

# Humanitarian commitment: Indonesia's policy on refugees' rights to health

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## Abstract

Refugees have faced many challenges, including access to housing, education, and social and health services. International conventions regulate human rights that all civilized countries must obey, starting from the Declaration of Human Rights, the International Covenant on Civil and Political Rights and Indonesia, the International Covenant on Economic, Social and Cultural Rights and others recognized internationally and nationally. Indonesia, although not a state party to the 1951 Convention and 1967 Protocol on refugees, must pay attention to how to pay attention to foreigners, especially refugees in its territory. In providing protection and fulfillment of rights, Indonesia must refer to one of the international principles in providing needs to foreigners, namely the International Minimum Standards and National Treatment Standards.

## Introduction

The Republic of Indonesia, situated in a strategically significant location on the global map, has emerged as a transit point for refugees and asylum seekers who may arrive via numerous means.<sup>1-4</sup> According to the 1951 Convention Relating to the Status of Refugees, commonly known as the 1951 Geneva Convention, refugees or asylum seekers are individuals who have fled their country due to fear of persecution based on race, religion, nationality, membership in a specific social group, or political opinion.<sup>5-9</sup> Nonetheless, the 1967 Protocol Relating to the Status of Refugees has broadened the concept of refugees by incorporating a more expansive interpretation,<sup>10</sup> from the 1951 Geneva Convention on the Status of Refugees, which is devoid of any temporal restrictions and is worldwide applicable. Per May 2024, the United Nations (UN) documented over 120 million individuals who become refugees worldwide.<sup>11</sup> The United Nations High Commissioner for Refugees (UNHCR) presented the figures of 120 million refugees per May 2024 in its annual report as a customary practice. This figure will persist in rising due to the continuing hostilities in several nations. The organisation responsible for managing refugees is the United Nations High Commissioner for Refugees (UNHCR),<sup>12</sup> which was founded by the United Nations to manage global refugee issues. The responsibilities of the UNHCR include safeguarding and aiding refugees in resolving their circumstances, ensuring that refugees fulfil their fundamental requirements, and enabling the resettlement of refugees to their host nations.<sup>13</sup> Presently, several nations are obligated by the 1951 Geneva Convention and the 1967 New York Protocol via ratification or accession, therefore aiding the UNHCR in the resettlement of refugees to their respective destination countries.<sup>5,14-20</sup> Indonesia, situated in a region frequented by migrants via international maritime routes, cannot evade the presence of refugees.<sup>21-26</sup> Data from UNHCR indicates a year-on-year escalation in the number of refugees entering Indonesia, including both asylum seekers and those in transit. This has inadvertently raised a worry for the administration of the Republic of Indonesia.

The right to health is an essential human right that every nation must uphold, irrespective of age, gender, ethnicity, or other considerations.<sup>27-30</sup> The state is required to provide this right to all citizens and foreigners under its jurisdiction, including migrant laborers, asylum seekers, and refugees.<sup>26,31,32</sup> Nonetheless, there are concerns regarding the right to health for vulnerable populations, such as refugees and asylum seekers, who face challenges such as inadequate healthcare services in both emergency and routine circumstances. The overall count of asylum seekers and refugees in Indonesia is 13,616 individuals, including 10,184 refugees and 3,432 asylum seekers. The refugee and asylum seeker population comprises children (27%), adults (71%), and the elderly (2%). Indonesia is seeing a considerable problem in deliv-

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ering healthcare services to its 13,616 refugees and asylum seekers. Since access to health is a fundamental right that should be ensured as a matter of governmental responsibility for human rights.<sup>33,34</sup> Indonesia's regulations and practices impede the availability of immunizations and healthcare services for refugees and asylum seekers. This administrative measure prevents refugees and asylum seekers from receiving healthcare treatments due to their insufficient documentation. The regulation enacted by Indonesia hinders asylum seekers and refugees from obtaining healthcare services during national emergencies associated with health access. The absence of hygienic settings is a challenge for refugees and asylum seekers, as shown by several shelters that categorize these individuals as slums and get little attention from Indonesia. Mental health concerns persist for refugees and asylum seekers, since there is now an absence of mental health services in Indonesia. Despite not having ratified the 1951 Convention Relating to the Status of Refugees and the 1967 New York Protocol, Indonesia remains obligated to protect refugees and asylum seekers in accordance with the international refugee law principles of non-refoulement and non-discrimination.<sup>35-38</sup> Presidential Regulation Number 125 of 2016 on the Management of Foreign Refugees fails to explicitly delineate the rights afforded to refugees and asylum seekers, including the right to healthcare.<sup>39</sup> The failure to satisfy the right to health for asylum seekers and refugees in Indonesia constitutes a significant concern that requires urgent attention from the Indonesian government.<sup>40</sup> Refugees are individuals requiring protection from their current nation, whether on a temporary or permanent basis.<sup>41</sup> Refugees come needing support and protection from outside their nation of origin. The 1951 Convention on the Status of Refugees characterizes a refugee as an individual who, owing to a substantiated apprehension of persecution based on race, religion, nationality, or affiliation with a specific social group or political party, is outside their country of nationality and does not seek protection from that country. A report published by UNHCR indicated that a significant factor contributing to the influx of refugees was the crisis in several Middle Eastern countries,<sup>42-44</sup> including the Taliban conflict in Afghanistan.<sup>45</sup> The report revealed that in 2020, 82 million individuals worldwide were compelled to flee their homes. The UNHCR research indicated that up to 86% of the world's refugees and Venezuelan nationals are seeking asylum in different nations. A research study from Global Rise, an organization focused on improving nutrition and health in poor nations, indicated that Uganda hosts 1.4 million refugees. The UNHCR Indonesia report indicated that there were 12,616 registered refugees in Indonesia, with children constituting 27% of this total. As of November 2022, the majority of refugees arriving in Indonesia originated from Afghanistan (55%), Somalia (10%), and Myanmar (6%). Historically, refugees have encountered several hurdles, including access to housing, education, and social and health services.

## Global refugees emergence by region 2021 – 2023

More than 110 million individuals have been forcibly displaced worldwide as a result of persecution, conflict, violence or human rights violations. We are now witnessing the highest levels of displacement on record (Supplementary materials, Table 1).

Based on report published by UNHCR which divides it into nine categories, namely Sub-Saharan Africa, Central America and Venezuela, Europe, Iraq, South Sudan, Syria, Ukraine, Yemen. The geopolitics condition has been influence of human mobalizing,

UNHCR identified that conflict, war, social and political factors have an important role in the mobility of refugees to various regions in the world. It is noted that in the Sub-Saharan Africa region the conflict that occurred in Sudan caused massive displacement. In Central America and Venezuela, there is an increasing number of crimes and criminal organizations. In the European region the increase in the number of refugees is due to the war between Ukraine and Russia. The prolonged conflict in Syria has caused the Syrian population to move to various regions in the world with the highest percentages being in Turkey, Lebanon and Jordan. The Rohingya Muslim minority conflict in Myanmar has caused high mobility, the Rohingya Muslim refugee group is dominated by women and children with 90% living in Malaysia and Bangladesh. And Yemen, which is one of the poorest countries in the Middle East, has increased poverty and prolonged conflict and natural disasters which have resulted in residents of Yemen having to flee to other places.

## Refugee protection in Indonesia: legal frameworks and humanitarian obligations

Indonesia, located between Asia and Australia, is a strategic route for international trade and shipping, making it a transit country for refugees by sea.<sup>46</sup> However, due to its non-membership of the 1951 Convention and 1967 Protocol, Indonesia has limitations in granting status and fulfilling the rights of refugees in its territory.<sup>47</sup> The principles of non-refoulement, non-discrimination, and non-expulsion are customary international law as *jus cogens*,<sup>48</sup> obliges every country to pay attention to and apply these principles regardless of whether the country has ratified the 1951 Convention and the 1967 Protocol on refugees. Indonesia is a legal country that recognizes human rights that must be fulfilled as stated in the 1945 Constitution of the Republic of Indonesia.<sup>49</sup> In providing protection and fulfillment of rights, Indonesia must refer to one of the international principles in providing needs to foreigners, namely the international Minimum Standard and National Treatment Standard. In general, developing countries like Indonesia treat foreigners in their territory using principles National Standard Treatment, based on Article 9 of the 1933 Montevideo Convention. In providing protection based on a human rights perspective, Indonesia has an obligation not to take discriminatory actions as applicable under international law and must also pay attention to the non-discriminatory principle has become customary international law. In providing treatment to refugees, Indonesia must prioritize the principle of non-refoulement, the principle of non-discrimination, and the principle of non-expulsion while ensuring that the actions and protection of refugees in their country's territory include general provisions in providing protection for human rights. Indonesia as a transit country has an obligation to treat refugees properly, considering their rights that cannot be reduced, such as the right to life, the right not to be tortured, the right to adhere to a belief or religion, the right to have a family, and the right to health. As a transit country that accepts refugees with the assistance of UNHCR and IOM, Indonesia has an obligation to make legal regulations in providing protection for refugees.

Refugees can be categorized as legal subjects who have rights and obligations if they have lived for a while, which must be recognized by the state.<sup>50</sup> The state must ensure whether refugees are legal or illegal foreign citizens, as this can affect state policies in providing protection for refugees.<sup>51</sup> Indonesia has made several legal rules to deal with refugees, including Law of the Republic of

Indonesia Number 37 of 1999 concerning Foreign Relations, Law of the Republic of Indonesia Number 6 of 2011 concerning Immigration, Regulation of the President of the Republic of Indonesia Number 125 of 2016 concerning Handling of Refugees from Abroad, Director Regulations General Immigration Number IMI-1489.UM.0805 of 2010 Concerning Illegal Immigrants, Director Regulations General Immigration Number IMI-0352.GR.02.07 Year 2016 Concerning Handling of Illegal Immigrants or Refugees, Ministry of Health Circular Letter dated 10 June 2020 concerning Provision of Access to Services related to COVID-19 for registered refugees, and Minister of Home Affairs Circular Letters Number 300/2307/SJ and 300/2308/SJ concerning the Establishment of a Task Force for Handling Refugees from Abroad. Legal regulations regarding refugees in Indonesia vary depending on the country's political, economic, and security conditions. The Law of the Republic of Indonesia Number 37 of 1999 concerning Foreign Relations is one of the bases for recognizing refugees, which is given by the President with consideration of state security, politics, economy, and other factors suggested by the Ministry of Foreign Affairs. The law also takes into account refugee law contained in international conventions, customary international law, and international practice in granting recognition to refugees. Indonesia has been assisted by UNHCR and IOM to provide protection for refugees since its publication. The Ministry of Immigration, under the Ministry of Law and Human Rights, the Ministry of Foreign Affairs, the Indonesian National Police, and other agencies, assists in providing protection and fulfilling rights to refugees. However, the recognition of refugees has experienced problems, especially during the year 2010. In 2010, refugees were considered illegal immigrants, leading to concerns for refugees from 2010 to 2016. The Director General of Immigration Regulation Number IMI-1489.UM.0805 of 2010 stated that refugees are illegal immigrants because they come to Indonesia without complete documents. This led the government to clarify that refugees are the same as illegal immigrants who can be deported for violating the provisions of the law governing the presence of foreigners in Indonesia. Additionally, the Regulation stipulates that every illegal immigrant arranges for refugees if there are objectors from UNHCR, and they can be subject to immigration action. Immigration actions are regulated based on the Law of the Republic of Indonesia Number 6 of 2011 concerning Immigration, which outlines the actions of Immigration Administrative Actions listed in article 75 Paragraph 2, including inclusion in the list of Prevention or Deterrence, limitation, change, or cancellation of Stay Permit, prohibition to be in certain places in the Indonesian Territory, obligation to reside in a certain place, imposition of expenses, and deportation from the Indonesian Territory.

Indonesia's actions in 2010-2016 violated international law, particularly in relation to discriminatory acts against refugees. Deportation was prohibited by international refugee law due to the violation of customary principles such as non-backflow and non-expulsion. The permitted return should be carried out by UNHCR through voluntary repatriation, not unilaterally by the government. Political conditions and treatment of refugees in Indonesia have changed since 2016, making the rule of law in line with the Law of the Republic of Indonesia Number 37 of 1999 concerning Foreign Relations. This is indicated by the revocation of Director General of Immigration Regulation Number IMI-1489.UM.0805 of 2010 concerning Illegal Immigrants and replacing it with Director General of Immigration Regulation Number IMI-0352.GR.02.07 of 2016 concerning Handling of Illegal Immigrants Seeking Asylum or Refugees. The regulation acknowledges the existence of refugees and explains the duties and powers of international

organizations in providing assistance, granting status, and fulfilling basic rights in accordance with human rights law. Refugees are referred to as foreigners by the regulation, and their presence in Indonesia guaranteed to be fulfilled in collaboration with the International Organization for Migration (IOM) and UNHCR. The Government of Indonesia grants residence permits to refugees who have obtained status or are in the process of granting status by UNHCR based on article 3. However, refugees are often still placed in detention centers even though they have received refugees. In addition to the Regulation of the Director General of Immigration Number IMI-0352.GR.02.07 of 2016, the President of the Republic of Indonesia issued Presidential Regulation of the Republic of Indonesia Number 125 of 2016 Concerning the Handling of Refugees from Abroad on December 31, 2016. This legal rule forms the basis for anyone responsible for providing protection and handling international refugees to assist IOM and UNHCR. However, there are still deficiencies in these regulations, and supporting regulations should be issued by each competent agency to provide protection and fulfillment of rights to refugees.

## Indonesia's legal commitments and challenges in fulfilling health rights for refugees

Health encompasses a favorable physical, spiritual, mental, and social state conducive to social and economic well-being.<sup>52-54</sup> Health constitutes the fundamental aspect of human rights and is paramount within this framework.<sup>55-57</sup> The state is required to uphold health as a fundamental aspect of human rights.<sup>58-60</sup> The state must adhere to the principles of international health law, specifically the principles of availability, accessibility, acceptability, and quality as outlined in General Comment No. 14 of 2000 by the Committee on Economic, Social and Cultural Rights regarding the Right to the Highest Standard of Health.<sup>61-64</sup> Indonesia is a nation that acknowledges human rights that must be provided, fulfilled, and safeguarded, especially the right to health.<sup>65-67</sup> Indonesia has established legislative standards to guide government agencies at both central and regional levels in delivering public health services, ensuring that all individuals get optimal health care and may enhance their health status to the highest feasible degree. Indonesia has established national legislative laws pertaining to health, explicitly governed by Law Number 36 of 2009 of the Republic of Indonesia respecting Health. The Health Law was enacted in response to Indonesia's pledge to provide health services to all those under its jurisdiction. Refugees constitute a demographic that must be granted the right to health, since the WHO has identified them as a vulnerable population susceptible to illness, hence necessitating the fulfilment of their health rights. Every nation that is temporarily or permanently visited must consider the presence of refugees. Indonesia serves as a temporary shelter for refugees pending their relocation to designated nations. Refugees in Indonesia are required to adhere to all applicable laws. Indonesia established legal provisions governing refugees through Presidential Regulation Number 125 of 2016 regarding the Management of Foreign Refugees; however, these regulations do not explicitly delineate the health rights afforded to refugees in Indonesia. Indonesia is a constitutional state that acknowledges the presence of every individual within its territory. Indonesia, as a constitutional state, prioritises the provision of fundamental rights to its citizens by establishing a system of law that underscores the significance of fulfilling everyone's rights. Indonesia must prioritize the right to health, which serves as a benchmark for

overall well-being. Universal health is essential to achieve, since a satisfactory physical condition is requisite for individuals to attain a successful existence, as articulated in paragraph 4 of the law's preamble. Indonesia's provision of the right to health for all individuals within its jurisdiction is founded on the regulations and policies established by government authorities. The right to health is a basic entitlement that Indonesia must provide to all individuals within its territory, for which the state may be Article 28 I Paragraph 4 of the 1945 Constitution of the Republic of Indonesia stipulates that the state, particularly the government, is responsible for the protection, promotion, enforcement, and fulfilment of human rights. y the government." Passage 28, Verse 4, UUD NRI 1945, n.d. The 1945 Constitution of the Republic of Indonesia stipulates that all individuals within the state's territory are entitled to health services provided by the government, with the objective of ensuring both physical and mental well-being, as well as access to a healthy living environment, underscoring the paramount importance of health in human existence that warrants state attention. Article 28H, paragraph 1 of the 1945 Constitution of the Republic of Indonesia asserts, "Everyone has the right to live in physical and spiritual prosperity, to have a place to reside, to enjoy a good and healthy living environment, and to receive health services." (Article 28H, Paragraph 1, of the 1945 Constitution of the Republic of Indonesia, n.d.). Indonesia, as a sovereign nation, guarantees that all individuals within its territory receive optimal health services.<sup>68,69</sup> The state's obligation to provide health services and ensure adequate health facilities is delineated in Article 34, Paragraph 3, of the 1945 Constitution of the Republic of Indonesia,<sup>70</sup> which asserts, "The state is responsible for the provision of proper health and public service facilities." (Article 34, Paragraph 3, of the 1945 Constitution of the Republic of Indonesia, n.d.). According to the 1945 Constitution of the Republic of Indonesia, human rights must be protected without discrimination, as outlined in Article 11 of Law Number 39 of 1999 concerning Human Rights, which asserts that "Everyone has the right to fulfil their basic needs to grow and develop properly." Law on Human Rights of the Republic of Indonesia, 1999. The Law of the Republic of Indonesia Number 39 of 1999 regarding Human Rights asserts that children are entitled to health services, including health insurance and sufficient healthcare, as outlined in Article 62. This article states, "Every child has the right to obtain proper health and social security services, according to his physical and mental-spiritual needs" (Law of the Republic of Indonesia Concerning Human Rights, 1999). Indonesia, being a subject of international law, has ratified global human rights agreements.<sup>71-73</sup> International conventions ratified by Indonesia serve as fundamental guidelines for the formulation and execution of regulations aligned with human rights and health concerns, ensuring that all individuals within its territory receive protection and equitable treatment. Indonesia has ratified the international treaties pertaining to the right to health, which include the International Convention on the Elimination of All Forms of Racial Discrimination. Convention on the Elimination of All Forms of Discrimination Against Women International Covenant on Economic, Social, and Cultural Rights Indonesia has ratified international conventions and acknowledges their binding nature as national legal regulations. In 2005, Indonesia became a state party to the International Covenant on Economic, Social and Cultural Rights, as shown by the promulgation of the international convention in Law Number 11 of 2005 of the Republic of Indonesia. This treaty serves as a directive for all ratifying nations, including Indonesia, to ensure that all individuals in the area get comprehensive health services, including both physical and mental health care. The International Covenant on Economic, Social, and

Cultural Rights mandates Indonesia to prevent and manage endemic and epidemic diseases, requiring the nation to ensure adequate preparedness for health services as outlined in Article 12 of the Covenant. Indonesia ratified the International Convention on the Elimination of All Forms of Racial Discrimination on May 25, 1999, as articulated in Law No. 29 of the Republic of Indonesia. Indonesia has ratified the International Convention on the Elimination of All Forms of Racial Discrimination, demonstrating its commitment to safeguarding all individuals within its territory from discrimination based on skin color, religion, ethnicity, nationality, and related human rights issues. This treaty serves as a reference for Indonesia, affirming that every individual within its territory is entitled to health services, including social assistance, medical treatment, and health insurance, as stipulated in Article 5 of the International Treaty on the Elimination of All Forms of Racial Discrimination. The Convention on the Elimination of All Forms of Discrimination Against Women was promulgated by Indonesia in 1984 and approved under Law Number 7 of 1984 of the Republic of Indonesia. As a state party to this Convention, Indonesia is obligated to ensure the protection of every woman within its territory, particularly concerning the right to health. Indonesia, in accordance with the International Convention, shall prioritize and safeguard women's health by ensuring accessible healthcare services, particularly during pregnancy, menstruation, and nursing. The Convention on the Elimination of All Forms of Discrimination Against Women mandates that states establish rules to ensure the protection of women, since the safety of the infant is contingent upon the well-being of the mother. As a signatory to the Human Rights Convention, Indonesia has a need to establish specific legislation that assures the granting, protection, and fulfillment of human rights, including the right to health. One method to uphold the right to health is via the establishment of health-related rules. The foundational legal rule in Indonesia that establishes the right to health for all individuals is Law Number 36 of 2009 concerning Health. This health legislation ensures legal stability for all individuals in Indonesia, enabling them to uphold and enhance their health to the greatest standard, grounded on participative, sustainable, and non-discriminatory principles. The Law of the Republic of Indonesia Number 36 of 2009 about Health establishes that every individual has the right to health, as articulated in Article 4,<sup>74-76</sup> which states, "Everyone has the right to health" (Law of the Republic of Indonesia Concerning Health, n.d.). The Health Law guarantees that all individuals have access to excellent, safe, and affordable healthcare services to enhance their health. National and municipal governments must assure efforts to enhance the highest standard of health as articulated in the International Covenant on Economic, Social, and Cultural Rights. The initiatives undertaken via a promotive, preventative, curative, and rehabilitative strategy are balanced and mutually sustainable. This health legislation, established in Indonesia, governs not only physical health but also mental health, emphasizing the need to ensure that individuals possess a mind unencumbered by stress, disturbances, or trauma. The Indonesian government must prioritize mental health, as there are psychological issues that receive insufficient attention, particularly the scarcity of mental health clinics, despite existing regulations and state guarantees. state guarantees. Alongside physical and mental health, environmental health significantly contributes to the enhancement of overall health status, particularly in residential areas, workplaces, places of worship, and other environments that are physically conducive and devoid of harmful chemicals or biological agents that may adversely affect human well-being.

## Indonesia's legal framework and obligations in providing health services for refugees

Refugees are individuals residing in Indonesia whose presence is acknowledged despite Indonesia's non-participation in the 1951 Convention and the 1967 Protocol.<sup>77-79</sup> Indonesia, as a transit nation for refugees, is obligated to provide their safety, particularly for health issues.<sup>80</sup> Health services are essential for refugees, since many arriving in Indonesia endure lengthy maritime trips, necessitating medical care to recuperate their physical well-being.<sup>81,82</sup> Refugees arriving in Indonesia often display both physical and mental health issues,<sup>83,84</sup> thereby raising significant concerns that require attention to the circumstances within the country. Although Indonesia is not a signatory to the 1951 Convention and the 1967 Protocol, it nonetheless is obligated to provide the right to health for refugees, since it has admitted them. Indonesia has enacted many rules concerning refugees inside its territory. The Presidential Regulation of the Republic of Indonesia Number 125 of 2016 about the Management of Foreign Refugees is a legislative framework that provides protection for refugees in Indonesia. The Presidential Decree on Refugees is a specific regulation governing the treatment of refugees, and it serves as a continuation of Law Number 37 of 1999 on Foreign Relations. Presidential Regulation Number 125 of 2016 governs the provision of health care to international refugees in Indonesia. Article 26, Paragraph 2 stipulates that "Housing places for refugees, as referenced in paragraph (1), must fulfil the following criteria: a. proximity to health and religious service facilities" (Article 26, Paragraph 2 of Presidential Regulation of the Republic of Indonesia Number 125 of 2016 Concerning the Handling of Refugees from Abroad, n.d.). The article asserts that refugee shelters should be in proximity to health facilities, ensuring that refugees have access to healthcare. "Basic needs facilities as referred to in paragraph (4) shall at a minimum encompass: a. clean water supply; b. provisions for food, drink, and clothing; c. health and hygiene services; and d. worship facilities." This is stated in Article 26, paragraph 5 of Presidential Regulation Number 125 of 2016 of the Republic of Indonesia regarding the Management of Foreign Refugees. (Article 26, Paragraph 5 of Presidential Regulation Number 125 of 2016 of the Republic of Indonesia regarding the Management of Foreign Refugees, n.d.). The article elucidates that health services are fundamental provisions that the state is obligated to provide. The regional and city governments are tasked with delivering health services to refugees, as outlined in Article 26, paragraph 6 of Presidential Regulation Number 125 of 2016 of the Republic of Indonesia regarding the Management of Foreign Refugees. The Regulation of the President of the Republic of Indonesia Number 125 of 2016 for the Management of Foreign Refugees does not explicitly address the rights of refugees in Indonesia. Furthermore, the *Perpres* remains a fundamental piece of legislation that necessitates supplementary regulations to be established by each state organisation especially designated to manage refugees. Currently, no formal rules have established by institutions to grant rights to refugees, particularly in relation to local and municipal governments and the national government.

## Conclusions

Indonesia has not ratified and is not a party to the 1951 Convention and the 1967 Protocol, so Indonesia actually has no obligation to accept refugees who enter its territory. However,

Indonesia is willing to become a country that temporarily accommodates foreign refugees for humanitarian reasons. This is in accordance with the provisions of the 1951 Convention which requires countries that are not State Parties to adhere to the principle of non-refoulement, namely not forcibly repatriating all migrants who come seeking asylum to their country of origin. Indonesia still has the responsibility to respect the principles of refugee law which have become customary international law. Indonesia has regulated the issue of handling refugees and refugee health through: Law of the Republic of Indonesia Number 37 of 1999 Concerning Foreign Relations; Law of the Republic of Indonesia Number 6 of 2011 concerning Immigration; Regulation of the President of the Republic of Indonesia Number 125 of 2016 concerning Handling of Refugees from Abroad; Regulation of the Director General of Immigration Number IMI-1489.UM.0805 of 2010 concerning Illegal Immigrants; Regulation of the Director General of Immigration Number IMI-0352.GR.02.07 of 2016 concerning Handling of Illegal Immigrants or Refugees; Ministry of Health Circular Letter dated 10 June 2020 concerning Provision of Access to Services related to COVID-19 for registered refugees; Circular Letters of the Minister of Home Affairs Number 300/2307/SJ and 300/2308/SJ concerning the Establishment of a Task Force for Handling Refugees from Abroad. Although Indonesia is not a party to the 1951 Convention and 1967 Protocol but has endeavored to fully protect and provide the right to health through established regulations so as to realize the principles upheld by the 1951 Convention and 1967 Protocol.

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*Online supplementary materials*

*Table 1. Noteworthy facts and statistics by region/country 2021–2023.*