



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

COMMUNICATION ON ENGAGEMENT

GERAKAN PEDULI DISABILITAS DAN LEPRO INDONESIA (GPDLI)

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GREETINGS dari **Gerakan Peduli Disabilitas dan Lepre Indonesia (GPDLI)** hadir di Indonesia sejak tahun 2009 yang merupakan kesepakatan yang dibangun dari 3 orang sahabat, dua orang mengalami kusta bersama teman dekat mereka berdua, Hermen, Amir dan Nuah. Pada Tanggal 15 Desember 2009 di Jakarta-Indonesia

Mereka dengan mantap bersepakat untuk membangun sebuah organisasi rakyat sipil yang berfokus pada bagaimana caranya menghilangkan stigma dan diskriminasi yang terjadi dalam hidup mereka secara pribadi, keluarga dan komunitasnya. Keberhasilan demi keberhasilan dicapai dengan gemilang, sehingga sampai dengan sekarang beribu ribu orang yang mengalami kusta, sudah kembali pulih dari pengasingan dirinya, kembali pada hidup yang biasa. Disamping itu kami juga berhasil menjembatani mereka yang terpinggirkan yaitu kaum disabilitas termasuk didalamnya orang-orang yang mengalami kusta, sungguh suatu prestasi yang sangat membanggakan.

Kami telah bekerja sama dengan ratusan lembaga dan individual, dari universitas, perusahaan swasta, BUMN, sekolah, lembaga sosial, kementerian kesehatan, kementerian kesehatan, kementerian dalam negeri dan luar negeri Republik Indonesia dan bahkan lembaga internasional seperti PBB, UN GLOBAL COMPACT, DPI, IDA, ADF, Japan, Korea, Australia, Amerika Serikat beserta lembaga-lembaga agama dan lain sebagainya. Namun tantangan masih sangat besar, apalagi dengan semakin menurunnya bantuan negara dan asing untuk organisasi sosial terlebih khusus yang berkecimpung dalam bidang kusta, atau hansen ini. Ruang lingkup kami berfokus pada pemberdayaan masyarakat khususnya disabilitas dan kusta, mereka adalah kelompok yang sangat dikucilkan didalam masyarakat kota bahkan di desa, diperlukan suatu konsistensi dan berkelanjutan, sehingga sesuai dengan semangat *SDG (Sustainable Development Goals)* yang baru dicanangkan beberapa waktu dekat yang lalu. Area penjelajahan kami dalam membangun masyarakat adalah DKI Jakarta, Jawa Barat, Banten, Jawa Timur dan Tengah serta Yogyakarta, Bali dan Sumatera Utara.

Resonansi pengaruh kami meluas sampai ke seluruh Indonesia dan bahkan dunia. Ribuan sukarelawan kami sudah bergerak dengan sangat konsisten dan tanpa henti, kedepan kami akan membuat semacam tempat pelatihan sederhana serta dekat dengan komunitas yang terpinggirkan, agar mudah dijangkau, sekitar Tangerang, Banten dan berbagai tempat di Indonesia. Kami akan terus melatih mereka agar dapat bekerja dengan baik di perusahaan-perusahaan yang besar dan memperhatikan disabilitas dan kusta dengan baik. Sesuai dengan amanat CRPD (*convention of the rights for people with disability*) and SD serta UU No 8 Penyandang Disabilitas tahun 2016 yang baru saja disahkan pemerintah dan DPR RI.

KETUA UMUM GPDLI

DR. IR. NUAH P. TARIGAN., MA



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GREETINGS from Disability and Leprosy Care Movement Indonesia (GPDLI) is present in Indonesia since 2009 which is a deal that is built from three friends, two people affected by leprosy with friends near them, Hermen, Amir and Nuah. As of December 15, 2009 in Jakarta, Indonesia

We firmly agreed to establish a civilian organization that focuses on how to eliminate the stigma and discrimination that occur in their lives personally, their families and communities. For the sake of the success achieved with resounding success, resulting in up to now thousands and thousands of people affected by leprosy, had recovered from her exile, returning to regular life. Besides, we also managed to bridge those marginalized that the disabilities which includes those people who have leprosy, indeed a very proud achievement.

We have teamed up with hundreds of institutions and individuals, from universities, private companies, state enterprises, schools, social agencies, the ministry of health, ministry of health, ministry of interior and abroad Republic of Indonesia and even international institutions like the United Nations, UN GLOBAL COMPACT, DPI, IDA, ADF, Japan, Korea, Australia, the United States and institutions of religion and so forth. But the challenges are still enormous, especially with the decline in foreign aid and the country's first specialized social organizations engaged in the field of leprosy, or Hansen's. The scope of our focus on community empowerment, especially disability and leprosy, they are the group most excluded in society cities and even in the villages, we need a consistent and sustainable, so that in accordance with the spirit of SDG (Sustainable Development Goals), which just launched sometime soon ago. Areas of our exploration in community building is DKI Jakarta, West Java, Banten, East and Central Java and Yogyakarta, Bali and North Sumatra.

Resonance our influence extends to over Indonesia and even the world. Thousands of volunteers we've moved very consistently and relentlessly, in the future we would make such a simple training as well as close to the marginalized communities, so easy to reach, around Tangerang, Banten and various places in Indonesia.

We will continuing train them to be able to work well in companies large and attention disabilities and leprosy well. In accordance with the mandate of the CRPD (the convention of the rights for people with disability) and the Disability Law No. 8 of 2016 recently passed the government and the Parliament. We are expressing continued support for the Global Compact A description of practical actions (i.e., disclosure of any relevant policies, procedures, activities).



CHAIRMAN - GPDLI

DR. IR. NUAH P. TARIGAN., MA



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Principles covered

Principle 1 - Businesses should support and respect the protection of internationally proclaimed human rights

GPDLI develop EQUAL RIGHT

ELIMINATION OF DISCRIMINATION AGAINST LEPROSY AFFECTED PERSONS AND THEIR FAMILY MEMBERS

Questionnaire for NON-GOVERNMENTAL ORGANIZATIONS

BACKGROUND

In its resolution A/HRC/29/5, the Human Rights Council requested the Advisory Committee to undertake a study which reviews the implementation of the Principles and Guidelines for the Elimination of Discrimination against Persons Affected by Leprosy and their Family Members, together with the obstacles thereto, and to submit a report containing practical suggestions for their wider dissemination and more effective implementation and to submit a report at its thirty-fifth session.

The resolution also requests the Advisory Committee, in its elaboration of the report, to take into account the views of Member States and as appropriate relevant international organizations, including the World Health Organization, the Office of the United Nations High Commissioner for Human Rights and relevant special procedures, national human rights institutions, and non-governmental organizations, as well as the work done on the issue by relevant United Nations bodies, specialized agencies, funds and programmes within their respective mandates.

In this context, the Advisory Committee decided, at its fifteenth session held in August 2015, to establish a drafting group in charge of the preparation of this study.¹ The purpose of this questionnaire is to collect information from non-governmental organizations in order to identify the current state of implementation of the Principles and guidelines for the elimination of discrimination against persons affected by leprosy

¹ A/HRC/AC/15/L.3



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and their family members (the Principles and Guidelines); how the Principles and Guidelines apply to different situations in different countries, especially the good practices that may be shared; and the major obstacles to implementation, including views on how best to further strengthen the implementation of the Principles and Guidelines.

1. Are you aware of the Principles and guidelines for the elimination of discrimination against persons affected by leprosy and their family members adopted by the United Nations General Assembly in December 2010 (resolution 65/215)? If yes, how did it come to your attention?

GPDLI: Ya kami mengetahui dengan sangat jelas Prinsip dan Guidelines tentang ini dengan baik, oleh karena itu dalam visi misi kami dengan sangat jelas memasukkan ini sebagai salah satu bagian GPDLI, bisa dilihat di http://www.pedulidisabilitas.org/?page_id=2

ENGLISH: GPDLI: Yes we know very clearly the Principles and Guidelines on this well, therefore in the vision of our mission very clearly include this as one part GPDLI, can be seen in http://www.pedulidisabilitas.org/?page_id=2

2. What mechanism has the Government (Federal or State level) put in place to disseminate the Principles and Guidelines to its citizens? e.g. translation into national and local languages; media; or any other mechanism?

GPDLI: Kami melihat ini belum maksimal dilaksanakan dengan baik dan inklusif, kami pernah mengirim surat kepada Bapak Presiden RI Bapak SBY dan Bapak Jokowi, selalu memberikan surat itu kembali ke Menkes, dan tanggapan Menkes pada kami tidak ada sama sekali, yang membalas hanya dari Kantor Menteri Sekneg, saat ini kami sedang membuat komunikasi pribadi dengan Kantor Kepresidenan, agar paling tidak ada tanggapan yang serius, apalagi dengan lembaga pemerintahan lain, semuanya belum memiliki pengetahuan yang jelas dan mendalam tentang kusta.KIE hanya dipakai sebagai alat politik belaka, kami sudah melakukan kerja kerja yang konsisten dan persisten untuk hal ini bekerja sama dengan universitas, lembaga social dlsb. Berhasil, namun belum memuaskan, seperti ke Gubernur DKI saat itu dan kini, dari Fauzi Bowo, Jokowi, dan Ahok. Juga beberapa Gubernur daerah lainnya di Indonesia.

ENGLISH: GPDLI: We see this not maximized properly implemented and inclusive, we had sent a letter to Mr. President Mr Yudhoyono (Former) and Mr Jokowi, always give the letter back to the Minister of Health, and the response Menkes us nothing



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at all, the reply only from the Office Minister of State Secretariat, at this time we are making a personal communication with the Office of the President, so that at least no serious response, especially with other government agencies, all of them do not yet have a clear and in-depth knowledge about kusta.KIE (EIC) only used as mere political tool, we've done working consistently and persistently working on this in cooperation with universities, social institutions etc. Successful, but not satisfactory, as the governor of the city then and now, of Fauzi Bowo, Jokowi and Ahok. Governor also some other areas in Indonesia.

3. Have any policies, action plans or any other measures been taken at the national level to promote awareness-raising of the issue of discrimination against leprosy affected persons and their family members? Please provide details on measures taken.

GPDLI: Kami belum melihat sama sekali, peran Kemenkes sebenarnya besar, namun kami tak pernah sekalipun diundang untuk masuk sebagai bagian stakeholders yang mereka bisa pakai, kami melihat masih adanya focus yang tidak merata tentang isu kusta, focus yg berhubungan dengan HUMAN RIGHTS issue, semuanya berfikir ini masalah kesehatan belaka dan isu hanya pada PENYEBAB KUSTA belaka dan bukan AKIBAT KUSTA dan seterusnya. Mereka juga harus mengundang seperti GPDLI, FARHAN dan lain sebagainya. Kami Siap berkolaborasi.

ENGLISH: GPDLI: We have not seen at all, the role of the Ministry of Health is actually big, but we never even invited to enter as part of stakeholders that they could use, we see still the focus of uneven on the issue of leprosy, focus on those related to the HUMAN RIGHTS issue, everything the mere thought of health problems and issues only the mere and not CAUSES RESULTING LEPROSY LEPROSY and so on. They should also invite such GPDLI, FARHAN and others. We are ready to collaborate.

4. What measures have been taken (Federal or State level) to modify, repeal or abolish discriminatory laws, policies or practices, including terminating forced segregation, in order to eliminate discrimination against persons affected by leprosy and their family members? Is freedom to choose where to live ensured for persons affected by leprosy and their family members?

GPDLI: GPDLI dan kelak FARHAN dan lain lain bekerja dengan sangat sistematis, akan tetapi pemerintah belum serius untuk hal ini, disabilitas saja tidak serius apalagi isu kusta, belum banyak yang bisa kita harapkan dari inisiatif mereka,



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namun kami tidak putus asa utk terus memberikan advokasi, yang sangat high profile, dengan tekanan pada isu isu tertentu, misalnya contoh kecil – Rumah Sakit Sitanala yang justru sering mendiskriminasi pasiennya dan kusta.

ENGLISH: GPDLI: GPDLI and later FARHAN (INDONESIA HANSEN REINTEGRATION FEDERATION) and others worked very systematic, but the government has not been serious in this case, disability alone is not seriously let alone the issue of leprosy, not much we can expect from their initiative, but we do not despair For continue advocating , a very high profile, with an emphasis on issues of particular issues, such as small sample - Hospital Sitanala INDONESIA in TANGERANG CITY which is often discriminate against patients and leprosy.

5. Which is the terminology originally used in your native language in respect of persons affected by leprosy? Please also provide, aside from the specific terminology in your native language, a translation of it in English. Are there any popular myths associated with persons affected by leprosy? Please provide a short description.

GPDLI: LEPRO pernah kita lakukan dan sampai sekarang, tanggapan cukup beragam namun masih belum mengangkat terlalu besar, kami melakukannya sejak 2006-2007, pada saat kami saat itu Pak Nuh Tarigan ikut mempelopori dan menjadi fasilitator dan bahkan pendiri YTLI, dan juga PerMaTa. Kata HANSEN sekarang kami pakai, banyak yang bingung, namun kami akan mencontoh beberapa lembaga di INDIA dan BRAZIL. Yang sangat berhasil.

ENGLISH: GPDLI leprosy we've ever done and until now, the responses are quite varied and still not lifting too large, we do since 2006-2007, when we then Mr. Nuh Tarin participate pioneered and became a facilitator and even founder YTLI, and also PerMaTa. HANSEN now we use the word, many are confused, but we will follow the example of some institutions in INDIA and BRAZIL. Which was very successful.

6. Are those affected by leprosy and their family members being consulted with and/or actively participating in the decision-making processes that deal with matters related to them?

GPDLI: di JAKARTA dan beberapa daerah di JAWA, SULAWESI, dlsb sudah mulai ok, namun banyak di daerah yang LOW ENDEMIC mereka makin di STIGMA dan DISKRIMINASI, kami ndak setuju dengan turunnya endemic suatu daerah maka stigma dan diskriminasi juga turun, sangat tidak setuju, mereka bahkan



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disingkirkan. Makanya FARHAN kami bentuk bersama sama lembaga KOMNAS HAM dan lain sebagainya.

ENGLISH: GPDLI: in Jakarta and some areas in Java, Sulawesi, etc. have started ok, but many in the region who LOW endemic them increasingly in STIGMA and DISCRIMINATION, we ndak agree with falling endemic region, the stigma and discrimination also fell, strongly disagree, they are even excluded. So FARHAN we form together institutions Human Rights Commission and others.

7. What measures have been taken at the national level to ensure persons affected by leprosy enjoy fully and equally rights with others regarding the rights of citizenship; obtaining identity documents; the right to vote; the right to stand for elections; the right to serve the public in any capacity or other civil and political rights?

GPDLI: GPDLI melihat bahwa belum ada tindakan yang jelas dari lembaga-lembaga sebelumnya yang katanya akan memberikan kontribusi secara nasional maupun kementerian kesehatan yang katanya jadi Patokan dalam isu kusta di Indonesia, PerMaTa hanya berjalan ditempat dan hanya focus pada daerahnya masing-masing yang sangat terbatas. Dan tidak membuka dirinya untuk berkolaborasi dengan siapa saja, semoga FARHAN akan menjadi pioneer disana. Harapan GPDLI. Selama ini GPDLI berkolaborasi dengan ALIANSI DISABILITAS secara nasional dan ikut dalam konteks advokasi disabilitas, sambil kita memasukkan agenda tentang kusta juga didalamnya dan bahkan ikut dalam proses PROLEGNAS RUU DISABILITAS sejak awal. Sehingga masukan CRPD seperti diatas juga sudah masuk isu tentang kusta. Bersyukur tentang hal ini, dan bahkan ikut sampai sekarang kedepan. Bisa dibaca: <http://www.dpr.go.id/prolegnas/index/id/26>

ENGLISH - GPDLI: GPDLI see that there has been no clear action from previous institutions which he said will contribute nationally and the health ministry which he so benchmark in the issue of leprosy in Indonesia, PerMaTa just running in place and only focus on their respective areas are very limited , And does not open himself to collaborate with anyone, FARHAN hopefully there will be a pioneer. GPDLI expectations. During this GPDLI ALLIANCE DISABILITIES collaborate with national and participate in disability advocacy context, as we enter the agenda of leprosy in it and even participate in the process PROLEGNAS (LEGISLATION PROGRAM of INDONESIA PARLIAMENT) DISABILITIES bill from the beginning. So that the input CRPD as above also have entered the issue of leprosy. Grateful about it, and even come to the fore now. Can be read: <http://www.dpr.go.id/prolegnas/index/id/26>



8. What measures have been taken to ensure persons affected by leprosy enjoy equal rights with others with regard to the rights to work and education; establishing a family; access to public places, including hotels, restaurants; and buses, taxis, trains and other forms of public transport; access to cultural and recreational facilities; access to places of worship or any other economic, social and cultural rights?

GPDLI: Dengan beberapa pelatihan CRPD yang telah diikuti oleh GPDLI – akan terus dipakai oleh GPDLI untuk masuk ke Arena Leprosy atau Kusta atau Hansen via FARHAN dan GPDLI secara langsung, khusus yang berhubungan dengan hak – hak yang khusus diatas, kami masih melihat masih banyak terjadi tindakan dari luar yang mengalami kusta, keluarga dan komunitasnya, dan bahkan dari diri sendiri yang mengalami kusta! Masih dibutuhkan NGO NGO Internasional memberikan dukungan pada organisasi akar rumput seperti kami di Indonesia.

ENGLISH: GPDLI: With some training CRPD which has been followed by GPDLI - will continue to be used by GPDLI to enter the Arena Leprosy or leprosy or Hansen via FARHAN and GPDLI directly, specifically relating to the right - the right specifically above, we still see much happening action from the outside who have leprosy, their families and communities, and even of self leprosy! Still needed NGO International NGO providing support to grassroots organizations like us in Indonesia.

9. What actions have been taken to promote and protect the human rights of (a) women; (b) children; (c) the elderly; (d) members of other vulnerable groups who have or have had leprosy, as well as their family members? Please provide details.

GPDLI: Kami tentunya sudah memiliki pengalaman di lapangan untuk hal ini, bahkan dari lingkungan yang sangat sempit seperti Kampung Kusta SITANALA, di Tangerang dan DKI Jakarta dlsb, disamping yang di Sumatera Utara, Surabaya, dlsb. Mengadvokasinya ke Kementerian, dan bahkan dimasukkan dalam rangkaian wawancara baik di media massa seperti koran koran nasional dan TVnya seperti Kompas Gramedia/ Tribun, MetroTV, dlsb bahkan sampai kami bekerja sama dengan beberapa program CSR kampus, perusahaan dalam membangun komunikasi, edukasi dan pengetahuan tentang kusta di Jabodetabek, Banten, Jabar dlsb. Memakai pendekatan above the line, below the line, dan sifatnya high profile dan low profile, termasuk ke Gubernur, Presiden dan Menteri serta masyarakat umum.



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ENGLISH: GPDLI: We must have had experience in the field for this, even from a very narrow environment such as Kampung Leprosy Sitanala, in Tangerang and Jakarta etc., in addition to that in North Sumatra, Surabaya, etc. Advocating to the Ministry, and even put in a series of interviews both in the mass media such as newspapers national newspapers and TVnya like Kompas Gramedia / Tribune, Metro, etc. even until we cooperate with several CSR programs campus, the company in establishing communication, education and knowledge of leprosy in Greater Jakarta, Banten, West Java etc. Wearing approach above the line, below the line, and its high profile and low profile, including the Governor, the President and the Minister as well as the general public.

10. What actions have been taken at the national level with regard to discriminatory, labelling and offensive languages directed at leprosy affected persons?

GPDLI: dengan pendekatan advokasi kreatif, menghindari pendekatan yang agresif, namun tetap menjalankan secara ASERTIF dan terbuka, tanpa mengurangi atau menghabisi HAK orang lain untuk membela juga, pendekatan yang sifatnya negosiasi dan edukasi, suatu pemikiran yang sudah kami bawa sejak peristiwa pelecehan terhadap rapat tentang kusta sejak 2007 di Makassar, dimana Pak Nuah Tarigan saat itu mengatakan via telepon bahwa kita tidak boleh membalas dengan kasar mereka yang telah melabel dan bullying di sebuah hotel di Makassar, bahkan akhirnya cerita nya menjadi cerita yang happy ending. Baik bagi komunitas kusta di Sulawesi Selatan, dan bahkan Indonesia secara umum, bayangkan kalau saat itu dibalas dengan kejahatan dan tindakan ofensif juga – akan membawa runyam semuanya, dan akhirnya ada cap di masyarakat secara negative. Bersyukur itu tidak terjadi.

ENGLISH: GPDLI: the advocacy approach creatively, avoiding an aggressive approach, but still run Assertive and openly, without reducing or eliminate RIGHTS others to defend well, approaches that are negotiated and education, an idea we've brought since the harassment of the meeting on leprosy since 2007 in Makassar, where Mr. Nuah Tarigan said via telephone at the time that we should not retaliate harshly those who have been labeled and bullying in a hotel in Makassar, even the end of his story into a story a happy ending. Good for leprosy community in South Sulawesi, and even Indonesia in general, imagine that when it met with evil and offensive action as well - will bring everything worse, and finally there is a stamp in the community negatively. Thankful it did not happen.



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11. Have Governments drafted and/or adopted a national action plan to implement the Principles and Guidelines? Please attach a copy. Has a national committee been established? Please provide some details as to its mandate, size and composition of members.

GPDLI: Dua tahun yang lalu kami kira bersama KOMNAS HAM dan SASAKAWA dl sb sudah memberikan masukan itu di Hotel Sahid Jaya Jakarta, kami juga ikut disana, dalam acara yang cukup megah, namun sampai sekarang PerMaTa kebanyakan tidak terarah kerjanya sampai ke akar rumput, dan mereka tidak membagikannya kepada CSO CSO yang lain termasuk DPO. GPDLI juga sangat heran atas kejadian itu, makanya KOMNAS HAM akhirnya berpaling.

ENGLISH: GPDLI: Two years ago we were celebrating World Leprosy Day together with National Human Rights Commission and the Sasakawa etc. GPDLI already provide such inputs at Hotel Sahid Jaya Jakarta, we were also there, in the event that quite magnificent, but until now PerMaTa mostly directed her to the grass roots, and they do not share it with others, including the CSOs DPO. GPDLI also very surprised at the situation and condition of them, hence the Human Rights Commission finally turned.

12. What major obstacles, if any, have Governments faced in implementing the Principles and Guidelines for the elimination of discrimination against persons affected by leprosy and their family members?

GPDLI: Menurut kami kesadaran inklusif tentang disabilitas belum jalan, apalagi yang berhubungan dengan isu kusta, kementerian social yang cukup perhatian dan kami sangat menghargainya, namun kemenkes makin lama kami melihat makin tak jelas arahnya dalam kasus kasus kusta yang ada, keterkaitan yang berhubungan dengan BPJS atau Asuransi kesehatan saja, sangat mendiskriminasi kusta itu sendiri, bahkan lebih terasa stigma dan diskriminasi di Rumah sakit yang dulu adalah rumah sakit kusta bila dibandingkan dengan rumah sakit umum biasa! Sungguh sangat menyedihkan. Kelihatanya tidak cukup hanya kata kata manis belaka, harus ada tindakan yang jelas dan terbuka infonya. Kami sudah mencatat ini dan mengadvokasinya berkali kali.

ENGLISH: GPDLI: According to our realization inclusive of disability is not the way, let alone dealing with the issue of leprosy, the ministry of social considerable attention, and we appreciate it very much, but the Ministry of Health the longer we



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see less and less clear directions in the case of leprosy cases that exist, linkages associated with BPJS or health insurance only, very discriminating leprosy itself, even more pronounced stigma and discrimination at the hospital which was once the leprosy hospital when compared with regular public hospitals! It is very sad. Not enough just seems pretty sweet mere words, there must be a clear action and open the information. We have noted this and advocating repeatedly.

13. In your view, what follow-up mechanisms should be put in place at the national and international levels to effectively implement the Principles and Guidelines?

GPDLI: Perlu ada **KELOMPOK KERJA** kecil saja dahulu yang di fasilitas oleh **Kemenkes dan Kemensos**, dan yang paling bagus juag **BAPPENAS**, karena ini menyangkut banyak hal, kami akan memberika secara detail jika **GPDLI** diundang untuk masuk didalam **WORKING GROUPS** itu jangan hanya dengan pendekatan **dokter pasien yang masih saja terus dikembangkan oleh Kemenkes**.

ENGLISH: **GPDLI:** There needs to be **WORKING GROUP** small advance which at the facility by the Ministry of Health and Ministry of Social Affairs, and the most good juag **BAPPENAS**, because it involves a lot of things, we will give employees in detail if **GPDLI** invited to enter inside **WORKING GROUPS** it not only with the approach of the patient's physician which is still being developed by the Ministry of Health.

14. Are there any concrete measures taken by Governments at different levels that you can share with us regarding actions taken to eliminate discrimination against leprosy affected persons and their family members in your country?

GPDLI: Program **RAN** seperti yang di **Kemensos**, masih sangat minim dan bahkan makin hancur, setelah program **Leprosy Control** tidak ada lagi, bahkan dana itu juga ndak seperti 10 tahun yang lalu, pertemuan pertemuan koordinasi **ANEK dan ADEK** yang luas juga sudah makin menghilang, tidak tahu apakah karena dana dari luar tidak ada lagi, atau tak jelas lagi motivasinya. Kami mengira bahwa mungkin tentang **Human Rights based** saat ini pada kusta sudah tidak jelas lagi di agenda **Kemenkes**, sedangkan di **Kemensos** masih relevan, mungkin pendekatan **CBR** yang dilakukan saat ini harus dengan pendekatan **social approach** bukan lagi dengan pendekatan **dokter-pasien**, memang secara **statement** sudah ada, namun dari tindakannya masih belum berubah.

ENGLISH: **GPDLI:** Program **RAN (NATIONAL ACTION PLAN)** as in the Ministry of Social Affairs, is still very minimal and even more destroyed, after the program



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Leprosy Control does not exist anymore, even funds also ndak like 10 years ago, meeting coordination meeting ANEK and adek wide has also been increasingly disappear, not know whether because of outside funding no longer exists, or is not clear anymore motivation. We thought that perhaps on Human Rights based this time on leprosy is no longer clear in the agenda of the Ministry of Health, while the Ministry of Social Affairs is still relevant, may approach CBR done today should approach social approach is no longer with the approach of the doctor-patient, it is a statement already No, but of action have not changed.

15. Please provide identified cases of discrimination experienced by leprosy affected persons and their family members in your country, disaggregated by its different forms, including de facto discrimination.

GPDLI: kasus diskriminasi pelayanan kesehatan d RS KUSTA termasuk SITANALA, juga beberapa kampung kampung kusta di Sumatera yang sangat didiskriminasi oleh masyarakat sekitarnya, bahkan Pak Samsul yang notabene anaknya sekolah disekitar kampung kusta, tidak diterima bersekolah di lokasi itu, mereka harus jauh bersekolah dan tidak dapat berjalan kaki, mereka semua sangat tertekan perasaan, dan minta bantuan. Dan masih banyak lagi yang lainnya, bahkan didaerah yang tingkat eliminasi yang sudah ok menurut WHO, namun malah kasus stigma dan diskriminasi nya sangat besar !!!

ENGLISH: GPDLI: discrimination cases health care in previous LEPROSY hospital including Sitanala, also some kampongs leprosy in Sumatra are highly discriminated against by the surrounding community, even Mr. Samsul (a people affected by leprosy from Aceh) who incidentally his children's school around the village leprosy, was not accepted in school at that location, they should be attended school quite far from his current place, they were all very depressed feelings, and ask for help. And still many others, even in regions where the level of elimination is ok according to the WHO, but even cases of stigma and discrimination is very strong !!!

Deadline for submission of responses:

All parties are encouraged to submit their responses via email or fax as soon as possible but no later than **30 December 2015** to:

hrcadvisorycommittee@ohchr.org

[Subject: HRCAC Elimination of discrimination against persons affected by leprosy]



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or

Secretariat of the Human Rights Council Advisory Committee
Attn. Ms. Dina Rossbacher
Office of the United Nations High Commissioner for Human Rights
CH-1211 Geneva 10, Switzerland

Fax: +41 22 917 9011

Thank you in advance for your contribution.

For more information about the Advisory Committee, please visit
<http://www.ohchr.org/EN/HRBodies/HRC/AdvisoryCommittee/Pages/HRCACIndex.aspx>



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Principle 2 - Make sure that they are not complicit in human rights abuses

GPDLI:



Working Together with KOMNAS HAM





Bahkan dengan support dari Komnas HAM, dan tentunya sebagian kecil dari DRF maka hasil pertemuan kami dengan beberapa stakeholders dan Komnas HAM, dan tentunya 4 kampung kusta di Sumatera Utara dan beberapa hal yang berhubungan dengan pencanangan atau deklarasinya FARHAN atau FEDERASI RE-INTEGRASI HANSEN INDONESIA yang akan menaungi semua organisasi kusta di Indonesia (bisa di baca secara detail di www.pedulidisabilitas.org). Ketua nya dipimpin oleh Pak Hermen M Hutabarat (yang juga Ketua GPDLI), Sekretaris : Binti Chofifah (Mahasiswa S2 Public Health UI, mengalami kusta – asal



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Trenggalek, Jawa Timur pemimpin komunitas kusta perempuan), dan Bendahara: Ali Saidy (sesepuh kusta dan pemimpin masyarakat di Tangerang, asal Aceh). Kami sudah menyampaikan ke PerMata dan juga tim yang lain di masyarakat baik Indonesia Timur dan Tengah namun mereka belum dapat hadir dalam waktu dekat ini dan tidak ada dana sama sekali. 3 orang peserta dari kampung kusta dari Medan hadir. Baca di <http://nasional.news.viva.co.id/news/read/710010-komnas-ham--jangan-diskriminasi-penderita-kusta> dlsb.

Even with the support of the National Human Rights Commission, and of course a small portion of the DRF, the results of our meeting with several stakeholders and the Commission, and of course the four villages of leprosy in North Sumatra and some matters relating to the declaration or declarations FARHAN or FEDERATION OF RE-INTEGRATION HANSEN INDONESIA the would overshadow all the organization of leprosy in Indonesia (can be read in detail in www.pedulidisabilitas.org). His chairman led by Mr. Hermen M Hutabarat (who is also Chairman GPDLI), Secretary: Binti Chofifah (Student S2 Public Health UI, leprosy - from Trenggalek, East Java community leader leprosy women), and Treasurer: Ali Saidy (elders leprosy and leaders people in Tangerang, from Aceh). We have said to the Jewel and also the other teams in the community both Indonesia and the Middle East, but they have not been able to present in the near future and there is no funding at all. 3 participants from leprosy village of Medan present. Read on <http://nasional.news.viva.co.id/news/read/710010-komnas-ham--jangan-diskriminasi-penderita-kusta> etc.





Berita baik lagi adalah akan dibuka dan saat ini sedang proses pembukaan kantor cabang GPDLI Sumatera Utara yang berkantor di Medan, dengan Pemimpinnya adalah pak Ir Surya Christian Ginting (DIGAMBAR: pak Surya disebelah kiri yang memakai baju kaos orange dan jaket krem) , seorang Arsitek yang mengalami lumpuh pada kedua kakinya karena polio sejak kecil, namun hidup dengan mandiri menjadi arsitek di sumatera utara setelah tamat dari UGM – kebetulan menjadi partner di komunitas sejak awal dengan tim GPDLI pak Nuah Tarigan, bahkan sejak mahasiswa banyak memberi pemberdayaan pada beliau.

Beliau akan kerja sama dengan komunitas kampung kusta di lau Simomo, dan juga tempat lain, termasuk penjangkauan ke Aceh dan sekitarnya, karena banyak yang memiliki kusta juga adalah berasal dari Aceh bahkan mencapai lebih 50 persen dari komunitas kusta di Sumatera Utara. Beliau akan mengirim LOI juga bersamaan dengan GPDLI pusat.

Dibawah ini adalah Foto bersama dengan Jokowi di istana negara pada waktu hari DISABILITAS tanggal 3 Desember yang lalu, salah satu tim GPDLI yaitu pak Nuah dan pak Hermen adalah panitia khususnya pak Nuah yang berhubungan langsung dengan pihak Istana sejak awal, untuk acara ini, hasilnya ada beberapa pokok pemikiran yang akan dibawa oleh pak Jokowi untuk tindakan selanjutnya utk CRPD dan kesejahteraan komunitas disabilitas dan kusta di INDONESIA.

Adapun hal yang perlu kami sampaikan yang berhubungan dengan FARHAN adalah sebagai berikut, dokumentasi ini kami sampaikan dalam bentuk aslinya, dan inti deklarasi, sangat relevan dan sebangun dengan hasil pelatihan yang kami lakukan di WISMA PGI tahun ini dengan

The good news again is going to be opened and currently the process of opening a branch office GPDLI North Sumatra based in Medan, the leader is a pack of Ir Surya Christian Ginting (pictured: pack Surya on the left is wearing a T-shirt orange and cream jacket), an architect paralyzed in both legs due to polio since childhood, but living independently be an architect in northern Sumatra after graduating from UGM - happens to be a partner in the community since the beginning of the team GPDLI pack Nuah Tarigan, even since many students give empowerment to him.

He will work closely with village communities in lau Simomo leprosy, and also elsewhere, including outreach to Aceh and surrounding areas, as many who have leprosy are from Aceh even reach over 50 percent of the leprosy communities in North Sumatra. He will send the LOI is also in conjunction with GPDLI center.



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Below are photos with Jokowi in state court on time of day DISABILITIES December 3 last, one of the teams GPDLI that pack Nuah and pack Hermen is the committee particularly pack Nuah that relate directly to the palace from the beginning, for this event, the results are there some basic ideas that will be taken by Mr. Jokowi for further action for CRPD and community kesejahteraan disabilities and leprosy in INDONESIA.

The thing that I wanted to dealing with FARHAN is as follows, this documentation we submit in its original form, and the core of the declaration, highly relevant and congruent with the results of the training we did in WISMA PGI this year with

DEKLARASI FEDERASI RE-INTEGRASI HANSEN INDONESIA (FARHAN)

1. Penghapusan Stigma dan Diskriminasi terhadap orang yang pernah mengalami kusta
2. Pemerintah (Eksekutif, Legislatif, Yudikatif) Nasional/Daerah harus memperhatikan orang yang pernah mengalami kusta lebih baik lagi dengan memberikan akses yang terbuka, akurat, transparan dan responsif dalam segala aspek dan melibatkan disetiap proses perencanaan, penyusunan dan pengawasan program pemerintah.
3. Pemerintah harus bisa menciptakan lapangan pekerjaan, memperbaiki pelayanan kesehatan dasar, pendidikan, sosial dan penghidupan, serta pelatihan kerja dan keterampilan bagi orang yang mengalami kusta, keluarga dan komunitasnya.

Deklarasi ini ditandatangani oleh :

1. Ari Yatmo :
2. Binti Khofifah :
3. Dorhan Marbun :
4. Hermen M. Hutabarat :
5. Ma'ani :
6. M. Ali Haji Saisy :
7. Misnan :
8. M. Yusuf S :
9. Nuah P. Tarigan :
10. Samsu :
11. Sri Wahyuningsih :
12. Togar Hutabarat :

Jakarta, 10 Desember 2015

Mengetahui - Special Rapporteur untuk Panyandang Disabilitas

Komisi Hak Asasi Manusi

Nur Kholis

Dr. Ansori Sinungan

DECLARATION OF FEDERATION OF RE-INTEGRATION HANSEN INDONESIA (FARHAN)

1. *Elimination of stigma and discrimination against people affected by leprosy*
2. *Government (Executive, Legislative, Judicial) National / Regional should pay attention to people who have had leprosy better by providing open access, accurate, transparent and responsive in all aspects and involved in every process of planning, preparation and supervision of government programs.*



GERAKAN PEDULI DISABILITAS & LEPROSY INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

3. The government should be able to create jobs, improve basic health services, education, social and livelihood, as well as job training and skills for people suffering from leprosy, their families and communities.

This declaration was signed by:

1. Ari Yatmo:

2. Bint Khoffifah:

3. Dorhan Marbun:

4. Hermen M. Hutabarat:

5. Ma'ani:

6. M. Ali Haji Saidy:

7. Misnan:

8. M. Yusuf S:

9. Nuah P. Tarigan

10. Samsu:

11. Sri Wahyuningsih:

12. Togar Hutabarat

Jakarta, December 10, 2015

Knowing - Special Rapporteur on People with Disability

Human Rights Commission

Nur Kholis Dr. Ansori Sinungan



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Principle 3 - Businesses should uphold freedom of association & effective recognition of the right to collective bargaining

JIKA SAYA TERJANGKIT KUSTA APAKAH ANDA MASIH MAU BERSAHABAT DENGAN SAYA?

IF I WERE AFFECTED BY LEPROSY, ARE YOU STILL ACCEPT ME AS YOUR TRULY FRIEND?
INESH PUTRI TIPTA RACHANDRA - Miss Indonesia 2012

KUSTA MENIMBULKAN STIGMA DAN DISKRIMINASI.
Mari kita hilangkan situasi ini dengan membangun pribadi - keluarga - komunitas - masyarakat yang mengalami kusta dengan pemberdayaan yang berkelanjutan.
LEPROSY lead to stigma and discrimination - Let's get rid of this situation by building personal - family - community - people who have leprosy with sustainable empowerment.

Kami membangun Jembatannya:
This bridge we built:
GERAKAN PEDULI DISABILITAS DAN LEPRO INDONESIA (GPDLI)
Indonesia Leprosy and Disability Care Movement
www.pedulidisabilitas.org
e-mail : perkumpulanGPDLI@gmail.com

Donasi dapat disalurkan:
Donations can be submitted:
PANIN BANK KCU BEKASI SQUARE, Pekayori, BEKASI - JAWA BARAT
dengan nama :
with the name:
PERKUMPULAN GERAKAN PEDULI DISABILITAS DAN LEPRO INDONESIA (GPDLI)
No. ACCOUNT 9165002269



GPDLI launching a TAXI labelled NO STIGMA AND DISCRIMINATION for PEOPLE AFFECTED BY LEPROSY - with MISS INDONESIA 2012 - Ms Inesh Putri from BALI.



Working together with PEMDA KABUPATEN TANGERANG and facilitating them a advocacy training on CRPD and UU DISABILITAS and empowerment.





GERAKAN PEDULI DISABILITAS & LEPRO Indonesia

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GERAKAN PEDULI DISABILITAS & LEPRO Indonesia

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT





GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

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Meeting with Disability Organizations and various communities in JABOTABEK - nice meeting.



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Principle 4 - The elimination of all forms of forced and compulsory labour



We do not have Children STAFFS



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Various meeting - invitations from Japan and many meetings with community and internal meeting at GREENHUB JAKARTA - GPDLI headquarter there.





GERAKAN PEDULI DISABILITAS & LEPROS INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

GPDLI Meeting at GREENHUB - meeting on an organization and planning for 2017.



Pak Hermen Hutabarat at TOKYO JAPAN after the meeting back to JAKARTA.



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Principle 5 - The effective abolition of child labour



Pak Hermen with his grandchildren, wonderful moment.

We supported Children, especially the Children who living with their Parents who has affected by leprosy.



GERAKAN PEDULI DISABILITAS & LEPROSIA INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Principle 6 - Eliminate discrimination in respect of employment and occupation



Working together with AICHR – LEGISLATIVE – FARHAN etc.



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Just because i used wheelchair, doesn't mean i can't fly!!!
So the next time you don't know how to assist passengers
with disabilities, ASK ME!

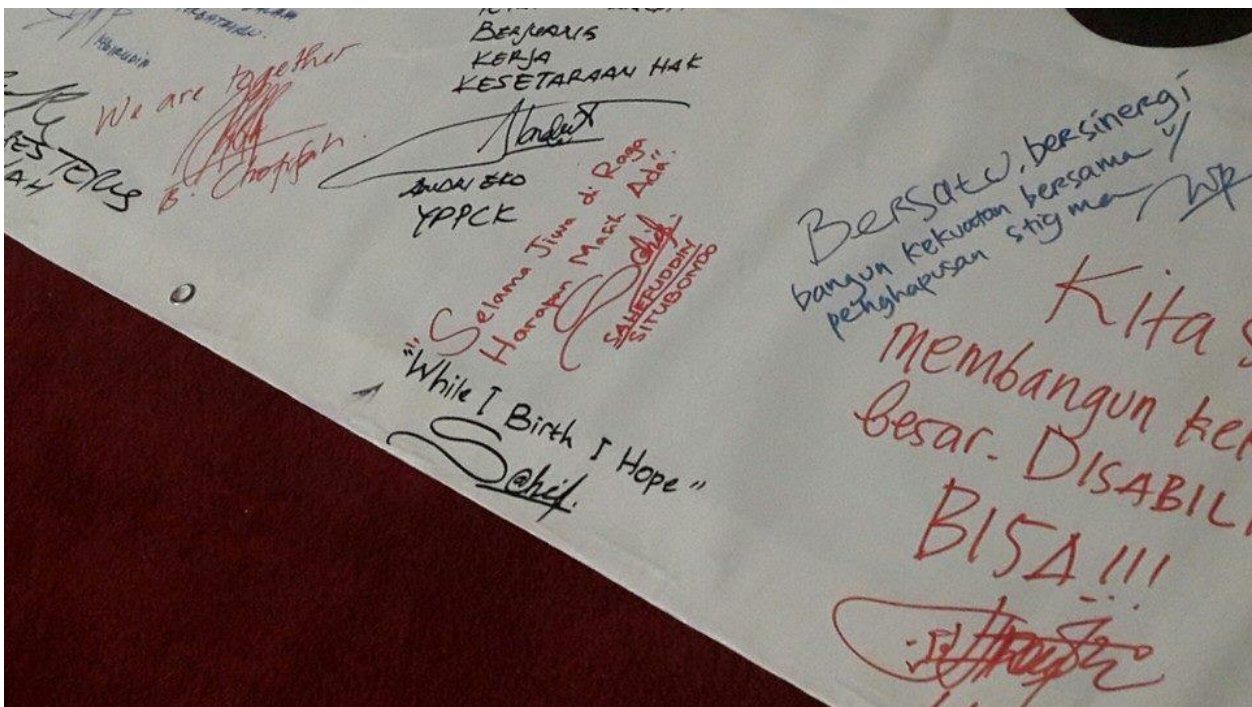
Don't you just turn around and leave me on the ground!

#shameonyouEtihad

(Dwi Ariyani, 3 april 2016)



Working with many friends and team



YOSSA from KOMNAS HAM help us (GPDLI) to facilitating on Article 28 with various disability organizations and people in BALI, EAST JAVA, and many other areas.



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Principle 7 - Businesses should support a precautionary approach to environmental challenges



Same as above.



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- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT





GERAKAN PEDULI DISABILITAS & LEPROSY INDONESIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

RESOLUSI BALI 2/16

1. Penghapusan Stigma dan Diskriminasi terhadap orang yang pernah mengalami kusta.
2. Pemerintah (Eksekutif, Legislatif, Yudikatif) Nasional/Daerah harus memperhatikan orang yang pernah mengalami kusta lebih baik lagi dengan memberikan akses yg terbuka, akurat, transparan dan responsif dalam segala aspek dan melibatkan disetiap proses perencanaan, penyusunan dan pengawasan program pemerintah **KHUSUSNYA PADA ISU ISU YANG BERHUBUNGAN DENGAN KESEHATAN yang holistik dan, PEMUKIMAN KUSTA, PENDIDIKAN-PEMBERDAYAAN-AKSESIBEL**
3. Pemerintah harus bisa menciptakan lapangan pekerjaan, memperbaiki pelayanan kesehatan dasar, pendidikan, sosial dan penghidupan, serta pelatihan kerja dan ketrampilan bagi orang yang mengalami kusta, keluarga dan komunitasnya.

Draft disusun berdasarkan draft yang pernah didiskusikan di lembaga FARHAN bersama tim kecil dan KOMNAS HAM. Subpoint Pembahasan sbb:

1. Penghapusan Stigma dan Diskriminasi terhadap orang yang pernah mengalami kusta.
 - a. Pemerintah mendorong dinas terkait, swasta dan masyarakat untuk melakukan kampanye pemahaman publik terkait kusta.
 - b. Adanya media KIA untuk sosialisasi penghapusan stigma dan diskriminasi terhadap kusta.
 - c. Pemerintah mendorong dan memfasilitasi pembuatan kurikulum di sekolah yang memasukkan muatan materi kusta secara mendidik dan benar.
2. Pemerintah (Eksekutif, Legislatif, Yudikatif) Nasional/Daerah harus memperhatikan orang yang pernah mengalami kusta lebih baik lagi dengan memberikan akses yg terbuka, akurat, transparan dan responsif dalam segala aspek dan melibatkan disetiap proses perencanaan, penyusunan dan pengawasan program pemerintah.
 - a. Pemerintah mendorong dan memfasilitasi adanya Perda khusus terkait permasalahan-permasalahan sesuai kebutuhan orang yang pernah mengalami kusta
 - b. Pemerintah mendorong dan memfasilitasi partisipasi aktif dari orang yang pernah mengalami kusta dalam perencanaan, penyusunan dan pengawasan program pemerintah dari tingkat RT, RW, desa kecamatan, kabupaten/kota, provinsi dan level nasional.
 - c. Program mendorong dan memfasilitasi program pemberdayaan orang yang pernah mengalami kusta menjadi bagian tak terpisahkan dari program desa
3. Pemerintah harus bisa menciptakan lapangan pekerjaan, memperbaiki pelayanan kesehatan dasar, pendidikan, sosial dan penghidupan, serta pelatihan kerja dan ketrampilan bagi orang yang mengalami kusta, keluarga dan komunitasnya.
 - a. Pemerintah mendorong dan menyediakan pelatihan kerja bagi orang yang pernah mengalami kusta di Balai Latihan Kerja tanpa adanya diskriminasi
 - b. Adanya Jaminan Khusus (Jamkesus) bagi orang yang pernah mengalami kusta yang benar-benar memerlukan.



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- c. Pemerintah menyediakan akses informasi dan kepada pelayanan khusus pendidikan misalnya pemberian beasiswa bagi orang yang pernah mengalami kusta yang mempunyai prestasi membanggakan.
- d. Pemerintah menyediakan akses layanan pemukiman yang layak bagi orang yang pernah mengalami kusta yang bersedia berpindah dari perkampungan kusta khusus ke masyarakat umum dengan jaminan keamanan dan kenyamanan tanpa stigma dan diskriminasi.

Pemerintah mendorong sector swasta untuk memberikan pelatihan interpreneurship dan permodalah bagi orang yang pernah mengalami kusta agar dapat mandiri

BALI RESOLUTION 2/16

1. Elimination of stigma and discrimination against people affected by leprosy.

2. Government (Executive, Legislative, Judicial) National / Regional should pay attention to people who have had leprosy even better by giving access to an open, accurate, transparent and responsive in all aspects and involved in every process of planning, preparation and supervision of government programs ESPECIALLY IN ISSUES RELATED TO HEALTH holistic dam, SETTLEMENT LEPROSY, EDUCATION-EMPOWERMENT-accessible

3. The government should be able to create jobs, improve basic health services, education, social and livelihood, as well as job training and skills for people suffering from leprosy, their families and communities.

The draft is based on a draft that was discussed at the institution FARHAN together a small team and a National Human Rights Commission. Sub-point Discussion follows:

1. Elimination of stigma and discrimination against people affected by leprosy.

a. The Government encourages the relevant agencies, private and public to campaign for public understanding associated with leprosy.

b. KIA for their media socialization elimination of stigma and discrimination against leprosy.

c. Government to encourage and facilitate the creation of school curriculum which includes a charge of material leprosy educate and correct.

2. Government (Executive, Legislative, Judicial) National / Regional should pay attention to people who have had leprosy even better by giving access to an open, accurate, transparent and responsive in all aspects and involved in every process of planning, preparation and supervision of government programs.

a. The government encourages and facilitates the special legislation related problems according to the needs of people affected by leprosy

b. The government encourages and facilitates the active participation of people affected by leprosy in the planning, preparation and supervision of government programs of the RT, RW, village, district / municipal, provincial and national level.



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- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

c. Program to encourage and facilitate the empowerment of people affected by leprosy became an integral part of the village program

3. The government should be able to create jobs, improve basic health services, education, social and livelihood, as well as job training and skills for people suffering from leprosy, their families and communities.

a. Government to encourage and provide job training for people who have had leprosy at the Training Center without discrimination

b. Their Special Guarantee (Jamkesmas) for people who have had leprosy that truly require.

c. The government provides information and access to special education services such as providing scholarships for people affected by leprosy who have a proud achievement.

d. The government provides access adequate housing services for people affected by leprosy who are willing to move from special leprosy colony to the public with security and comfort without stigma and discrimination.

The government encourages the private sector to provide training and per inter-preneurship capitalization for people affected by leprosy to be independent



GERAKAN PEDULI DISABILITAS & LEPROSIA

- INDONESIA LEPROSY AND DISABILITY CARE MOVEMENT

Principle 8 - Undertake initiatives to promote greater environmental responsibility



Pak Hermen very happy with MYANMAR TEAM who meet with us at Tokyo Japan. (WE WERE INVITED and we did not use anything from DRF Fund



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

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Principle 9 - Encourage the development and diffusion of environmentally friendly technologies



Working together with various political parties, develop understandings on CRPD and Leprosy

1. We are elected on of Disability organization at THE ZERO PROJECT - <http://zeroproject.org/report/gpdli-gerakan-peduli-disabilitas-dan-lepra-indonesia-indonesia-leprosy-on-3-urban-transport-system/>
2. Indonesia Civil Society Coalition for ASEAN Community Condemns the Government of Malaysia on Deportation of Mugiyanto Sipin - <http://www.apnfs.info/indonesia-civil-society-coalition-for-asean-community-condemns-the-government-of-malaysia-on-deportation-of-mugiyanto-sipin.html>
3. YUK B UANG SAMPAH TFI BINUS UNIVERSITAS <http://www.teachforindonesia.org/gerakan-yuk-buang-sampah-pada-tempatnya/>
4. INDONESIA CITIZEN SUMMIT (ICS) DI UNIVERSITAS INDONESIA <http://kreatorator.org/ics2015/downloads/BookletAcaraICS.pdf>
5. GPDLI at JAPAN : http://www.dinf.ne.jp/doc/english/world/20160901cbr_en/bun04a6en.html



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6. GPDLI at SITANALA

http://www.rujiyanto.com/2013/11/sitanala-project_25.html

7 NLR INDONESIA and GPDLI

<http://nlrindonesia.org/wp-content/uploads/2015/09/03.-PROFIL-ORGANISASI-GPDLI.pdf>

8 <http://www.pedulidisabilitas.org/?p=969>



Interviewed by TV KOMPAS on WHEEL CHAIR- disability and leprosy Thanks for media act.



GERAKAN PEDULI DISABILITAS & LEPRO INDONESIA

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Principle 10 - Businesses should work against all forms of corruption, including extortion and bribery

About the COP The Communication on Progress (COP) is an annual disclosure to stakeholders on progress made in implementing the ten principles of the UN Global Compact in the areas of **human rights, labour, environment and anti-corruption, and in supporting broader UN development goals.**

For civil society: The COP is an important demonstration of a company's commitment to transparency and accountability and it serves as an effective tool for multi-stakeholder dialogue.

WE HAD TRAINED by VARIOUS NGOs and COMPANIES and EVEN UNIVERSITIES regarding to this matter, and our BOARD is always SUPERVISING GPDLI from time to time.!

THE END

OUR CONTACT

GERAKAN PEDULI DISABILITAS DAN LEPRO INDONESIA (GPDLI)

Level 38, Tower A, Kota Kasablanka Jl. Casablanca Raya Kav. 88, Jakarta 12870

INDONESIA

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