through the 1951 Convention and the 1967 Protocol. However, Indonesia has not ratified these international legal instruments, and therefore does not yet have a national legal framework for fulfilling the basic rights of refugees in accordance with the standards. One of the challenges Indonesia faces in implementing them is providing adequate livelihoods and employment opportunities for refugees amid high unemployment rates in the country. Nevertheless, Indonesia permits UNHCR to carry out its refugee protection mandate to address refugee-related issues within its territory.

The following are international legal frameworks and national policies that can serve as the basis for monitoring refugees:

2.1. National Policies

1. 1945 Constitution of the Republic of Indonesia

“Everyone has the right to be free from torture or treatment that degrades human dignity, and the right to seek political asylum from another country.” —Article 28G paragraph (2)

2. Law No. 37 of 1999 on Foreign Relations

“The granting of asylum to foreigners shall be carried out in accordance with national legislation and with due regard to international law, customs, and practices.” —Article 26

3. Law No. 39 of 1999 on Human Rights

“Everyone has the right to seek asylum to obtain political protection from another country.” —Article 28 paragraph (1)

4. Law No. 11 of 2005 on the Ratification of the International Covenant on Economic, Social and Cultural Rights

5. Law No. 12 of 2005 on the Ratification of the International Covenant on Civil and Political Rights

6. Law No. 12 of 2022 on Sexual Violence Crimes

7. Law No. 23 of 2004 on the Elimination of Domestic Violence

8. Presidential Regulation No. 125 of 2016 on the Handling of Refugees

9. Regulation of the Director General of Immigration No. IMI-0352.GR.02.07 of 2016 on the Handling of Illegal Immigrants Declaring Themselves as Asylum Seekers or Refugees

10. Circular Letter of the Director General of Immigration No. IMI-UM.01.01-2827 of 2018

11. Circular Letter of the Ministry of Manpower No. 2/1730/LP.03.02/IX/2023

12. Circular Letter of the Ministry of Education and Culture No. 30546/A.A5/HK.01.00/2022 on access to education for refugees, focusing on early childhood to secondary school levels. It is limited to regional heads listed in the annex. Its implementation faces administrative constraints in issuing diplomas. There is no mention of dedicated budget allocation for refugee education.

13. Circular Letters of the Ministry of Home Affairs No. 300/2307/SJ and No. 300/2308/SJ on the Formation of Task Forces for Handling Refugees

14. Circular Letter dated 10 June 2020 on access to COVID-19-related services for registered refugees

15. Regulation of the National Search and Rescue Agency No. 9 of 2018 on the Handling of Refugees Found in Emergency Situations in Indonesian Waters

2.2. International Treaties and Conventions, Recommendations from International Human Rights Mechanisms, and Principles of International Law

2.2.1. International Treaties and Conventions

1. Universal Declaration of Human Rights (UDHR)

The UDHR has been recognized as a foundational principle accepted by all countries that declare themselves members of the United Nations, including Indonesia. Article 1 of the UDHR emphasizes equality for all individuals, including the right to dignity

and equal rights. Articles 13 and 14 state that “everyone has the right to leave any country, including their own, and to seek asylum in another country to escape persecution.” In principle, the articles of the UDHR affirm that every person has equal standing before the law and is entitled to the fulfilment of human rights.

2. International Covenant on Economic, Social and Cultural Rights (ICESCR)

Indonesia has ratified this Covenant through Law No. 11 of 2005. Regarding the situation of refugees, the relevant articles in the ICESCR include:

- Article 6 paragraph (1), which recognizes the right to work, including the right of every person to have the opportunity to earn a living through work that they freely choose or accept;
- Article 11, which recognizes the right to an adequate standard of living; and
- Article 12, which recognizes the right of every person to enjoy the highest attainable standard of physical and mental health.

In the context of refugees, the basic services regulated by this Covenant relate to the fulfilment of the right to health—including reproductive and mental health—as well as the rights to education and employment.

3. International Covenant on Civil and Political Rights (ICCPR)

Indonesia ratified this Covenant through Law No. 12 of 2005. The ICCPR establishes a number of rights relevant to this monitoring, including:

- The right to life, stating that no one shall be arbitrarily deprived of their life (Article 6);
- Freedom from torture, or other cruel, inhuman, or degrading treatment or punishment (Article 7);
- Freedom from slavery (Article 8); and
- Freedom from arbitrary arrest and detention (Article 10).

4. Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)

Indonesia ratified this Convention through Law No. 7 of 1984. CEDAW mandates that State Parties take appropriate measures, including enacting legislation across all sectors—particularly in the political, social, economic, and cultural spheres—to ensure the full development and advancement of women. The aim is to guarantee that women exercise and enjoy their human rights and fundamental freedoms on an equal basis with men (Article 3).

5. Convention against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT)

This Convention was ratified by Indonesia through Law No. 5 of 1998. The articles relevant to this monitoring include:

- Article 1 paragraph (1): The term “torture” means any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person for such purposes as obtaining from that person or a third party information or a confession, punishing them for an act they or a third party have committed or are suspected of having committed, or intimidating or coercing them or a third party, or for any reason based on discrimination of any kind—when such pain or suffering is inflicted by, at the instigation of, or with the consent or acquiescence of a public official or other person acting in an official capacity. It does not include pain or suffering arising only from, inherent in, or incidental to lawful sanctions.
- Article 2 paragraph (1): Each State Party shall take effective legislative, administrative, judicial or other measures to prevent acts of torture in any territory under its jurisdiction.
- Article 3 paragraph (1): No State Party shall expel, return (*refouler*), or extradite a person to another State where there are substantial grounds for believing that they would be in danger of being subjected to torture.

6. Convention on the Rights of the Child (CRC)

The Convention was adopted by Indonesia through Presidential Decree No. 36 of 1990. Article 22 of the Convention affirms that a child seeking refugee status, whether accompanied or unaccompanied by their parents, is entitled to receive appropriate protection and humanitarian assistance.

7. International Convention on the Elimination of All Forms of Racial Discrimination (CERD)

Indonesia ratified the ICERD through Law No. 29 of 1999, which came into effect on 25 May that year. This Convention upholds the principle of Equal Treatment, requiring States to prohibit and eliminate racial discrimination and to guarantee the right of every person to receive equal treatment before the law, without distinction based on national origin or ethnicity.

8. 1951 Convention Relating to the Status of Refugees and the 1967 Protocol

The 1951 Convention is a legal instrument that sets international standards concerning refugees. It was developed in response to the refugee situations that emerged after World War II. The Convention has been ratified by 145 State Parties and defines the term “refugee”, outlines the rights of refugees, and sets out the legal obligations of States and nations for refugee protection.

Indonesia has not ratified this Convention. However, the 1951 Convention regulates principles of international law that have become universal norms, or *jus cogens*, namely the principle of non-refoulement and the principle of non-discrimination.

Under the principle of non-refoulement, States that are parties to the Convention must not return or place refugees in situations that threaten their safety and freedom. This principle is also enshrined in the Convention Against Torture, which binds Indonesia to comply with it.

9. Global Compact on Refugees (GCR)

The GCR is a global agreement aimed at strengthening the international response to the needs of refugees. It serves as a framework for more equitable burden-sharing by ensuring that countries have inclusive national programmes and policies for refugees. Countries implement the GCR through various means, including by declaring action commitments at the Global Refugee Forum, which is held regularly.

2.2.2. Recommendations from International Human Rights Mechanisms

1. Convention on the Rights of Persons with Disabilities (CRPD)

The CRPD Committee's Concluding Observations in 2022 were issued in response to Indonesia's first periodic report on its compliance with the Convention on the Rights of Persons with Disabilities. In these observations, the Committee expressed concern over the narrow interpretation of Law No. 8 of 2016, which excludes its application to refugees, asylum seekers, and stateless persons, and noted their severely limited access to education, healthcare, and various other social services.

In the same Concluding Observations, the CRPD Committee recommended that Indonesia explicitly recognize the applicability of Law No. 8 of 2016 to asylum seekers, refugees, and stateless persons, and ensure their access to education, the healthcare system, and other social services—including guaranteeing that such access is available to those with disabilities.

2. Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)

The CEDAW Committee's Concluding Observations in 2021 responded to Indonesia's eighth periodic report, submitted in 2020, regarding its compliance with the Convention on the Elimination of All Forms of Discrimination Against Women.

In these observations, the Committee raised concerns about the situation of refugee and asylum-seeking women, noting that they lack access to basic services—including access to employment—which places them at heightened risk of exploitation.

In response to this situation, the CEDAW Committee recommended that Indonesia amend its national regulations to guarantee the economic and social rights of

refugees and asylum seekers, as groups in need of international protection—including the right to work.

3. Convention Against Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment (CAT)

In 2008, the CAT Committee responded to Indonesia's second periodic report regarding its compliance with the Convention Against Torture. The issue of protection for refugees was raised in the broader context of the consequences of armed conflict, which resulted in the presence of refugees and internally displaced persons (IDPs).

The Committee expressed particular concern about refugee children living in camps, separated from their families, and frequently subjected to ill-treatment.

To address this situation, the Committee recommended that Indonesia take effective measures to prevent violence against refugees and IDPs—especially children, who should have their births registered and be protected from involvement in armed conflict.

Another recommendation was for Indonesia to take steps to ensure safe repatriation and relocation processes, in cooperation with the United Nations.

4. Convention on the Elimination of All Forms of Racial Discrimination (CERD)

The CERD Committee's Concluding Observations issued in 2007 addressed Indonesia's Initial and Third Periodic Reports, which were submitted as a single document. The Committee noted positive aspects of Indonesia's commitment to sign the 1951 Refugee Convention and its 1967 Protocol.

5. Universal Periodic Review (UPR)

Through the UPR mechanism, the issues of refugees, asylum seekers, and stateless persons have been among the concerns raised during the review of Indonesia. In the third cycle (2017) and fourth cycle (2022) of the UPR, Indonesia received recommendations related to these issues.

The recommendations included calls for Indonesia to raise awareness among host communities about the rights of refugees and asylum seekers, and to ratify international treaties related to refugee, asylum seekers, and stateless persons protection—namely:

- The 1951 Convention relating to the Status of Refugees and its 1967 Protocol,
- The 1954 Convention relating to the Status of Stateless Persons, and
- The 1961 Convention on the Reduction of Statelessness.

Third Cycle – 2017

- 139.147: Promote initiatives to raise awareness among host communities on the rights of refugees, asylum seekers and unaccompanied children (Colombia)

- 141.55: Consider ratifying the 1951 Convention relating to the Status of Refugees and its 1967 Protocol (Ireland)

Fourth Cycle – 2022

- 140.25: Accede to the 1954 Convention relating to the Status of Stateless Persons and the 1961 Convention on the Reduction of Statelessness, and take all necessary measures to implement them (Luxembourg)
- 140.26: Consider ratifying and acceding to human rights-related agreements such as the 1951 Convention relating to the Status of Refugees and its 1967 Protocol (Sudan)

6. Global Compact on Refugees

Indonesia has made several pledges under the Global Compact on Refugees. These commitments include:

1. Providing access to basic and advanced education for refugee children,
2. Establishing a refugee task force,
3. Conducting data sharing with UNHCR,
4. Empowering refugees through cooperation with UNHCR and IOM,
5. Strengthening international cooperation through dialogue with countries of origin, transit, and destination, and
6. Implementing population registration and utilizing digital platforms for refugee registration and documentation.

2.2.3. Principles of International Law

1. **Principle of Universality:** This principle affirms that all individuals around the world possess the same rights, without exception.
2. **Principle of Non-Discrimination:** A foundational norm that guarantees equal rights, status, and treatment for every person, without distinction based on factors such as race, religion, gender, class, ethnicity, or others. This principle is an integral part of the broader concept of equality.
3. **Principle of Non-Penalization:** This principle prohibits punishing refugees or asylum seekers for lacking documentation in the country of asylum.
4. **Principle of Non-Refoulement:** This principle forbids returning refugees or asylum seekers to their country of origin where their life or freedom may be threatened.
5. **Principle of Territoriality:** This principle allows national law to be applied to both citizens and foreign nationals within a country's territory.

Chapter 3.

Findings from the Monitoring of Rights Fulfilment for Refugee Women

This chapter presents findings on the situation and conditions of refugee women who are awaiting resettlement. During this waiting period, refugees struggle to access their fundamental human rights. Some receive assistance from international organizations such as IOM and UNHCR, while others must rely on their own efforts or support from civil society and faith-based organizations.

The findings outlined reveal recurring patterns that indicate the incomplete fulfilment of basic human rights. In addition, this chapter reports on progress made by the Indonesian Government in addressing refugee issues.

The analysis in this chapter is based on a relevant legal and human rights framework, including international human rights instruments such as the Convention Against Torture (CAT), the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), and the International Covenant on Civil and Political Rights (ICCPR), as well as the 1945 Constitution of the Republic of Indonesia (UUD NRI 1945) and other national policies, as outlined in Chapter II of this report.

3.1. General Overview of Refugees in Indonesia

According to the United Nations High Commissioner for Refugees (UNHCR), the number of refugees in Indonesia was 12,097 individuals as of July 2023. Of this total, 73% are adults and 27% are children. The proportion of female refugees is 27%, while male refugees account

for 73%. These refugees originate from approximately 50 countries, with more than half coming from Afghanistan.³

UNHCR provides monthly cash assistance to the most vulnerable refugee groups, totaling 1,281 recipients. This group primarily includes unaccompanied children, single mothers, and individuals with special needs.⁴

According to Yudhistira Indarto (Directorate of Human Rights and Humanitarian Affairs, Ministry of Foreign Affairs), there are various factors contributing to the increase in the number of refugees arriving in Indonesia, one of which is that they have already been rejected by other countries. Many refugees also arrived after previously staying in other countries before entering Indonesia, a phenomenon referred to as secondary movement.

Based on information from the UNHCR website, the distribution of refugees in Indonesia includes Medan, Pekanbaru, Tanjung Pinang, Jabodetabek (Greater Jakarta), Semarang, Surabaya, Bali, Makassar, and Kupang.

According to data from IOM as of 4 December 2023,⁵ the number of refugees and asylum seekers receiving assistance and services from IOM was 1,474 individuals. Of this total:

- 969 individuals (66%) were men
- 505 individuals (34%) were women
- 981 individuals (67%) were adults
- 493 individuals (33%) were children
- 1,462 individuals (99%) were refugees
- 12 individuals (1%) were asylum seekers

Since 2018, IOM has ceased providing assistance and services to refugees and asylum seekers who arrived after that year. However, if a refugee's family gains a new member (such as the birth of a child), that family member is still included in IOM's assistance programme.⁶

Refugees entering Indonesia face various forms of stigma, including Rohingya refugees. According to UNHCR,⁷ since 14 November 2023, a total of 15 boats carrying approximately 2,026 Rohingya individuals arrived in Indonesia via Aceh. Of this number, 73% were women and children. The waves of arrival occurred gradually from 14 November 2023, 14 December 2023, through to March 2024.

3. Indonesia Fact Sheet July 2023 accessed at <https://www.unhcr.org/id/en/fact-sheets>

4. Ibid.

5. Data provided by IOM during communications for the preparation of refugee monitoring at IOM accommodation in South Tangerang, December 2023.

6. This information was obtained from the IOM website and reinforced during discussions with IOM in early December 2023.

7. <https://www.unhcr.org/id/wp-content/uploads/sites/42/2024/05/External-Update-Rohingya-Boat-Arrivals-27-May-2024.pdf>

The November arrival of Rohingya refugees was marked by rejection from local communities in Aceh. At that time, the National Commission on Violence Against Women (Komnas Perempuan) formed a response team to address the crisis situation. To this day, Komnas Perempuan receives annual reports of cases involving refugees.

As outlined in Chapter I, this monitoring took place in three locations: Cisarua, Ciputat, and Makassar. Each location has distinct characteristics and socio-cultural dynamics that influence how refugees survive and adapt to local communities and regional laws.

Based on local context, this monitoring categorizes refugee living conditions into two types:

1. Locations where refugees live independently (self-settled, without support from UNHCR and IOM); and
2. Locations where refugees receive support from and are monitored by the International Organization for Migration (IOM).

3.1.1. Situation and Conditions of Self-Settled Refugees

Refugees currently residing in Cisarua represent individuals who struggle to fulfil their rights on their own. In this urban settlement area, they live side by side with local communities and rent housing as their place of residence. Monthly rental costs vary depending on the condition and facilities of the housing.

The distance between their homes and hospitals is far—approximately one hour by public transportation. Basic health services such as Community Health Centres (Puskesmas) are more accessible, as each subdistrict typically has at least one Puskesmas unit. Similarly, private clinics are relatively numerous, but rarely accessed by refugees due to their higher costs compared to Puskesmas.

A total of 17 individuals participated as sources in this section, consisting of 15 women and 2 men.

3.1.2. Situation and Conditions of Refugees Accommodated by IOM and UNHCR

The refugees monitored in Ciputat numbered 18 individuals, while in Makassar, there were 21 participants, although only 19 took part in the full monitoring process. Both areas receive support from UNHCR and IOM.

Komnas Perempuan conducted refugee monitoring at two locations in Pisangan and Cirende, South Tangerang. There are three accommodation facilities resembling dormitory-style boarding houses managed by IOM Indonesia, namely: (a) Accommodation House 1; (b) Accommodation House 2; and (c) Accommodation House 3.

These facilities are rented houses located within residential neighbourhoods. Each accommodation houses a varying number of refugee families. Each room is occupied by one refugee family with one to two children, although some families have three children, resulting in households consisting of three to five persons along with both parents.

For families with a child aged 12, an additional bedroom is arranged. Families with two older children receive two extra rooms. Each room is equipped with one air conditioner; if an additional unit is requested, the cost is borne by the family.

Each family receives cash assistance from IOM amounting to IDR 1,250,000 per spouse, and IDR 500,000 per family member or child. Thus, a family with three to four members receives IDR 3,500,000. This amount is intended only for consumption needs, while electricity, water, and gas stove expenses are covered by UNHCR.

In the event of accommodation damage, such as a broken toilet, the responsibility lies with the property owner.

- Accommodation House 1 consists of 27 rooms, occupied by 106 refugees, including adults, children, and adolescents from 24 households. One household is headed by a single father.
- Accommodation House 2 consists of 12 rooms, housing 61 family members from 12 households.
- Accommodation House 3 consists of 28 rooms, accommodating 106 refugees from 26 households, including five single mothers and one single father.

Each accommodation site provides a communal kitchen on every floor, equipped with gas stoves. Some stoves are specially designed to resemble those commonly used in Afghanistan, including bread ovens. Each family cooks independently on a rotating schedule. Occasionally, disputes arise due to overlapping cooking times and competition for kitchen space.

The refugees in the three accommodation sites are:

1. Registered refugees;
2. Under the care and protection of UNHCR through IOM Indonesia, with the knowledge of the Ministry of Foreign Affairs of the Republic of Indonesia; and
3. Receiving monthly financial assistance and other urgent support from UNHCR through IOM Indonesia.

All three are three-story houses rented by the room, with rooms measuring approximately 4 x 6 metres. The refugees come from Afghanistan, Sri Lanka, Sudan, Somalia, Yemen, Iraq, and Ethiopia, as well as Palestine and Pakistan.

Most of these refugees have been in Indonesia for 6 to 8 years, with some reaching 11 years, having moved between various shelter locations such as Batam (Riau Islands), Medan, Pekanbaru, Cilacap, Semarang, and Makassar.

Their prolonged stay is due to the lengthy resettlement process to destination countries such as the United States, Canada, and Australia, which is influenced by the political policies of those governments.

3.1.3. Situation of Refugee Women

Table 3. Demography of Refugee Women

Monitoring Location	Age	Country of Origin	Reason for Asylum Seeking
Cisarua	16-54	Afghanistan	War
Ciputat	14-52	Afghanistan, Palestine, Pakistan, Iraq, Somalia, Sudan, Ethiopia, Sri Lanka	War, Conflict, Living Quality
Makassar	12-52	Afghanistan, Pakistan, Somalia, Sri Lanka, Myanmar	War, Conflict, Living Quality

Findings from the focus group discussion with refugees in Cisarua revealed that nearly all participants were women refugees from Afghanistan, and they shared a common reason for fleeing: Afghanistan is a war-torn country that generates a sense of insecurity and uncertainty in life—economically, socially, culturally, and politically. At the same time, the majority had experienced gender-based violence in the context of armed conflict.

Their route out of Afghanistan to Indonesia was through third countries such as Iran, India, Malaysia, or others. This was the experience of several women refugees with the initials Sd, 16, Na, 46, and Hb, 42. However, some traveled directly to Indonesia.

The reasons for choosing Indonesia included the fact that Indonesia is predominantly Muslim, which made them feel it would be easier to adapt, and secondly, Indonesia was perceived as providing faster access to asylum for refugees.

Most of them hope to seek asylum in the United States or other developed countries.

Their length of stay in Indonesia varies, with most having lived here for more than five years. The longest recorded stay is 12 years. During their time in Indonesia, they have faced severe life challenges, including difficulty finding employment, which leads to poverty, limited access to education, restricted health services for serious illnesses or elderly family members, and even experiences of sexual harassment.

For refugee children, accessing higher levels of education is also difficult, as they do not receive graduation certificates, but only letters confirming completion of studies.

The refugees who participated in the discussion with Komnas Perempuan in Makassar came from various countries, including Somalia (6 participants), Sri Lanka (4), Afghanistan (7), Myanmar (3), and Pakistan (1).

Their arrival in Indonesia was primarily driven by conflict in their countries of origin, which created a sense of insecurity and instability. As a result, they sought a safer and better life through displacement.

Each refugee had a different route to Indonesia. Some transited through other countries such as India or Malaysia, while others traveled directly to Indonesia. A refugee from Somalia, AMB, 28, flew to Malaysia, then continued the journey to Medan by boat, and relocated to Makassar in 2019. A refugee from Myanmar, M, 19, traveled to Malaysia by boat and then proceeded to Indonesia.

During Komnas Perempuan's meeting with stakeholders regarding refugee issues in Makassar, four Rohingya refugees were identified, consisting of a mother, two sons, and one daughter. They had recently arrived in Makassar. Their main intention was to travel to Malaysia from their temporary shelter in Aceh. According to one discussion participant named Haidar, the refugees had used the services of an agent to reach Malaysia. However, the boat they boarded did not take them to Malaysia, but instead stopped in Makassar. The four refugees arrived in Makassar on 27 August 2024, and are currently staying in a safe house. One common issue encountered in safe houses is that the food is unfamiliar to the refugees' taste, and there are also conflicts among refugees.

Meanwhile, the refugees in Ciputat arrived in Indonesia between 2013 and 2017. They took various routes to reach Indonesia—some flew directly, while others traveled by boat and transited through countries such as Malaysia or others. One example is Q, a refugee from Pakistan, who flew to Malaysia from his home country and then continued to Indonesia by boat. There were four refugees from Afghanistan who flew directly to Indonesia from Afghanistan.

These refugees did not settle in Ciputat immediately; they had moved between several cities in Indonesia, including Pekanbaru, Medan, Batam, Semarang, Makassar, Bogor, Cilacap, and Jakarta.

Refugees generally traveled to Indonesia with their families and relatives. Some arrived to reunite with spouses or children who had reached Indonesia earlier.

Although their countries of origin were affected by war and conflict, several refugees recalled their childhood as a joyful time—playing with friends and family, and still being able to attend school. However, they lost all of that when forced to migrate due to unsafe conditions in their home countries.

During their long journey by boat to Indonesia, they faced dangerous situations, including fear of drowning and going hungry for entire days.

3.2. Implementation of Special Policies for Refugee Women

Refugees—including women—have equal rights to be accepted in asylum countries. International law obliges all states to receive refugees, but also allows them to return refugees to their country of origin once conditions are stable or deemed safe for return. As part of efforts to fulfil refugees' right to shelter, Indonesia has taken steps to provide accommodation. Although Indonesia has not ratified the 1951 Refugee Convention, it has made efforts to establish a national legal framework for managing refugees, tailored to the country's available resources.

Adjustments through national policy instruments are intended to ensure that efforts to receive and fulfil refugees' rights continue without neglecting the state's responsibility to uphold the rights of its own citizens.

It is important to note that Indonesia has not ratified the 1951 Refugee Convention due to certain articles in the Constitution that are considered highly contradictory to ratification—particularly regarding the right to employment for a decent living, while domestic unemployment remains high.

Moreover, efforts to fulfil refugees' basic rights have not been fully implemented. For example, refugees may be given access to education but do not receive certificates, and they may be trained to produce goods that could generate capital, yet are not permitted to open bank accounts or access other financial services.

The implementation of refugee-related policies aimed at fulfilling basic rights in Indonesia still requires further reinforcement. To date, many refugees have relied on civil society groups—including foundations, collectives, faith-based communities, and international organizations mandated to stand with refugees—to meet their basic living needs.

Women refugees face particular hardships, not only due to physical vulnerability, but also because of patriarchal cultural norms, which are a major contributing factor. Challenges include:

- Nutritional needs for pregnant refugee women;
- Access to healthcare, especially for gender-specific conditions; and
- Support for refugee women living with HIV.

These difficulties are often addressed independently by the refugees themselves, or with assistance from civil society organizations.

3.3. Experiences of Women as Refugees

3.3.1. Background of Violence Experienced in Country of Origin

Women who have sought refuge in Indonesia often carry with them experiences of violence from their countries of origin. This was shared during a River of Life session by a refugee from Myanmar, who wrote about the hardships she faced during adolescence—being abandoned by her family, subjected to violence, and experiencing sexual harassment. During a focus group discussion, the Myanmar group explained that in their culture, when a girl is born, she is no longer considered part of the family. Girls are strictly regulated, including restrictions on clothing and prohibitions against wearing makeup. Women are denied the right to choose their own life path, as many in Myanmar believe that a woman's place is in the kitchen, and that education is not important for girls.

Moreover, violence against women is commonly normalized within society, often perpetrated by fathers or brothers. Families tend to give better things to sons, while daughters receive less or inferior treatment. This dynamic leads boys to believe that mistreating women is acceptable, and such attitudes are passed down through generations. A well-known saying in the community reflects this mindset: "Violence is the answer, not communication." In cases of conflict between husband and wife, hitting is seen as the solution to resolve problems.

“For example, if there is a problem between husband and wife, instead of communicating the issue, the husband will beat or say bad words. The wife should remain silent. This is what defines a good wife among the Rohingya.”
(Focus Group Discussion, 31 August 2024)

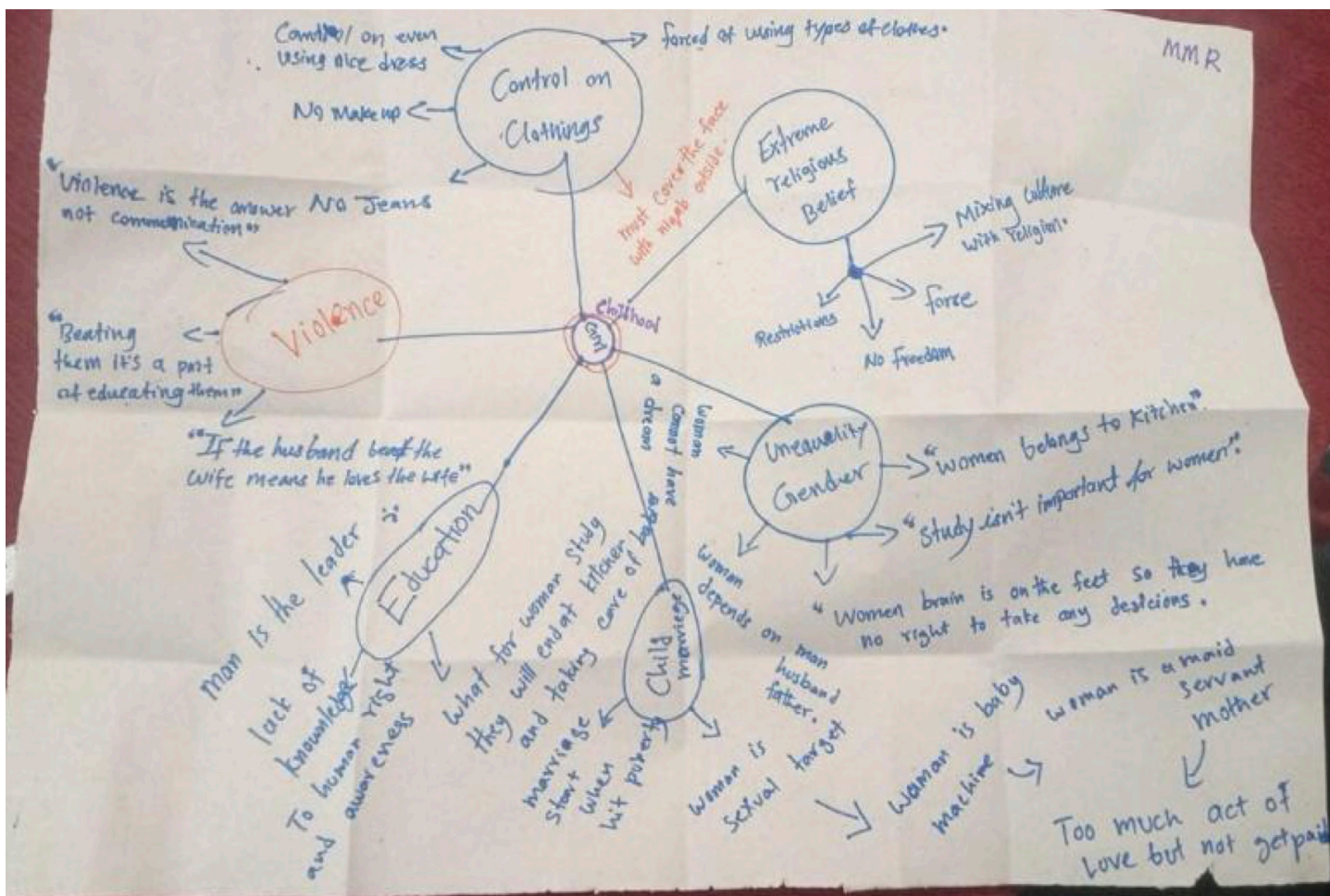
Similar experiences were also shared by women from Somalia. In their community, it is believed that a woman belongs to her husband, and therefore does not need to pursue education or a career, as these are considered a waste of time. In fact, most women are not even known by their own names. At social gatherings or celebrations, women are neither invited nor presented—they remain in the background, as showing them is considered a disgrace to the family.

Once married, women are expected to carry out all domestic duties, even when they are ill. Husbands do not participate in household chores and do not enter the kitchen. Due to poor living conditions and ongoing conflict, one Somali woman sought asylum in Yemen, then Australia, and eventually ended up in Indonesia.

Seeking asylum due to unsafe conditions in their home country was also expressed by women refugees from Afghanistan. This was shared during a focus group discussion on

31 August 2024, which addressed the situation of women. Participants noted that parents were more grateful when giving birth to sons than to daughters. In past generations of Afghan society, if a family had a baby girl, she was immediately buried, reflecting a complete disregard for women's worth. Furthermore, if a mother gave birth to two or three daughters, the husband would marry another woman in hopes of having a son. Girls were considered to have no value or dignity within Afghan households.

Figure 2. Notes from the Focus Group Discussion



Girls are raised to prepare themselves to become wives for their future husbands. They are expected to stay at home, learn how to cook, lower their voices, behave and communicate in a certain way, and are taught to focus entirely on their future husbands. In Afghanistan, girls are only allowed to attend school up to grade six, and under Taliban control, they are prohibited from pursuing higher education. Many women have expressed that they wish they had been born as boys, because being a girl is extremely difficult.

“After sixth grade, you are not allowed to go to school or receive any further education under Taliban control. What’s truly painful is that most women wish they had been born male. It is extremely difficult to be a woman, because we face so many challenges simply due to our gender.”
(Focus Group Discussion, 31 August 2024)

Following the war, persecution, and violence in Afghanistan, they decided to come to Indonesia. Their hope was to build a better life and a brighter future in a third country, placing their trust in UNHCR to facilitate the process. However, upon arriving in Indonesia, the entire process moved slowly. Many have remained in the country for around ten years, enduring physical and emotional trauma, without being able to take meaningful action or move forward.

3.3.2. Experiences in Fulfilling Reproductive Rights

While living in Indonesia, refugee women have experienced both joyful and painful moments in relation to their reproductive rights. One example is a woman from Somalia, who divorced her husband in 2016, later remarried in Indonesia in 2022, and gave birth to her second child in 2023. She now hopes to be resettled in Canada in 2024.

A 23-year-old woman from Afghanistan shared that she married at the age of 18, and described it as a joyful moment. The birth of her son became the most cherished memory of her life. Although she later faced difficult times, she felt grateful for the opportunity to provide a good life for her child.

The joy of childbirth in Indonesia was also felt when relatives gave birth, as expressed by MY, 20, who felt happy when her sister married and gave birth at Bhayangkara Hospital in Makassar.

However, beyond joyful memories, many women have also endured painful and distressing experiences while living as refugees in Indonesia. During a River of Life session with refugees in Ciputat, a Palestinian woman named A, 49, shared that she had experienced domestic violence from her husband, which ultimately led to divorce. Her husband has since disappeared and remains unaccounted for. She expressed deep concern about her child’s future, as she has been unable to find employment and has not received any updates regarding resettlement.

A 31-year-old Afghan refugee woman named FH shared her story of being homeless upon arriving in Jakarta, while three months pregnant. Another Afghan refugee, SA, experienced an even more devastating situation—she lost her unborn child after being forced to live on the streets upon arriving in Indonesia in 2017. A cesarean operation had to be performed

because the baby had died in the womb. Since then, SA has felt exhausted and emotionally distressed by her experience as a refugee in Indonesia.

A woman refugee from Ethiopia also experienced homelessness. In 2017, she arrived in Indonesia and was forced to live on the street, specifically in front of the UNHCR office, for two months. During this time, she suffered bleeding and a miscarriage in her fourth month of pregnancy. After the miscarriage, she moved between various locations—including Kalideres, IOM accommodation in Jakarta, and eventually settled in Ciputat.

3.3.3. Experiences of Refugee Women During Resettlement Waiting Period

The impact of this difficult life has led some women to experience depression, difficulty interacting with local residents, prolonged physical illness, absence of joy, despair and loss of hope, anger, fear, anxiety, and at times, even thoughts of ending their lives.

The following is an expression written by WS, 24, during a focus group discussion with Komnas Perempuan:

“When I was living in Afghanistan, we were happy with what we had. Life was hard—there was insanity, only poverty and violence. We suffered from human rights violations. If I speak honestly, we are going through a very bad situation—illness, and an uncertain future. We’ve been stuck here for eight years like prisoners. I just try to think positively about the future and hope for a bright life.”

Another refugee, Hb, shared that her son had already been living in Indonesia for 11 years, and had also experienced hardship and poverty. Hb herself has faced health problems while waiting for the resettlement process. Initially, Hb felt hopeful about temporarily relocating to Indonesia. However, as time went on, she began to feel despair over her situation.

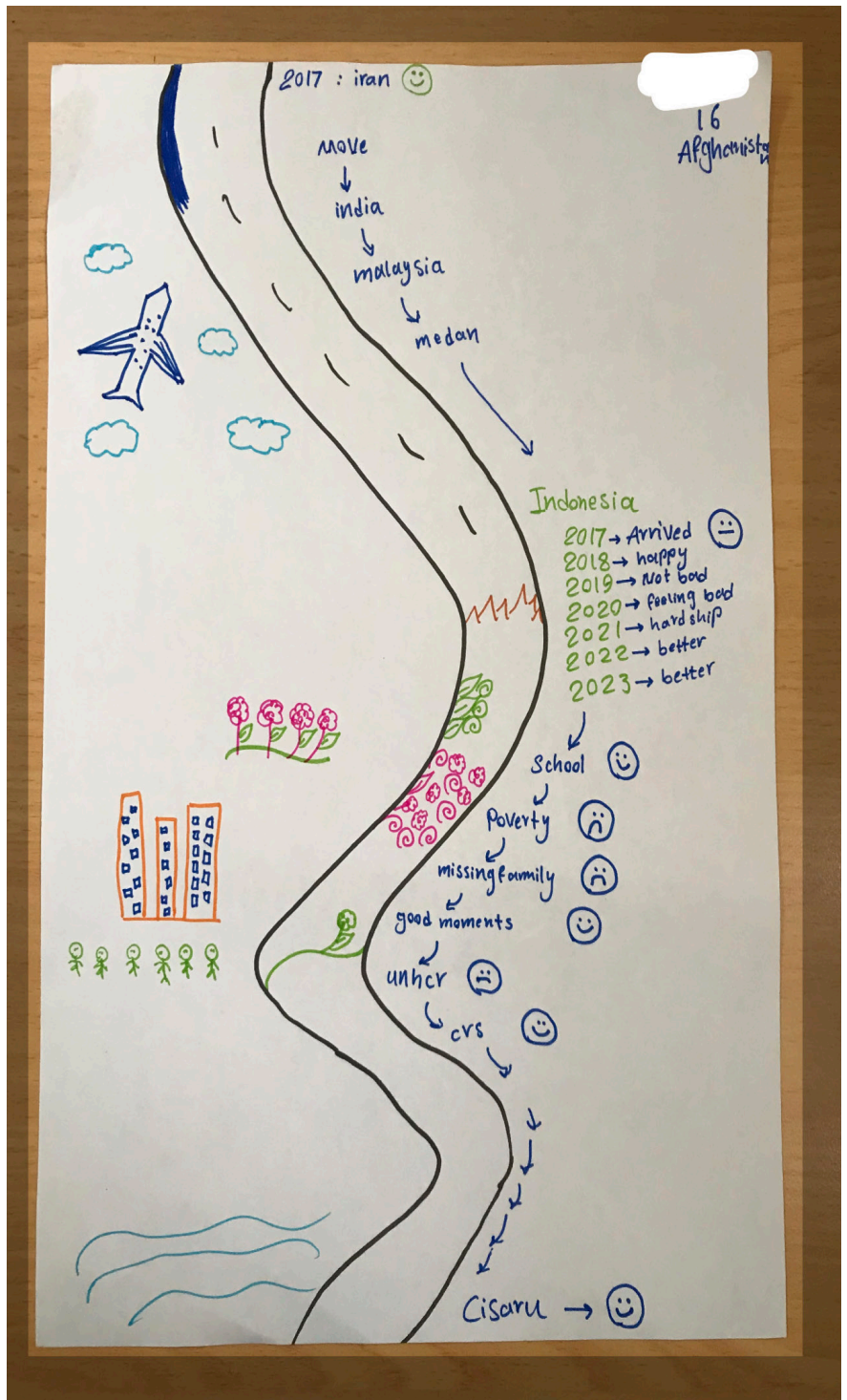
Meanwhile, Na, who has lived in Indonesia for approximately eight years, continues to experience anger, sadness, anxiety, and fear about her future. Lt, 24, also shares the same feelings as Na and other refugees—including depression, exhaustion, sadness, anger, and hopelessness.

In Makassar, most refugees arrived in Indonesia between 2013 and 2014, with one individual arriving in 2016. During their time in Indonesia, they have faced various challenges that have led to depression and fear about the future. These feelings stem from limited access to their rights, such as education and employment. This was expressed by a 12-year-old refugee from Sri Lanka, who shared that she cannot attend school, even though she loves learning. Her dreams have been obstructed, as she is unable to do anything to pursue them.

Living as a refugee for nearly ten years while waiting for resettlement in a third country is far from easy. Many women have been denied access to basic human rights such as education and employment. This has severely affected their mental and physical health. The future remains uncertain for refugees. On top of that, they often face humiliation from local communities, who label them as “illegal people.”

Figure 3. Drawing of the life’s timeline by one of the refugee

“When I arrived in Indonesia, local people called me illegal. It’s painful—even though we are refugees. Being called illegal is an insult. We left our country because of persecution, violence, and war, and then came to another country only to be labeled illegal.” (M, 20, Focus Group Discussion, 31 August 2024)



A, 22, from Myanmar has experienced deep uncertainty throughout her life as a refugee. As a single mother, she found herself surrounded by insincere people, with no job, and became a victim of bullying and sexual targeting, which led to depression.

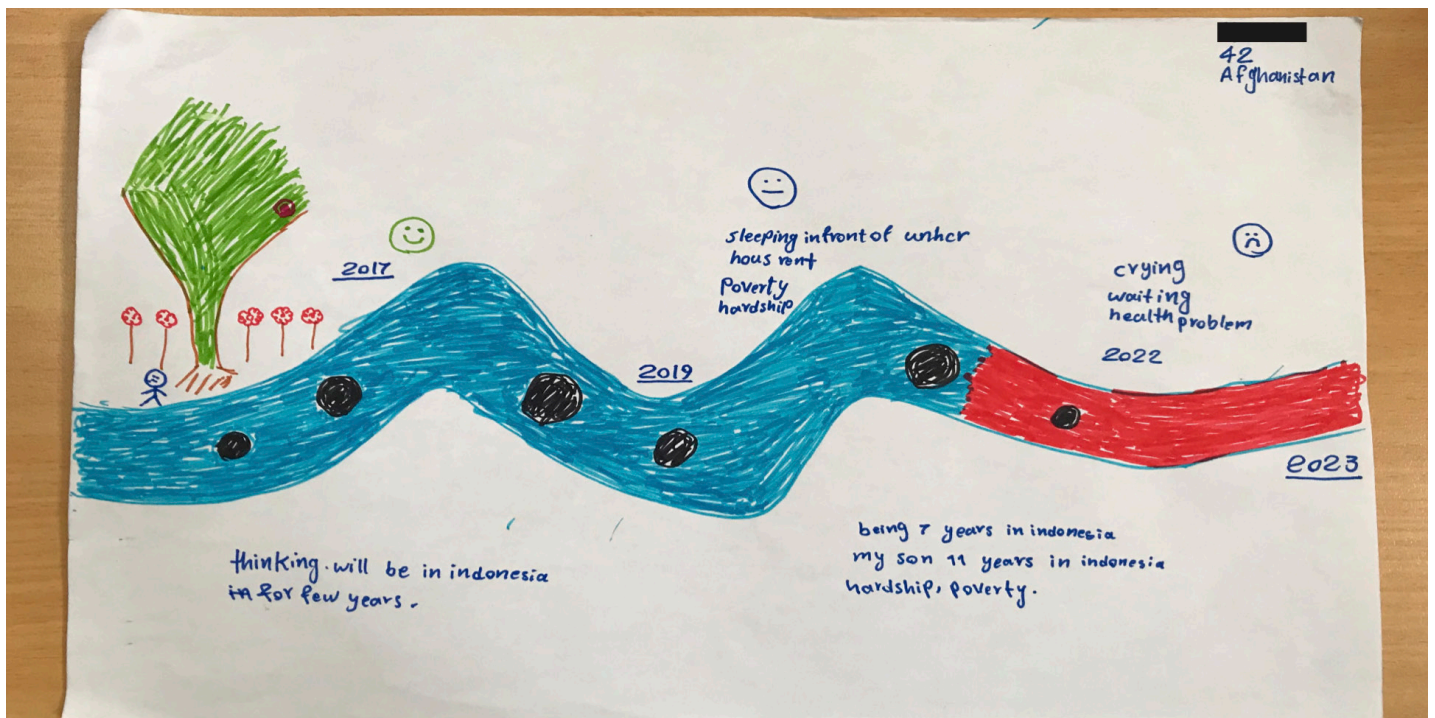
“I married the wrong man just to escape toxic parents and toxic people. I was surrounded by fake love, fake friends, and fake people—all part

of a toxic family and community. I experienced anxiety and depression. It was all caused by toxic religious extremism. My adult life began as a single mother. I felt pressure from the community and became a target of bullying and sexual harassment. I have no money, no job, I feel alone and uncertain about my future. I feel hopeless.” (A, 22, from Myanmar, Focus Group Discussion, 31 August 2024)

Z, 33, from Somalia has also experienced sexual violence. She is under severe stress due to harassment, violent abuse, and humiliation. R, a refugee from Myanmar, had to stay in a safe house after experiencing persecution and religious discrimination. Not only did she suffer personally—her child also faced difficulties at school.

“I came to Indonesia but went hungry for days and also faced discrimination. In 2023, I lived in a safe room for three months because of persecution. My child also struggles to attend school. From 2006 until now, I have felt no happiness—only stress. Always sad and always stressed.” (R, 36, from Myanmar, Focus Group Discussion, 31 August 2024)

Figure 4. Drawing of the life’s timeline by one of the refugee



Another refugee, J, 42, shared that she came to Indonesia to improve her child's education and quality of life. However, once in Indonesia, she and her husband were unable to work, and their child could not choose a good school.

Meanwhile, K, 42, who lives with four children, expressed her hope that her children would have a better life and not suffer the same fate as she did. Until now, she has not been able to move to a better country. Although she has received support from IOM during her time in Indonesia, many essential needs have not been provided, and K feels as though she is living in a prison.

“When I gave birth, I didn’t want my child to end up like me—living as a refugee for life, always seeking help from others. It’s too late for me; I’m already an old woman and I can’t pursue higher education. So at the very least, I want to do something for my children, which is why I searched for a country that could offer a better life. I came to Indonesia, and IOM supported us with many things, but there were also things they couldn’t provide. Or at least, we didn’t have choices because we were in accommodation. So we still feel—even psychologically—like we’re in a jail.”
(K, 44, from Somalia, Focus Group Discussion, 31 August 2024)

The difficult, harsh, and dark life they face makes them feel trapped in Indonesia. One refugee, T, 34, from Somalia, even stated that they feel like animals in a zoo because they have no freedom. T mentioned that many refugees experience violence. Children are also bullied at school. At present, the refugees can only hope to go to a better country or obtain a better future.

“We want to talk about the general refugee problem, not only about Sri Lankan refugees but also about all refugees in Indonesia. Now, we are living in Indonesia, and people are like animals in the zoo. We are expecting to leave for a third country and live in peace, but when we share our stories, you just listen and then leave. We don’t get solutions for our problems. The kids also experience bullying at school by their schoolmates. Please think about the kids and give freedom to the refugees.”
(T, 34, from Sri Lanka, FGD, 31 August 2024)

The refugees in Ciputat have faced the same conditions. One of them, RA, lived in Semarang for 1.5 years without being allowed to go out. RA came to Indonesia to survive, but after roughly 10 years here, RA felt exhausted and depressed.

“We once lived in the Semarang camp for one and a half years, but while we were there we were not allowed to go out. Then there was a change that allowed us to go out once a week for one hour. Then I moved to Jakarta and have been here ever since. During our time in Indonesia we felt sad, disappointed, depressed; we felt our future was uncertain, unsettled, and we were tired. The reason for moving here was to survive. Refugees cannot work; the money we receive is not enough; at the end of the month we are often unsure of what to eat.” (RA, 19, FGD in Ciputat, 6 December 2023)

Another refugee in Ciputat from Somalia, F, 27, feel that their current accommodation in Ciputat is uninhabitable. F wrote that they are living in a dirty area, that there is no kitchen for cooking, and that even sleeping is uncomfortable. The discomfort in Indonesia, shrouded in fatigue and depression, also made A, 32, from Sudan, uncomfortable; A wants to return to Sudan, but that request has not yet been permitted by IOM.

The refugees in Ciputat have also suffered various illnesses during their time in Indonesia. Among them is FS, 52, from Iraq, who suffers from thyroid cancer. Q, 35, developed diabetes and high blood pressure in 2018. N, 16, from Somalia, was involved in an accident in 2020 that has impaired her ability to walk. There are also mental health challenges: F, 30, from Afghanistan, has experienced psychological problems and must take doctor-prescribed medication.

Although refugees have endured difficult times, there are several factors that have enabled them to survive as refugees, such as having been welcomed kindly and warmly by Indonesians.

“First I arrived in Medan, then in Jakarta. The culture is very different and I was quite surprised. I am happy because Indonesians are friendly and kind.” (FH, 31, FGD, 7 December 2024)

In addition, the women also feel happy because they have children, who are gifts from God. When they give birth and have children, they hope to secure a better life for their children.

“When I reached 22, my child was born. It was a great moment in my life, although afterwards I went through a very hard time and didn’t know how to feel. I hope I can get the opportunity to give my child a better life.” (SA, 23, FGD, 31 August 2024)

Several refugees living in Ciputat have undergone interview processes for placement in a third country. As written by FS, 52, in her River of Life process, she underwent her first interview in May 2023 to travel to the United States. There are also those who have completed two of the three required interviews. However, some have been interviewed since 2022 and had received no news by the time of the focus group discussion in December 2024. At present, many refugees hope to be resettled soon in a better country.

3.4. Experiences of Gender-Based Violence (GBV)

During discussion sessions with the refugees, it was found that many refugees became victims of domestic violence. However, because of very different cultural norms, the refugees who suffered domestic violence felt ashamed to share their cases with others. In the end, many chose to tolerate the violence they endured.

It was also found that there are consequences for the victim's family if the woman, as the victim, tells others—including her own family—about the violence she experienced. The woman's and the man's families will argue upon hearing of the violence the wife suffered. Another consequence is that the husband may commit violence against the person or family to whom the wife confided her story.

“Sexual harassment is a disgrace for women from Afghanistan.

Fundamentally, being a victim of any form of violence against Afghan women is a disgrace that cannot be spoken of and must be kept to oneself. The impact of the violence experienced by female refugees is also twofold: with a life full of uncertainty while living in a transit country, in this case Indonesia, they experience domestic violence and cannot talk about it or report it. As a result, some refugees suffer from depression and even harbor suicidal thoughts.”

The psychological impact is very real for refugee women who experience violence. Depression is another consequence of domestic violence. In addition, there is another fear that causes many refugee women who suffer domestic violence to avoid reporting it—because if they do, their resettlement process may be disrupted or delayed, and there is concern that they may not be able to proceed with resettlement to a third country.

Many refugee women also shared that they frequently experience sexual harassment from members of the local community—such as being touched on the shoulder while riding a motorcycle, subjected to catcalling, invited to stay overnight at a villa, or simply asked for a photo. Although they feel angry and violated, there is little they can do. Refugees mentioned

that UNHCR provides services for reporting gender-based violence, but most refugee women do not access these services.

Another specific condition faced by refugee women is the burden of performing care work for sick family members—whether husbands, children, or parents. In the focus group discussion, one refugee woman shared that she suffers from an eye disease but cannot afford surgery. Her vision becomes severely blurred in the late afternoon, which disrupts her ability to make bread—an activity usually done at that time. In addition, she cares for five children and a husband who is ill and has undergone intestinal surgery, making him unable to do heavy work. Refugee women expressed that their families are the source of strength that keeps them going.

3.5. Fulfilment of Basic Rights

3.5.1. Access to Education

Nearly all refugee children in Cisarua are unable to attend formal schools in Indonesia. Most of them participate in informal education programmes, such as the Cisarua Refugee Learning Centre (CRLC). This informal institution was founded by refugees who successfully resettled in Australia. The teachers at CRLC are fellow refugees, not professional educators. The cost of education at CRLC is approximately IDR 25,000 per month, with an additional annual book fee ranging from IDR 100,000 to 200,000. These expenses remain a burden for many refugee families, especially since more than one child in a family typically attends school. This presents a significant challenge for refugee families in Indonesia seeking to educate their children.

A 16-year-old refugee shared that the curriculum offered by informal education institutions mostly covers basic subjects, and at times the teachers' capacity struggles to meet the needs of students aged 15–18, equivalent to senior high school level. To compensate, many refugee children her age access online learning provided by UNHCR. However, this is also difficult due to limited access to communication devices and the cost of purchasing internet data. She added that her hope of pursuing higher education is gradually fading.

Similar challenges are also present in Makassar. One of the obstacles faced by refugees is the inability to attend quality schools. They are unable to pursue their aspirations through education while living as refugees in Indonesia. This is partly because refugee children born in Indonesia do not receive birth certificates, which affects their ability to enroll in school. In addition, education is not considered important for girls in the refugees' countries of origin.

One refugee from Somalia shared that many women believe they belong to their husbands, and therefore do not need to pursue education or careers, viewing such efforts as a waste of time.

According to the Myanmar group, there is a belief that men are leaders regardless of their wrongdoing. The strong male ego prevents women from offering sound advice. “Our women also have lack of knowledge to human rights and awareness.”

Although awareness and capacity regarding women’s rights have increased, many still choose not to apply them, believing that their husbands and children are their top priorities.

Refugees in Ciputat, along with IOM Indonesia, reported that they are regularly invited to participate in ongoing capacity-building programmes through short courses. These general capacity-building efforts include:

1. English language courses for all refugees. If volunteers are available to teach Indonesian, courses are also provided;
2. Specialized courses for women, such as knitting, sewing, and crafting;
3. Martial arts training for children and adolescents;
4. Workshops on violence against women, held two to three times between 2021 and 2023; and
5. Thematic discussions on health and other relevant topics based on needs.

Komnas Perempuan observed that a relatively large number of refugees under IOM Indonesia’s care have a sufficient command of English.

The right to education for children is also a concern for Komnas Perempuan. Refugee children attend public schools near their accommodation and use Indonesian. Generally, they are able to speak Indonesian and some socialize with local children living nearby. According to a conversation with the Head of Pisangan Subdistrict in South Tangerang, it was confirmed that refugee children are allowed to access public schools without any official restrictions. The Subdistrict Head said:

“Some refugee children attend government-run educational institutions.

This reflects the subdistrict’s support for refugee children. They are able to speak Indonesian in addition to Arabic, Pakistani, Sudanese, and English. One of the social challenges among adults is language. However, during Ramadan and Eid al Fitr, neighbourhood communities (RT/RW) invite them to break the fast together and to socialize. They perform prayers at the mosque alongside the surrounding community.”

According to the Regulation of the Minister of Education, Research, and Technology (Permendikbud Ristek) of 2019, refugee children have been allowed to enroll in public

elementary schools. However, it should be noted that this decision depends on the availability of seats in the area. One refugee woman stated that children who had completed their education were not given a graduation certificate, but instead were only issued a letter confirming school attendance.

Komnas Perempuan notes that although the right to education for refugees is partially fulfilled—especially for those attending elementary and secondary schools with sponsorship support that must be secured independently—they do not receive formal graduation certificates as typically issued. Refugee children are only given a statement of school attendance, not an official diploma.

Access to education is available at all levels, but it depends on the availability of sponsorship to cover educational costs. A teenage refugee girl (AI) expressed concern that she may face difficulties continuing to a local university after completing high school.

“Aspirations like mine are to make my parents proud—I want to become a doctor, a physiotherapist. I’m currently in 11th grade, but I’m worried that after graduating high school, I won’t be able to continue to university because no refugee has ever made it that far. So my hope is to be resettled, because I’ve already been here for 10 years.”

3.5.2. Access to Health Services

In discussions, refugees in Cisarua shared that access to hospitals is quite distant—approximately one hour by public transportation. The journey itself consumes significant time, but the hospital registration process adds further delays. One refugee recounted their experience of seeking medical care for diabetes: they had to leave home early in the morning and only met the doctor after lunch due to the lengthy registration procedures. In total, it took more than half a day just to see a doctor. For refugees with chronic illnesses, this makes accessing healthcare an additional challenge, compounding their physical and logistical burdens.

Another common challenge faced by refugees is health insurance. Since refugees are not permitted to work and therefore lack income, access to health insurance becomes critically important. Many refugees seek assistance from Church World Service (CWS) to obtain healthcare services. However, in practice, not all medical conditions are covered by CWS.

One refugee shared that his mother suffers from persistent shortness of breath, especially at night, and had already received a referral from the community health centre (puskesmas) to go to the hospital. The family attempted to submit the referral letter to CWS in hopes of receiving financial support for the hospital visit. Unfortunately, the referral was rejected and

not followed up. CWS explained that the mother's condition did not meet their categorization criteria and did not yet show signs of emergency. Despite this, the delay in treatment led to a worsening of the mother's health condition.

Not unlike what has been explained by JRS Indonesia, refugees stated that the healthcare mechanism covered by CWS is as follows: CWS will process medical referral letters within 1 to 7 days for emergency cases, and normally within 1 to 2 months. Once approval is granted by CWS, refugees who submitted the referral letter may proceed to the hospital for treatment. The hospital bill will be sent directly to CWS. Some refugees who are unable to access CWS services seek assistance from JRS Indonesia in Cisarua for help in obtaining healthcare services.

Many refugees still face significant challenges in accessing healthcare services. As a form of self-reliance, when the illness is not considered serious—such as dizziness or coughing—they often turn to herbal remedies like ginger or lemon. For female refugees living alone in Indonesia, illness presents an additional hardship: when they fall sick, they are unable to manage administrative procedures and have no one to assist them.

Refugees in Makassar are experiencing similar difficulties. Access to healthcare remains challenging. K, 42, a refugee from Somalia, stated that he was unable to receive proper medical assistance when he was detained in Australia. The issue extends beyond physical health—mental health among refugees in Makassar is also affected due to the lack of access to their rights. This situation has led to feelings of depression, driven by an uncertain future.

3.5.3. Access to Employment

Refugees are not permitted to work in either the formal or informal sectors, including trading. They may offer certain types of courses or lessons, but without monetary compensation; instead, honorariums may be substituted with in-kind contributions, such as food or basic necessities.

Access to employment is one of the most frequently voiced concerns by refugees under the care of IOM Indonesia—both men and women—as it directly affects their ability to meet basic living needs. Komnas Perempuan has found that access to income-generating activities is closely linked to mental health. One refugee shared that stress is a common issue, especially due to the prolonged wait for approval from destination countries. Although many refugees possess education and specialized skills, work permits are not available to them.

“Daily living expenses are extremely limited, and although they are educated and possess specialized skills, there is no permit available for them to work. They may contribute their

expertise—for example, in English language or martial arts—but they are not allowed to receive payment or honorarium.” (Am, FGD, 6 December 2023).

Refugees in Makassar also expressed concerns about not having access to employment. Without the ability to work, they lack sufficient financial resources to maintain a decent standard of living. This issue is especially critical for women, particularly single mothers, who struggle to provide the best for their children. The uncertainty surrounding their future causes deep anxiety. They wish to have the right to work, but since that right is not granted, many hope to resettle in another country where they can secure a better future for their children.

3.5.4. Services for Handling Violence

An Ethiopian refugee woman shared her story:

“I arrived in Indonesia in 2017, two months pregnant. Upon arrival, I lived on the streets, in front of the UNHCR office. I stayed there for about two months. When my pregnancy reached four months, I experienced bleeding and had a miscarriage. It was very difficult to be pregnant and live on the streets. After the miscarriage, I moved around a lot. I received some help from relatives in my home country, and eventually, I lived in the Kalideres shelter. After two months in Kalideres, I went to IOM in Jakarta. Four months later, I moved to Ciputat, South Tangerang.” (As, FGD, December 6, 2023)

According to the Head of Pisangan Subdistrict, during the Covid-19 pandemic, the Subdistrict collaborated with the Head of the Community Health Centre, as per the following information:

“Regular citizens must be vaccinated. The question is, refugees must also be vaccinated, even though they are foreign nationals. However, from a humanitarian perspective, they must receive vaccination because it concerns the health of the community. We collaborated with the Puskesmas (Community Health Centre), the Immigration Office, and IOM, requesting permission because they live in our environment. We

took action; before policies were issued, they received vaccination first.”
(Head of Pisangan Subdistrict, Discussion on 6 December 2023)

3.5.5. Handling Cases of Gender-Based Violence

Komnas Perempuan notes that laws and regulations concerning the handling of gender-based violence, especially domestic violence and the Law on Sexual Violence Crimes, are intended for Indonesian citizens and do not cover refugee women who are victims of gender-based violence. However, thus far, domestic violence cases reported to the UPTD PPA (Technical Implementation Unit for Women and Child Protection) of South Tangerang have been handled through mediation (non-litigation) at the victims’ request, with the condition that the victims separate from their husbands, the perpetrators.

From discussions with the Department of Women’s Empowerment, Child Protection, Population Control and Family Planning (DP3AP2KB) of South Tangerang City, it is known that even though there are no specific policies regarding the handling of domestic violence cases involving refugees, the agency affirms its commitment to continue receiving complaints, providing safe spaces for victims, and supporting psychological recovery. South Tangerang, through its National Unity and Political Affairs Agency (Kesbangpol), since mid-2022, shortly after the enactment of the Law on Sexual Violence Crimes, has had a task force for the prevention and handling of gender-based violence against women. Cases of gender-based violence against refugee women are placed within the security and political sector. IOM Indonesia is a member of this task force, as explained by the Head of UPTD PPA South Tangerang, Tri Purwanto:

“For refugee women who are victims of domestic violence, we provide a safe house, separating the victim from the perpetrator. We also encouraged IOM Indonesia to form a task force for handling gender-based violence against refugee women, and eventually, a task force was established.” (TW, Discussion on 7 December 2023)

It was also explained that generally, government-managed service institutions such as the Department of Women’s Empowerment and Child Protection (DP3A) and the Technical Implementation Unit for Women and Child Protection (UPTD-PPA) are open to receiving complaints from victims of gender-based violence regardless of nationality. A staff member from the Department of Women’s Empowerment, Child Protection, Population Control and Family Planning (DP3AP2KB) explained that in South Tangerang, the police have been using the Law on Sexual Violence Crimes for handling cases of sexual violence.

“**The** police often consult with us. The main obstacle we face is language, including sign language. Although we do not have a budget to pay interpreters, we are grateful that some refugees are proficient in Indonesian and English, and are willing to volunteer as interpreters. However, for other needs, we rely on available resources for safe houses, counseling fees, and consumption. As for the costs of other illnesses, such as stomach acid, IOM covers the treatment.” (ANS, Discussion on 7 December 2023).

To date, there are no standard operational procedures (SOPs) for handling cases of gender-based violence against women within the Department of Women’s Empowerment, Child Protection, Population Control and Family Planning (DP3AP2KB). Therefore, it is hoped that such a mechanism will be established in the future as a standard to be implemented for case handling in every Technical Implementation Unit for Women and Child Protection (UPTD PPA) across Indonesia.

The situation in Makassar has its own dynamics. Based on previous River of Life sessions, it was found that there are refugee women who are victims of gender-based violence. A refugee from Myanmar stated this occurs due to the belief that hitting is part of education or affection. Every girl is married when she reaches 15 or puberty. Women are often considered “baby-making machines” or domestic “maids”.

“**‘Beating** is part of education’ is very common, not only for married couples but even for the kids. Whenever they want to teach their kids, they explain a few times, then start to beat if they still do not understand. If the family has a beautiful daughter, she will get married when she hits puberty; 15 means she’s old already, so if she’s 16 then she is past the marriageable age. Sometimes, even though the woman didn’t hit puberty yet, she will still be forced to get married. Also, women are considered baby machines and maid servants at home.” (M, 19, from Myanmar. FGD, 31 August 2024).

In handling cases of violence against refugees in Makassar, IOM Makassar collaborates with the Technical Implementation Unit for Women and Child Protection (UPTD PPA/P2TP2A) of Makassar City to build a mechanism for handling refugees. This collaboration has become one of the best practices for refugee handling across Indonesia. Should an act of violence occur, refugees can directly report to UPTD PPA Makassar independently or through IOM if

language is a barrier. Currently, UPTD PPA Makassar has even provided an English interpreter who can facilitate refugees in reporting acts of violence they have experienced.

The cases of violence experienced by refugees are generally domestic violence cases. Refugees will face obstacles when reporting to the police because the police cannot handle domestic violence cases if there is no marriage certificate, even if the refugee has prepared personal documents, such as a birth certificate and a marriage certificate. However, a Special Advisor to the Regional Secretary explained that regulations made by the Department of Population and Civil Registration (Disdukcapil) are not yet available for foreign nationals and are only intended for Indonesian citizens.

UNHCR once suggested creating regional regulations for refugee handling, but this was difficult to implement because the presence of refugees is only temporary. In addressing this, the Director of LBH APIK (Legal Aid Institute of the Indonesian Women's Association for Justice) South Sulawesi and also a Steering Committee Member of FPL conducted outreach to residents around the community house and to the refugees themselves. This aimed to make refugees aware that they are not above the law, and therefore are not advised to commit criminal acts or normalize violence among themselves or against local communities.

3.6. Responses from Relevant Authorities (UNHCR, IOM, Task Force for Handling Refugees)

During the monitoring, Komnas Perempuan visited several parties to discuss findings from the field. External parties involved in these discussions included JRS (Jesuit Refugee Service), a humanitarian organization whose mission is to accompany, serve, and advocate for the rights of refugees and forcibly displaced persons. They provide services at the national level in coordination with regional and international networks, offering psychosocial services, information, and accompanying refugees in immigration detention centres until 2018. Additionally, they are present in urban settlement areas to respond to self-settled refugees, or those who do not receive financial assistance and accommodation from international organizations.

Here are the projects undertaken by JRS Indonesia in its efforts to advocate for the rights of refugees:

1. Refugee case management programme
2. Refugee community empowerment programme
3. Emergency refugee protection information and case response

In this meeting, JRS Indonesia affirmed that the issue of refugees is quite a 'hidden' issue. JRS Indonesia added that there are several settings for refugees, namely urban refugees, which are divided into refugees in: 1) IOM Community Housing; and 2) Self-settled. Recently,

a new setting has emerged, namely refugees in temporary camps such as Rohingya refugees in Aceh. JRS Indonesia has been working on the issue of urban refugees in Bogor since 2009 and in Jakarta since 2019.

There was a major change that allowed refugees to stay in Indonesia with the issuance of Presidential Regulation No. 125 of 2016 concerning the Handling of Refugees. Before this Presidential Regulation, all refugees were categorized as illegal immigrants. After the Presidential Regulation, Indonesia then recognized the status of asylum seekers, so refugees were no longer subject to detention. However, this major change was not accompanied by the fulfilment of rights for refugees.

Regarding education for refugees, the Circular Letter of the Secretary-General of the Ministry of Education, Culture, Research, and Technology No. 752553/A.A4/HK/2019 dated 10 July 2019 allows refugee children in Indonesia to access education. However, in implementation, several challenges remain for refugees to access it, with one of the primary factors being the uneven distribution of information regarding this matter.

Shortly after that circular letter was issued, a pandemic occurred, requiring students to undertake distance learning using communication tools such as smartphones, laptops, and computers. For refugees who sent their children to receive an education, this was an additional challenge because costs became more expensive, while the financial allowance received by refugees remained the same, compounded by the fact that refugees are not allowed to work. With assistance of around IDR 1 million to 1.5 million per month, refugees must manage to live by renting accommodation (for self-settled refugees) and meeting their basic needs for clothing and food.

There is no access for refugees to obtain higher education. Moreover, while pursuing education in Indonesia, refugees cannot obtain a diploma.

Several foundations collaborate with refugees to advocate for their right to education. Examples include programmes such as: 1) ELITE Open School, which is equivalent to basic education; 2) General Education Development (GED), which is a certification package equivalent to high school and recognized by various universities, training schools, and companies; and 3) Coursera, an online platform offered free of charge to refugees.

Regarding access to healthcare, JRS Indonesia reported that many community health centres have long been accessible to refugees. Refugees only need to show their identity cards and pay between 5,000 to 30,000 rupiah. UNHCR partners with humanitarian organizations Church World Service (CWS) and CRS to facilitate financial and health assistance for refugees. On another issue, JRS Indonesia collaborates with Yayasan Sisterhood, which conducts studies related to reproductive health for refugees.

To obtain healthcare services, the mechanism refugees can follow is to contact CWS based on a referral from a community health centre, then await approval from CWS and UNHCR.

There are several criteria for the approval process. The request process for healthcare access services takes approximately one week before the appointment (except for emergencies such as childbirth, etc.). UNHCR's partners related to healthcare services include RSPG Cisarua and Ciawi Regional General Hospital.

Despite the fulfilment of basic education for refugees, access to formal employment for refugees remains unavailable. The consequence of not having the right to work and the right to banking leads to refugee dependence on UNHCR.

According to JRS Indonesia, the common routes typically taken by refugees to enter Indonesia are as follows:

1. Refugees from Afghanistan usually stop in Malaysia first, then cross over to Sumatra. After that, they proceed to Jakarta to register with UNHCR.
2. Refugees from Rohingya/Sri Lanka/Bangladesh typically use boats to reach Indonesia.
3. Many refugees also use airplanes to arrive in Indonesia.

For refugees registering civil documents such as marriage, birth, or death, the process involves receiving a certificate of important event, which can then be submitted to UNHCR (if they choose to do so).

While monitoring refugees in Makassar, Komnas Perempuan held discussions with several external parties, including the Department of Women's Empowerment and Child Protection (DP3A), the Technical Implementation Unit for Women and Child Protection (UPTD PPA), LBH APIK South Sulawesi, and Legal Aid Institute or LBH Makassar. Makassar is the first city to create local regulations related to Restorative Justice (RJ), an effort to resolve cases outside of court, through a Mayoral Regulation. This Mayoral Regulation (Perwali) No. 91 of 2023 concerns Supporting Services for Restorative Justice in Reflection of the Criminal Justice Reform Programme.

This Mayoral Regulation (Perwali) on Restorative Justice (RJ) originated from a collaboration between LBH Makassar and the Makassar City Government. It regulates rehabilitation, reintegration, and mediation services, as well as other supporting services. Achi Soleman, as the Head of the Department of Women's Empowerment and Child Protection (DP3A) of Makassar City, stated that the implementation of RJ has actually been ongoing at the community level through the Technical Implementation Unit for Women and Child Protection (UPTD PPA) and community shelters, especially in cases of children in conflict with the law and cases of violence against women.

Community shelters are community-based case accompaniment services; they do not only provide assistance for cases of domestic violence or violence against women, but also offer basic needs services, paralegal support, and mediation. If a victim comes to a community shelter, the first thing a paralegal at the shelter does is conduct an assessment. The paralegal

will take an emotional approach toward both the victim and the perpetrator. If a case cannot be resolved on-site, it can be reported to the department or LBH APIK.

Community shelters also conduct economic empowerment, organize confident children's schools (schools for child victims of violence in coastal areas), empowerment schools (for domestic violence victims), coastal women's schools attended by approximately 150 women, and coastal elderly schools attended by around 50 people. Community shelters also frequently provide education on the importance of using contraception.

Regarding refugee issues, a representative from the National Unity and Political Affairs Agency (Kesbangpol) of Makassar City, as the Head of the Task Force for Handling Refugees (Satgas PPLN), stated that the main challenge in refugee handling is the minimal budget. The Satgas PPLN is regulated by a Mayoral Decree.

The total number of refugees in Makassar is currently 921, down from over 2,000 in previous years; the others have received resettlement. One concern for Kesbangpol is the phenomenon of marriages between refugees and local communities. Many women around the Community House become victims and are abandoned when refugees receive resettlement.

According to IOM Makassar, multi-stakeholder cooperation regarding refugee issues in Makassar is good. This is evidenced by a workshop on cooperation between IOM and the Technical Implementation Unit for Women and Child Protection (UPTD PPA/P2TP2A) of Makassar City to build a mechanism for handling refugees. This collaboration has become one of the best practices for refugee handling across Indonesia. Currently, when refugees experience a case (generally violence), they can report it directly to the UPTD PPA independently, or if there is a language barrier, they can first make a report to IOM. The UPTD PPA of Makassar City now has an English interpreter who can facilitate refugee victims of violence in reporting directly.

The primary obstacle in handling violence cases experienced by refugees is language. Additionally, violence cases experienced by refugees are generally domestic violence. When a refugee reports their case to the UPTD PPA and the case is reported to the police, the obstacle encountered is the police's willingness to only handle domestic violence cases if the refugee has a marriage certificate. This is despite the fact that refugees rarely have complete personal documents, such as birth certificates and marriage certificates.

According to Puspa, an Expert Staff to the Regional Secretary, the regulations made by the Department of Population and Civil Registration (Disdukcapil) for civil registration are currently only available for Indonesian citizens, with no existing regulations for refugees or foreign nationals.

Currently, there's a case involving four Rohingya refugees (a mother, two sons, and a daughter) who recently arrived in Makassar. Their primary goal was to reach Malaysia from

their refuge in Aceh. According to Haidar, these refugees used an agent service to travel to Malaysia. However, the boat they boarded didn't take them to Malaysia; instead, it stopped in Makassar. The four refugees arrived in Makassar on 27 August 2024, and are currently in a safe house. Common issues encountered in safe houses include unfamiliar food and disputes among refugees.

As of the release of this document, 19 refugees in Makassar had their cases assisted by social workers; 11 of them stayed in a safe house for some time (including the four Rohingya refugees mentioned earlier). One case that received accompaniment involved a 15-year-old child refugee who became pregnant after being raped. The victim was raped in Bangladesh and on the boat en route to Indonesia. She gave birth in Makassar. After childbirth, the victim did not want to care for her child, so the child was placed in an orphanage. Many people wanted to adopt the child, but they faced obstacles due to the lack of civil registration documents.

One difficulty encountered by refugee children born in Indonesia is the inability to obtain civil registration documents; refugee children cannot acquire birth certificates, which then impacts their ability to attend school. Ros, the Director of LBH APIK (Legal Aid Institute of the Indonesian Women's Association for Justice) South Sulawesi and a Steering Committee Member of the Service Provider Forum, stated that in handling refugees, outreach is also conducted for residents around the community house and for the refugees themselves. The outreach for refugees aims to raise awareness that they are not above the law, and therefore should not commit criminal acts, including normalizing violence among themselves or against local communities.

Since 2019, with the issuance of the Makassar City Mayoral Decree, the Makassar City Social Services Department (Dinsos Kota Makassar), as a member of the task force, began serving in refugee handling. UNHCR once provided advice regarding regional regulations for refugee handling, but this was difficult to realize given that the presence of refugees is only temporary. Lisa from LBH Makassar explained that LBH Makassar often faces obstacles, one of which is related to access to legal aid for refugees. Legal aid is often provided late because refugees only approach the legal institute after their case has proceeded in court and is nearing the sentencing stage, making it difficult for LBH to intervene.

On 15 November 2024, the National Commission on Violence Against Women (Komnas Perempuan) held a focus group discussion with UNHCR. Similarly, on 25 November 2024, these monitoring findings were also presented to IOM representatives. After presenting the findings and analysis, information from UNHCR and IOM became important material for elaboration.

So far, UNHCR handles data collection and reports it through the Ministry of Foreign Affairs. The placement of refugees is based on the quota availability of the resettlement

country. The waiting period for resettlement is part of a humanitarian programme offered by several third countries to UNHCR to screen the most vulnerable refugees in various countries. The resettlement process depends on the quota provided by the third country. This quota varies from year to year and depends on the third country's political conditions. Not all refugees are eligible for resettlement. The global resettlement process unfolds as follows:

1. Assessing Resettlement Needs and Quotas: UNHCR maps out the needs and then prepares a document called *Projected Resettlement Needs* to present to third countries.
2. Country Data and Refugee Identification: Countries provide data to UNHCR, which then identifies refugees suitable for placement. Considerations include individuals needing prolonged protection, women or mothers at risk, at-risk children and adolescents, survivors of violence, those with specific life-saving health needs, and family reunification with relatives already in another country, or those with no other solutions. UNHCR has a panel to evaluate recommendations from partners, input from agencies, fellow refugees, and organizations to prevent bias.
3. UNHCR Interview Process: The United States, Canada, Australia, and New Zealand received applications from Indonesia in 2023.
4. Placement Preparation: This includes arrangements for refugees to depart and be received as citizens. There will be another interview with the third country, and the process varies (from four months to one year).

One interesting point conveyed by UNHCR is that resettlement is not a right, so not all refugees can demand it. As of September 2024, there are 11,000 refugees in Indonesia. Refugees cannot choose the country for resettlement; it depends on the refugee's eligibility and the criteria of third countries. If rejected by a third country, UNHCR will prioritize based on the urgency of a condition. Third countries have programmes to sponsor refugees, through either their citizens or humanitarian organizations in those countries (private sponsorship). Refugees who can be accommodated by IOM are those who have received a recommendation from UNHCR. IOM and UNHCR have different refugee handling mechanisms, all based on the programmes owned by each agency. UNHCR can only provide support to 7% of the total self-settled refugees. Financial assistance is provided every six months and will be extended after a review process.

Indonesia has a Presidential Regulation that governs the handling of refugees in emergency situations, but it does not yet regulate self-settled refugees.

Regarding educational needs, UNHCR and IOM are willing to cover School Operational Assistance (BOS) funds if refugees attend school. However, some schools are reluctant, fearing misuse of authority.

Concerning healthcare, the National Identity Number (NIK) remains an issue, especially for refugees with HIV/AIDS. If a refugee has a health concern, UNHCR suggests they seek

treatment at a community health centre so they can be referred if their condition worsens or requires further treatment. If the health issue is mental, UNHCR will pursue resettlement.

Legal expert Bhatara Ibnu Reza described Indonesia's best efforts despite not having ratified the 1951 Convention and the 1967 Protocol. He outlined three approaches undertaken to navigate the unratified convention and protocol while still providing basic human rights: voluntary repatriation, social integration, and resettlement.

Voluntary repatriation can be pursued through a tripartite agreement between Indonesia, the country of origin, and UNHCR to ensure the refugee's safe arrival in their home country.

Social integration involves efforts to integrate with the local community. During this monitoring, such efforts were observed, driven by both refugee initiatives and local governments. However, this step is certainly not easy, given the diverse characteristics and backgrounds of each individual.

Resettlement is essentially the ultimate hope when a country can no longer accommodate refugees, and it is also a hope for refugees desiring a better life. However, Indonesia has a rule that allows individuals who have lived in the country for five consecutive years or ten non-consecutive years to apply for Indonesian citizenship. This issue could be a point of discussion, while still considering the state's capacity to fulfil their rights as citizens.

Chapter 4.

Analysis

This Chapter will analyse and discuss the findings from Chapter III, which depict the situation and conditions of refugee women currently awaiting placement in a third country (resettlement). During this waiting period in Indonesia, refugee women and their families are accommodated in facilities provided by IOM and UNHCR in various regions. The various findings outlined illustrate the occurrence of gender-based violence and conditions that, upon closer examination, reveal instances of torture and the non-fulfilment of their rights.

The analysis in this Chapter is based on relevant legal and human rights frameworks, namely international human rights instruments, including the Convention Against Torture (CAT), the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW), the International Covenant on Civil and Political Rights (ICCPR), and the International Covenant on Economic, Social, and Cultural Rights (ICESCR), as well as the 1945 Constitution of the Republic of Indonesia and other national policies in Indonesia as detailed in Chapter II of this Report.

4.1. Resettlement Waiting Period Leading to Ill-treatment (Cruel, Inhuman and Degrading Treatment)

Monitoring findings illustrate the indefinite and lengthy waiting period refugees endure for placement in a third country (resettlement). This uncertain resettlement waiting period can extend significantly, sometimes over 5 years, and even up to 12 years. Such a prolonged and uncertain waiting period can lead to considerable psychological pressure, especially if not supported by adequate living conditions and sufficient access to essential needs, including physical and mental healthcare.

A waiting period for resettlement is actually a choice made by refugees based on their needs. This aligns with UNHCR's primary goal of finding long-term solutions for refugees that will give them the opportunity to rebuild their lives appropriately and in peace. The available long-term solutions include local integration, voluntary repatriation, or placement in a third country. However, due to limited resettlement quotas available globally in third countries, UNHCR has been striving in recent years to expand alternatives and seek more long-term solutions.

The limited quota prolongs the stay of refugees in Indonesia. Furthermore, even if the refugees' countries of origin are eventually deemed free from conflict, they cannot be immediately repatriated. This is because countries that have recently emerged from conflict cannot immediately provide a good life for their citizens. The prolonged stay in Indonesia also often causes them to feel alienated and disconnected from their countries of origin. The arduous and challenging journey to Indonesia serves as proof of their desire to free themselves from countries deemed incapable of providing security for their citizens.

This situation that emerges, namely the uncertain waiting period for resettlement, places refugees in a tortured condition, yet powerless to change it. Their fate depends on many factors beyond their control and even UNHCR cannot intervene. Indonesia has not ratified the 1951 Refugee Convention, thus it cannot become a country of resettlement; the third countries they aim for are also becoming stricter in their acceptance of citizens; while UNHCR has no authority to compel another country to accept refugees as its citizens. These refugees consequently have restricted movement and lose their freedom, possessing no nationality, unable to work, and unable to build the future they hope for.

The Convention Against Torture (CAT) Article 16 states that 'Each State Party shall undertake to prevent in any territory under its jurisdiction other acts of cruel, inhuman or degrading treatment or punishment which do not amount to torture as defined in Article 1'. Thus, the conditions arising from the uncertain waiting period constitute inhuman treatment. Although it cannot be denied that no party can be blamed or held responsible for this situation.

Each country faces its own challenges regarding its citizens. The occurrence of conflict and war in a country has a severe impact on its citizens. Consequently, the state's duty to ensure its citizens live well and prosper cannot be fulfilled due to prolonged war and conflict. On the one hand, peaceful countries cannot simply increase their number of citizens, as the responsibility of providing welfare to their citizens is not an easy task. As a transit country known for its hospitality towards refugees, Indonesia also faces various population issues, including addressing extreme poverty, the figures for which have risen after the COVID-19 pandemic. Nevertheless, the occurrence of torture and cruel, inhuman, and degrading treatment of refugees must still be prevented.

4.2. Situation and Conditions of Refugee Accommodation Potentially Aggravating the Resettlement Waiting Period

4.2.1. Conditions Akin to Detention in Accommodation Arrangements

Komnas Perempuan's 2009 report found conditions akin to detention within the framework of activities involving deprivation of liberty and freedom, stating that: 'detainees can be defined not only as those in a room called a prison, but also in situations and conditions that lead to detention efforts imposed on a free individual, who nonetheless experiences restrictions on their freedom, causing them to feel as if they are imprisoned, a condition known as detention-like conditions'.

These aforementioned conditions were found among refugees living in accommodations with limited living space, no private bedrooms, only one shared bathroom, and housing families with two to three children. In addition to being prohibited from working to earn a livelihood, they face restrictions on mobility and active hours outside the accommodation. Their daily mobility is largely confined to their living quarters, especially for women within the context of patriarchal households. They are not allowed to stay overnight outside the accommodation, nor are they permitted to bring guests to stay overnight inside. Access to clean water is a problem, particularly during the dry season. Living confined within refugee accommodations with mobility restrictions, coupled with a prolonged resettlement waiting period and uncertainty about their future, creates conditions akin to detention.

Various challenges further complicate the situation, such as mounting economic pressures that cannot be alleviated due to the lack of right to work, a very limited social environment, and social interaction barriers, particularly language, with local residents. Moreover, not all local residents accept the presence of refugees as their neighbours. For some refugee women, the "detention-like conditions" within the accommodation are exacerbated by their husbands' control and/or restrictions. Generally, refugee families are patriarchal in culture.

So far, the handling of refugees in Indonesia has adopted a security approach, meaning all aspects are viewed and considered within the context of whether they will threaten security. The crucial point for consideration then becomes that prioritizing community and state security leads to the emergence of inhuman treatment of others. Whenever this is the case, the arrangements and handling of refugees need to be re-evaluated within the framework of preventing cruel, inhuman, and degrading treatment.

4.2.2. Right to Family Life: Marriage and Child Status Issues

A social and legal issue arising from the presence of refugees while awaiting resettlement in Indonesia is marriage between refugees themselves, and between refugees and Indonesian citizens (WNI). Although marriage between two consenting adults cannot be intervened with, these marriages pose problems under Indonesian law. Both marriages between refugees and between a refugee and an Indonesian citizen face administrative issues due to the inability to complete the required legal documentation. So far, these marriages have been conducted under religious law and facilitated by local refugee community religious leaders.

Marriages can be performed even if they are only religiously recognized, cannot be registered at the local religious affairs office, or are unregistered marriages because they do not meet the formal requirements for a legal marriage, namely marriage registration. There is no civil registration mechanism issued by relevant government agencies for marriages, whether between refugees themselves or between a refugee and an Indonesian citizen. Consequently, a marriage certificate, which is the only authentic evidence of such a marriage, cannot be obtained. Marriages that are valid solely under religious law have negative impacts on women (wives) and children born from such marriages.

A marital status that is only religiously valid prevents a woman from claiming her rights as a wife legally recognized under state law. In marriages between refugees, another issue that arises is the birth of children from such unions, ultimately disadvantaging the child as they cannot obtain a birth certificate. This certificate is a crucial document for receiving recognition and protection from the state. If problems arise, such as divorce, it becomes difficult to secure rights to child custody.

In marriages between a refugee and an Indonesian citizen, the child can still acquire citizenship status if born to a biological mother or father who is an Indonesian citizen. This is because Indonesia adheres to the principles of *jus soli* and *jus sanguinis*. *Jus soli* means a person's right to citizenship if they are born within Indonesian territory, while *jus sanguinis* means a person has the right to acquire citizenship status if born to a biological mother or father who is an Indonesian citizen.

Under Law No. 24 of 2013 on Amendments to Law No. 23 of 2006 concerning Population Administration, it's stated that all children born in Indonesian territory have the right to obtain a Birth Certificate. This includes children born outside of a marriage legal under Indonesian marriage law. Article 43, paragraph (1) of Law No. 1 of 1974 concerning Marriage also states, "A child born outside of an official marriage has a civil relationship with their mother and their mother's family, as well as with the man as their father, which can be proven based on science and technology and/or other legal evidence demonstrating a blood relationship, including a civil relationship with their father's family."

If referring to the provisions regarding child birth certificates for unregistered marriages, only the biological mother's name will be listed. This won't pose an issue if the marriage is between a refugee and an Indonesian citizen woman. However, if the marriage is with an Indonesian citizen man, the child may not be able to obtain a birth certificate because the refugee mother isn't recognized within Indonesia's population administration system. Findings within refugee communities indicate that all refugee children born in Indonesia lack birth certificates. These children only receive a Certificate of Birth from the medical personnel who handled their delivery. This naturally impacts refugee children when they need to attend school and access other related public services.

So far, local governments have consistently urged residents in their areas to avoid marrying refugees. Although it's acknowledged that mixed marriages between refugees and local citizens are personal and individual decisions that cannot be intervened with, prevention is deemed necessary to minimize the emergence of more complex problems related to marital status and the fulfilment of rights for children born from such unions. Nevertheless, it's undeniable that the fulfilment of biological needs and attraction to the opposite sex are unavoidable.

4.2.3. Unavailable Right to Mental Health

The "detention-like conditions" within refugee accommodations have caused several refugees, including women, to experience depression, persistent anger, sadness, anxiety, despair, and a lack of happiness. There are refugees suffering from chronic illnesses with limited economic means, who require psychological services to cope with depression and hopelessness about their living conditions. Women in disharmonious relationships with their husbands, living under their husbands' restrictions or control in these "detention-like conditions", need a close support system simply to confide in. In such circumstances, regular and affordable psychological services are essential for refugee women. This creates a difficult cycle of problems, as poor mental health can physically impact the body, and vice versa, indicating a need for holistic treatment.

Basic rights to health, encompassing not only physical health but also reproductive and psychological/mental well-being, should ideally be accessible to refugees. Regarding health rights, refugees currently cannot access healthcare as they should. Services can only be obtained through assessments by international organizations like UNHCR and IOM, and through independent assistance from other community organizations. However, according to Law No. 25 of 2009 concerning Public Services, the state is obligated to fulfil the rights and needs for public services for every citizen and resident living in Indonesia.

However, the issue of refugees in Indonesia is quite complex. This is due to incomplete regulations concerning refugees and the lack of clarity on what health rights are afforded to refugees and asylum seekers, leading to their marginalization in receiving healthcare to improve their health status. So far, the healthcare services they receive are limited to physical health, provided by the nearest Community Health Centres (Puskesmas); access to mental healthcare is not yet available.

In Indonesia, access to and services for mental healthcare are still limited, both in terms of facilities and the number of available psychologists and psychiatrists. Adding to this is the persistent societal stigma that equates mental disorders with insanity, causing people to often ignore symptoms and hesitate to seek help. Beyond refugees in general, the need for mental healthcare access and services is even greater for refugee women who are victims, to enable their recovery and ability to resume their lives. However, in the context of refugees, the need isn't just about availability; it's also about overcoming language barriers, given that refugees originate from various countries. This presents a considerable challenge to overcome.

4.3. Handling Violence Against Refugee Women

4.3.1. Suboptimal Local Government Support

The role of local government is crucial in handling refugees because refugee accommodations are spread across various different regions. This naturally relates to local policies on the placement of refugees and how they respond to problems arising from refugees living among their citizens. The prioritization of a security approach has hindered the fulfilment of other needs deemed irrelevant to efforts to create a secure environment. UNHCR once suggested creating local regulations for refugee handling, but this has been difficult to implement given that the presence of refugees is only temporary.

Violence, especially against women, within refugee communities is another issue that hasn't received adequate attention. Not all local governments in areas hosting refugee accommodations have mechanisms to respond to this problem. Regional policy and budget issues pose a challenge; if it's already difficult to meet the needs of their own citizens, it becomes even harder when resources are allocated for non-citizens. Many regions still differentiate service provision based on domicile, even for their own citizens, let alone for refugees.

Legislation concerning the handling of gender-based violence, particularly domestic violence (KDRT) and Sexual Violence Crimes (TPKS), is aimed at Indonesian citizens and does not extend to refugee women who are victims of gender-based violence. The Domestic

Violence Law (UU PKDRT) and the Sexual Violence Crimes Law (UU TPKS) in Indonesia do not regulate the protection and handling of gender-based violence against refugee women. Furthermore, Indonesia has not ratified the 1951 Refugee Convention, meaning refugees do not receive the same protection, access, and rights as Indonesian citizens.

However, each region hosting refugee accommodations has varying policies based on their individual initiatives. For example, the UPTD PPA (Technical Implementation Unit for Women and Child Protection) of South Tangerang once handled a domestic violence (KDRT) case involving a refugee woman. This was done through mediation (non-litigation) at the victim's request, with the condition that the victim separated from her husband, the perpetrator. Although there is no specific policy regarding the handling of refugee domestic violence cases, the UPTD PPA affirms its commitment to continue accepting complaints, providing a safe space for victims, offering interpreters despite lacking a dedicated budget, and supporting psychological recovery.

Following the enactment of the Sexual Violence Crimes Law (UU TPKS), the South Tangerang Local Government also formed a Task Force for the prevention and handling of gender-based violence against women through the National Unity and Political Agency (Kesbangpol) in mid-2022. IOM Indonesia is a member of this task force. Cases of gender-based violence against refugee women are placed within the security and political sector.

Good practices are also being carried out by the UPTD PPA (Technical Implementation Unit for Women and Child Protection) in Makassar City, which provides case assistance for violence against refugee women. This includes support for a 15-year-old refugee child, a victim of rape, at a safe house. The victim experienced rape in her home country and on the boat while travelling to Indonesia. She gave birth in Makassar. After giving birth, the victim no longer wished to care for her child, who was then placed in an orphanage. Many individuals expressed interest in adopting the victim's child, but this was hindered by the lack of civil registration documents.

Generally, government-managed service institutions like UPTD-PPA are open to receiving complaints from victims of gender-based violence, regardless of nationality. However, a standard operating procedure (SOP) for handling cases of gender-based violence against women within the DP3AP2KB (Department for Women's Empowerment, Child Protection, Population Control, and Family Planning) is not yet available. Therefore, it's hoped that such a mechanism will be established in the future as a standard for case handling in every UPTD PPA across Indonesia, including for refugee women.

Another issue that's surfaced involves the Refugee Handling Task Forces, established through Minister of Home Affairs Circular Letters No. 300/2307/SJ and No. 300/2308/SJ concerning the Establishment of Task Forces for Handling Refugees. Several regions have already formed Refugee Handling Task Forces (Satgas PPLN), such as Semarang City and

South Tangerang City. These task forces are expected to foster more integrated and coordinated efforts among local agencies in managing refugees in Indonesia. However, findings in Makassar City reveal a Refugee Task Force coordinated by Kesbangpol that lacks both programmes and a budget, as there are no central government provisions on how these task forces should be managed at the local level.

4.3.2. Challenges in Handling Violence Cases at the Police Level

The violence cases identified during monitoring include domestic violence (KDRT) and sexual violence (KS) such as sexual harassment and commercial sexual exploitation (KSBE). Domestic violence is frequently experienced by refugees, especially women, and can be reported to organizations that receive complaints, such as IOM and CRS. UNHCR collaborates with CRS to operate a hotline for reporting gender-based violence cases. CRS is responsible for receiving complaints, conducting case assessments, and reporting the findings to the UNHCR team. Subsequently, the UNHCR team provides recommendations for handling steps based on the victim's needs through CRS staff.

These cases even reach the police level, one of which is domestic violence (KDRT), but ultimately face obstacles when reported due to two factors: the lack of citizenship status as refugees and the absence of a marriage certificate, even though the refugees have prepared other personal documents, such as birth certificates. This differs from cases involving foreign nationals (WNA) in Indonesia, for instance, because confirmation can be made with the embassy of the foreign national's country of origin, especially those with diplomatic relations with Indonesia, allowing language barriers to be bridged by the embassy.

However, in practice the characteristics of refugees are equated with those of foreign nationals (WNA) under the law due to the application of Law No. 6 of 2011 concerning Immigration, this can lead to legal incidents inconsistent with the special protection afforded to refugees. One such instance is the practice of deporting and repatriating refugees out of Indonesian territory, which inherently contradicts the principle of non-refoulement applicable in international law. This reason often becomes a factor in the difficulty of further handling their cases, as they have no country or authority responsible for them. In practice, refugees who violate these immigration provisions are eventually deported to countries where IOM has accommodation, such as the Philippines or Malaysia.

Beyond administrative matters, the police often lack interpreters or the budget to hire suitable ones to overcome language barriers. Ultimately, these formalistic issues become reasons for case discontinuation. This situation demonstrates that the police treat formal requirements as obstacles to following up on cases, which can ultimately harm refugee women who are victims. This will impede the pursuit of justice by refugee women victims;

therefore, the police should facilitate the needs of these women victims so that obstacles can be overcome.

Beyond that, in handling domestic violence (KDRT) and sexual violence (KS) cases, strengthening police capacity is urgent. This ensures they can implement relevant legislation and understand the specific circumstances of refugee women who are victims of violence. As seen in South Tangerang, the police frequently consult with the UPTD PPA (Technical Implementation Unit for Women and Child Protection) regarding the implementation of the Domestic Violence Law (UU PKDRT) and the Sexual Violence Crimes Law (UU TPKS).

4.4. Refugee Regulations Lacking a Gender Perspective

Presidential Regulation (Perpres) No. 125 of 2016 has provided a framework for handling refugees in Indonesia. This Perpres provides a legal basis for the protection of refugees in Indonesia. One significant change it brought about is that asylum seekers, who were initially placed in Immigration Detention Centres (Rudenim), are now relocated to shelters, allowing them to be facilitated and funded by IOM.

However, upon closer examination, this policy is very general and lacks a gender perspective. It doesn't yet include rights that accommodate gender equality, specifically for refugee women and girls. As seen in the provisions for obtaining basic rights, such as health, there are no stipulations regarding reproductive health, even though women's needs related to their reproductive functions are very different from men's. The only provision mentioning women's rights is in Article 27 (3), which states that refugees with special needs are: a. sick; b. pregnant; c. persons with disabilities; d. children; and e. elderly.

Our findings reveal the various challenges refugee women face, especially when experiencing violence, whether domestic (KDRT) or sexual (KS). These conditions necessitate more adequate handling, protection, and recovery. However, if policies governing refugees cannot accommodate women's specific needs, then the result is a neglect of refugee women's rights.

It's not just the Presidential Regulation (Perpres) in Indonesia; the 1951 Refugee Convention and its 1967 Protocol also do not explicitly state gender equality. This is clearly mentioned in CEDAW's General Recommendation No. 30 on Women in Conflict.

The provisions of the Convention prohibiting discrimination against women reinforce and complement the international legal protection regime for refugees and displaced and stateless women and girls in many settings, especially because explicit gender equality provisions are absent

from relevant international agreements, notably the 1951 Convention relating to the Status of Refugees and its 1967 Protocol.

Beyond improving refugee handling through better coordination and division of authority among relevant parties—including central and local governments and international organizations—Indonesia, as a state party to CEDAW, should incorporate a gender perspective into its refugee handling policies. This is crucial because many refugees are currently in, and will continue to arrive in, Indonesia, bringing with them various issues. Ensuring that refugee management operates within a human rights framework and a gender perspective is therefore essential.

4.5. State Responsibility

4.5.1. Application of Universal Law in Handling Refugees in Indonesia

Although Indonesia has not ratified the 1951 Refugee Convention, the handling of refugees cannot be separated from international agreements, which typically employ universal law. Given the reality that these refugees are within Indonesia's legal jurisdiction but cannot be subject to policies for Indonesian citizens (WNI), the application of universal law becomes imperative. Moreover, Indonesia has already ratified eight important International Conventions that can serve as a reference.

Globally, the push to ensure the international community participates in protecting refugee rights is based on recognized rights and principles. For instance, the right to seek asylum is acknowledged in Article 14 of the Universal Declaration of Human Rights and the 1951 UN Refugee Convention, which grants individuals the right to seek and enjoy asylum from persecution or serious threats. The 1951 UN Refugee Convention is used in the refugee status determination process, helping identify refugees who are entitled to international protection.

For refugees originating from conflict zones, the principle of non-refoulement is crucial. This principle prohibits the forced return of refugees to countries where they face risk, rooted in Article 33 (1) of the 1951 UN Refugee Convention, which affirms the human rights of refugees. When viewed through the lens of the Convention Against Torture (CAT), the principle of non-refoulement is intrinsically linked to the protection of human rights, offering individuals safeguards against actions that could threaten their safety or subject them to dehumanizing and degrading torture (human rights concerning the prohibition of torture or cruel, inhuman, or degrading treatment or punishment).

Beyond that, even without a direct link to a specific legal document, humanitarian principles—such as humanity, neutrality, impartiality, and independence—should serve as the ethical and actionable foundation for humanitarian organizations. Basing actions on existing rights and principles will provide legal legitimacy and protection in international efforts to safeguard refugees and uphold human rights in the context of displacement.

4.5.2. State Obligation to Prevent Violence Against Women (VAW) and Ill-treatment

Komnas Perempuan's monitoring has revealed instances of Violence Against Women (VAW), including sexual violence, and ill-treatment (cruel, inhuman, and degrading treatment). Even cases of domestic violence (KDRT) and sexual violence (KS) did not receive proper legal handling due to formal obstacles. The detention-like conditions in accommodations during the prolonged resettlement waiting period also indicate that the state has not prevented the occurrence of ill-treatment of refugees.

All the Conventions Indonesia has ratified mention the state party's responsibility to fulfil the rights of individuals within its jurisdiction. "Territorial jurisdiction" can be understood as the entire territory of Indonesia, meaning everyone within Indonesia's borders falls under this responsibility. Due diligence framework then is a crucial tool for ensuring state accountability in upholding its responsibility to respect, protect, and fulfil both human rights and the constitutional rights of its citizens. This responsibility covers all human rights violations, whether committed by state agents or private actors, in both the public and personal spheres.

To address the legal vacuum regarding the handling of Violence Against Women (VAW) and preventing ill-treatment of refugees, state parties should work to ensure the fulfilment of rights within their jurisdiction. One way to do this concerning refugees is through legislation to guarantee their rights. Revising Presidential Regulation No. 125 of 2016 must incorporate universal law and a gender perspective in refugee management. This will ensure the state upholds its obligation to prevent VAW and ill-treatment.

4.6. Refugee Situation in Indonesia in a Global Context

To date, Indonesia has not ratified the 1951 Convention Relating to the Status of Refugees and the 1967 Protocol Relating to the Status of Refugees. Consequently, Indonesia is not formally obligated to accept refugees entering its territory. Indonesia faces various challenges if it were to ratify the 1951 Refugee Convention, as several articles would be difficult to implement, particularly the obligation to fulfil refugee rights. Considerations especially

revolve around Articles 17 and 21 of the Convention, which cover the right to work and the right to housing.

As stipulated in Article 17, which concerns the right to engage in gainful employment, the requirements of this article obligate State Parties to the Convention to provide employment for refugees. Given that Indonesia still faces challenges with a high unemployment rate, this is considered too burdensome for the Indonesian Government. Furthermore, the per capita income of the Indonesian population is also deemed insufficient.

Indonesia is willing to temporarily host refugees on humanitarian grounds. This aligns with the provisions in the 1951 Convention that ask non-State Parties to adhere to the principle of non-refoulement, meaning not forcibly returning any asylum seekers to their country of origin. Compared to some other countries, Indonesia lacks a system for determining refugee status. Meanwhile, in Australia, forced returns occur if refugees threaten state sovereignty. In Thailand, refugees can apply to reside and settle.

Indonesian Government has granted authority to UNHCR to carry out its mandate for refugee protection and to address refugee issues in Indonesia. In addition to collaborating with the Indonesian Government, UNHCR and IOM also work with private entities and Non-Governmental Organizations (NGOs) in Indonesia for the management and funding of refugees. Nevertheless, the primary funding for refugees in Indonesia and the operational costs of UNHCR and IOM are sourced from donor countries.

The management of refugees is fundamentally a global issue that cannot be burdened on just one party. The concept of a state and its protection of its citizens becomes a critical issue; what's happening in Indonesia is a clear example of how difficult it is to untangle the problems that arise. The existence of states that fail to resolve conflicts and neglect the welfare of their citizens creates problems for other countries. However, the destination countries for refugees also have their own arguments, which cannot be interfered with by other parties, as they aim to provide welfare for their own citizens. Therefore, global cooperation is needed to address the issue of refugees and asylum seekers within a human rights framework and a gender perspective.

Chapter 5.

Conclusions and Recommendations

5.1. Conclusions

Presidential Regulation No. 125 of 2016 represents the Indonesian Government's effort to ensure the handling of refugees operates on humanitarian principles, even though Indonesia hasn't ratified the 1951 Convention. The management of refugees now has a legal basis for their protection. Asylum seekers are no longer placed in detention (*rudenim*) but have been moved to shelters in the form of accommodations facilitated and funded by IOM. However, the implementation process of this Presidential Regulation still faces many obstacles and has not yet made a significant impact. While the issuance of this Presidential Regulation is considered a step forward, the underlying technical regulations haven't addressed fundamental issues of the refugee crisis, such as employment.

Komnas Perempuan's findings show that refugees are still not allowed to work, making their daily needs highly dependent on service and aid providers such as UNHCR, JRS, and IOM. For self-settled refugees, the monthly assistance of IDR 1 to 1.5 million is not sufficient to cover their daily and monthly expenses, such as rent, especially for refugee households consist of many family members. Although the situation is different for refugees receiving IOM accommodation, with rental housing costs and facilities covered, the monthly pocket money is still insufficient to adequately meet their needs.

Other findings indicate that while refugees can access education and healthcare, this access isn't fully optimal. For serious illnesses, they can't immediately get assistance due to lengthy bureaucratic and administrative processes. Several refugee women were found

to experience various reproductive health issues, such as irregular menstruation, cysts, and child mortality during childbirth. Mental health problems are highly prominent due to prolonged depression. As for education, they don't receive graduation certificates upon completing certain levels. Consequently, they cannot access higher education.

Further findings pertain to the handling of gender-based violence (GBV). Several refugee women experienced GBV, such as sexual harassment or domestic violence (KDRT), which couldn't be easily resolved within their communities, let alone through legal channels. They faced numerous challenges, primarily due to their vulnerability as asylum seekers. Many refugee women reported being often hindered from reporting incidents due to intimidation from family or cultural taboos. Nearly all refugee women from Afghanistan stated they consider reporting their experienced violence as a family disgrace. They also didn't fully trust that the police could handle their cases swiftly. Unfortunately, the handling of gender-based violence is entirely absent from Presidential Regulation No. 125 of 2016.

Nevertheless, the good practices in handling domestic violence (KDRT) among refugee women, carried out by the Technical Implementation Unit for Women and Child Protection (UPTD PPA) South Tangerang with IOM's support, demonstrate the role local governments can play in addressing this issue. This can be a positive step for efforts in preventing and handling violence against women.

5.2. Recommendations

Based on the findings above, Komnas Perempuan recommends the following:

Central Government

- **Ministry of Foreign Affairs**
Ensure policies for handling refugees align with a human rights framework, incorporate a gender perspective, and refer to universal laws ratified by the Indonesian Government, such as CEDAW, CAT, and CRC.
- **Coordinating Ministry for Political, Legal, and Security Affairs (Kemenko Polkam)**
Develop clear policies to ensure programmes and budgets for the establishment and operational duties of the Refugee Task Force (Satgas PPLN), especially in areas with temporary shelters for refugees.
- **Ministry of Women's Empowerment and Child Protection (Kemen PPPA)**
Ensure integrated VAW handling services developed by relevant ministries/agencies also cover refugee and asylum-seeking women.

Local Governments

- Strive to ensure integrated VAW handling services available locally include refugee and asylum-seeking women, drawing from existing good practices in South Tangerang and Makassar.
- Work to ensure refugee children born within their jurisdiction can obtain the necessary birth certificates, usable as documents for their essential needs.
- Promote a harmonious environment free from discrimination and stigma against refugees in areas where refugee accommodations are located.

Civil Society Organizations

Coordinate and cooperate with the Government in efforts to prevent and handle gender-based violence (GBV) against refugee women.

IOM & UNHCR

- Reach agreements or MOUs with the Government to mainstream refugee and gender issues with relevant ministries and agencies and with human rights institutions like Witness and Victim Protection Agency (LPSK) for protection.
- Provide assistance for the implementation of refugee-based service standards.

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