

INTERPRETING ACCESSIBILITY FOR PEOPLE WITH DISABILITIES IN TERMINAL 3 OF SOEKARNO HATTA AIRPORT

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Abstract

Terminal 3 of Soekarno-Hatta Airport is ranked second and is considered superior in having facilities that support transportation mode integration, with accessibility that is friendly to people with disabilities. However, there are various obstacles for people with disabilities in accessing and utilizing the facilities provided. The research question is how accessibility facilities affect the experience and emotional engagement of people with disabilities in airport public spaces. The main argument in the context is that sense of place is formed not only from physical elements, but also from social relationships and multisensory comfort. Using a Case Study approach and qualitative methods, data were collected through observations and interviews with five disabled informants. The results showed limitations in signage, voice/visual information, quiet space, and social support. This research concludes that inclusive design and policies based on user experience are needed to realize equitable and meaningful public spaces.

Keywords: accessibility; airport; disability; inclusive design; sense of place

Abstrak

Terminal 3 Bandara Soekarno-Hatta menduduki peringkat kedua dan dinilai unggul dalam memiliki fasilitas yang mendukung fasilitas integrasi moda transportasi dengan aksesibilitas yang ramah bagi penyandang disabilitas. Meskipun demikian, terdapat berbagai kendala hambatan bagi masyarakat disabilitas dalam mengakses dan memanfaatkan fasilitas yang disediakan. Pertanyaan penelitian ini bagaimana fasilitas aksesibilitas memengaruhi pengalaman dan keterlibatan emosional penyandang disabilitas dalam ruang publik bandara? Argumen utama dalam konteks bahwa sense of place terbentuk tidak hanya dari elemen fisik, tetapi juga dari hubungan sosial dan kenyamanan multisensorik. Dengan pendekatan Studi kasus dan metode kualitatif, data dikumpulkan melalui observasi dan wawancara terhadap lima informan disabilitas. Hasilnya menunjukkan keterbatasan pada signage, informasi suara/visual, ruang tenang, dan dukungan sosial. Penelitian ini menyimpulkan bahwa desain dan kebijakan inklusif berbasis pengalaman pengguna diperlukan untuk mewujudkan ruang publik yang adil dan bermakna.

Kata kunci: aksesibilitas; bandara; desain inklusif; disabilitas; rasa tempat

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INTRODUCTION

Data from the World Health Organization (WHO) in 2015 stated that 1/5 of the world's population consists of adolescents. Adolescents are residents with an age range of 10-19 years. Meanwhile, it was further explained that the ASIA Pacific population is 60% of the world's population and 1/5 of that number are teenagers (WHO, 2015). Meanwhile, the 2010 Population Census showed

that 43.5 million or about 18% of the total population of Indonesia were in the 10 – 19 year age group (Kemenkes RI, 2014).

Adolescence is a period of transition from childhood to adulthood. This period is marked by the maturation of the reproductive organs and is often referred to as puberty. Puberty that occurs in adolescent girls is usually marked by the first menstruation (menarche) (Citrawathi, 2014).

Adolescents with mental retardation, like other young women, also experience puberty and menstruation. Mentally retarded children are children who have intellectual abilities below the average (Somantri, 2007). Meanwhile Delphie (2006) stated that mental retardation refers to substantial limitations in current functioning. It is characterized by a significant sub-average of intellectual functioning, existing concurrent use of adaptive skill areas: communication, self-care, and home life. So there is a need for assistance or assistance in completing instructions at home, school, or in the community. The inhibition of intellectual development has an impact on delays in receiving information and adaptation skills so that it affects understanding in the age growth and biological development of a mentally retarded teenager who continues to grow and develop like a normal child.

One of the mentally retarded children is Down syndrome. Down syndrome is one of the classifications of mental retardation due to trisome 21 aberrations in the chromosomal structure of patients (Gunarhadi, 2005). With the inhibition of the cognitive function of children with Down syndrome, it is necessary to provide guidance on adaptive skills through special learning programs for self-development. Learning special programs for self-development is very important for children with Down syndrome, so that they do not have a prolonged dependence and can meet their daily needs independently (Muttaqin, 2008). The curriculum for the special self-development program for Down syndrome includes self-care and health, one of which is menstrual personal hygiene skills. According to Aslan (2017), explaining the scope of learning for children with Down syndrome, one of which is the need for self-care, including personal hygiene skills.

Menstrual personal hygiene is behavior related to actions to maintain health and efforts to maintain cleanliness in the female area during menstruation, these behaviors include; maintaining genital hygiene, such as washing it with clean water, using sweat-wicking pants, changing underwear, changing sanitary napkins frequently, bathing twice a day (Pribakti, 2008). Furthermore, research conducted by Tapparan et al. (2013), suggests that personal hygiene is the maintenance of personal hygiene and individual health carried out in daily life so as to avoid reproductive disorders and obtain physical and psychological well-being and improve health status. A person is said to have good personal hygiene if the person can maintain body hygiene which includes skin, hands, nails, and genital hygiene (Badri, 2012).

Menstrual personal hygiene learning generally will be very easy to be mastered by normal children, but it is not easily mastered by children with Down syndrome. Lack of understanding of children with Down syndrome on personal hygiene causes children to depend on the help of others. So

that the role of parents, teachers, health workers has an important influence in guiding adolescent mental retardation children is needed. According to research by Prihandini et al (2018), it shows that direct personal hygiene learning accompanied by reinforcement can guide mentally retarded students at every step to complete tasks and understand the concept of puberty so that they are able to master the skills of using sanitary napkins properly and correctly supported by modeling methods.

Learning special programs for self-development in menstrual personal hygiene in children with Down syndrome cannot be separated from the involvement of teachers and parents. The teacher provides the learning at school and parents also apply it at home. Parents play an important role in this learning program because parents are key figures who play a very important role in providing examples, guidance, and affection in the process of children's growth and development (Ginanjari, 2008). Parents can set an example, guide and supervise their children in the personal hygiene skills program for menstruation. This will support the success of children in mastering personal hygiene skills which of course will affect the independence of down syndrome children in taking care of themselves when menstruation arrives.

However, many parents do not understand in implementing a special program for menstrual personal hygiene. Parents experience difficulties in guiding children with Down syndrome during menstruation and teaching menstrual personal hygiene due to the absence of a manual (Rachmawati, 2012). Parents of mentally retarded adolescents often have to seek information independently regarding how to properly educate mentally retarded children. The literacy level of parents will also affect the independence of the mentally retarded child. Research conducted by Wulandari et al., (2016) shows that the higher the level of parental education, the more independent the adolescent girls who experience mental retardation in personal hygiene during menstruation at SLB N Kendal are. This shows that parents need a manual so that they can improve literacy related to the personal hygiene of mentally retarded adolescents. The purpose of this study was to determine the need for the right media to increase parents' understanding of menstrual personal hygiene for children with Down syndrome.

METHOD

This research location is the Domestic Departure Terminal 3 of Soekarno-Hatta Airport, which was chosen because it is a modern terminal that claims to have implemented international standards regarding accessibility services. This terminal is also a location with a high intensity of users with disabilities because it serves various major domestic routes. This research uses a qualitative method with a case study approach to deeply understand the experiences of people with disabilities in using public facilities at the T3 Domestic Departure Terminal of Soekarno-Hatta Airport. The choice of this approach is based on the main objective of the research, which is to explore the perceptions, meanings, and sense of place of spaces formed by the interaction between physical design and social experience.

The research design uses Fritz Steele's sense of place paradigm that experiences are formed from the interaction between a person and his or her physical and social environment. This is used as a paradigm because it allows researchers to trace the essence of the lived experience of people with disabilities. With this approach, information is not simply collected, but understood through the lens of individuals who experience firsthand the limitations of accessibility in complex public spaces such as airports. In public facilities such as airports, a positive perception of a place for people with disabilities is determined not only by whether there are accessibility ramps, dedicated toilets, or wayfinding available, but also by how those elements combine to create a meaningful, comfortable, and self-reliant and meaningful experience for them. (Steele, 1981 & Steele, 1977)

Formulated his views on the seven principles of inclusive design, including: user equality, simple and intuitive use, tolerance to errors, space and size approach in use, flexibility in use, easy-to-understand information, and low physical effort (Rivaldy et al., 2023). These seven principles are the main indicators for assessing the accessibility of physical facilities and evaluating comfort and sense of place, especially in access roads, signage, toilets, waiting rooms, elevators, accessibility, and other facilities.

The research subjects consisted of five people with disabilities, disability commissioners who were selected through purposive sampling techniques with the following criteria: 1) Have used the service at Terminal T3 in the last 1–2 years; 2) Representing a variety of disabilities: blind, deaf, physical (wheelchair user), and mental (bipolar); 3) Have a reflective capacity to express personal experiences in depth. All informants provide informed consent and are willing to be involved in the documentation and data verification process.

Data collection technique methods: 1) Field Observation: Directly observe disability facilities at Terminal T3 and record the conditions and effectiveness of their use. 2) Interview: Conducting interviews with the experiences of 5 disability commissioner resource persons as resource persons related to their experience as users of the T3 Airport Terminal disability facility at Soekarno Hatta Airport, to gain insight into the experiences and obstacles faced. 3) Analysis of the Results of the Informant Interview. Data Analysis techniques are carried out in three stages: open Coding, Axial Coding, and Selective Coding

RESULTS AND DISCUSSION

This study involved five informants with disabilities who have a variety of needs and conditions. The informant respondents in this study consisted of 5 commissioners with disabilities, 1 gender, namely women, airport users of Terminal T3, namely 2 commissioners with physical disabilities, 1 blind disability, 1 hearing disability, and 1 disability with Bipolar mental disorder. Their age ranges from 26 to 51 years old, with a minimum of a bachelor's degree. The frequency of their visits to Terminal 3 of Soekarno-Hatta Airport varies, ranging from infrequent (once a year) to frequent (more than five

times a year). This diversity provides a holistic view of how public facilities are perceived, accessed, and interpreted by users with disabilities. Each informant brings a unique experience, which reflects not only their physical connection to the space, but also their emotional attachment and social perception of the terminal environment.

1. Facility Accessibility Evaluation

The airport terminal is not just a transit space, but a living space that brings together various human experiences. In the context of people with disabilities, the experience of public space does not only revolve around physical comfort, but also concerns dignity, independence, and a sense of appreciation. Table 1 shows the results of informant interviews related to the accessibility of facilities at Terminal 3 of Soekarno Hatta Airport on the Likert scale. Figure 1 is a Facility Accessibility Evaluation graph showing the facilities that are most accessed or perceived by respondents with disabilities, such as Elevators, Accessible Toilets, and Waiting Rooms. Accessible. This graph shows respondents' assessment of various accessibility elements in Terminal 3 of Soekarno-Hatta Airport.

Table 1 . Accessibility and Facilities Interview Results Data on the Linkert Scale

Informant	Facility Accessibility Evaluation																				
	Pedestrian Path & Ramps		Elevators & Stairs		Toilet		Boarding Lounge				Signage & Information				Lighting dan Visual Indicators			Quite Zona & Interior Materials			
	Neutral	Satisfied	Dissatisfied	Satisfied	Satisfied	Very Satisfied	Dissatisfied	Netral	Satisfied	Very Satisfied	Dissatisfied	Netral	Satisfied	Very Satisfied	Dissatisfied	Neutral	Satisfied	Neutral	Satisfied	Very Satisfied	
Informant 1	0	1	0	1	1	0	0	0	1	0	0	0	1	0	1	0	0	0	1	0	
Informant 2	0	1	1	0	1	0	0	0	0	1	0	0	0	1	0	0	1	0	0	1	
Informant 3	1	0	0	1	0	1	0	0	1	0	0	1	0	0	0	0	1	0	1	0	
Informant 4	0	1	0	1	1	0	0	0	1	0	1	0	0	0	0	1	0	1	0	0	
Informant 5	0	1	0	1	1	0	1	0	0	0	0	0	1	0	0	1	0	1	0	0	
Percentage	20%	80%	20%	80%	80%	20%	20%	20%	20%	20%	20%	20%	40%	20%	20%	60%	20%	60%	20%	20%	

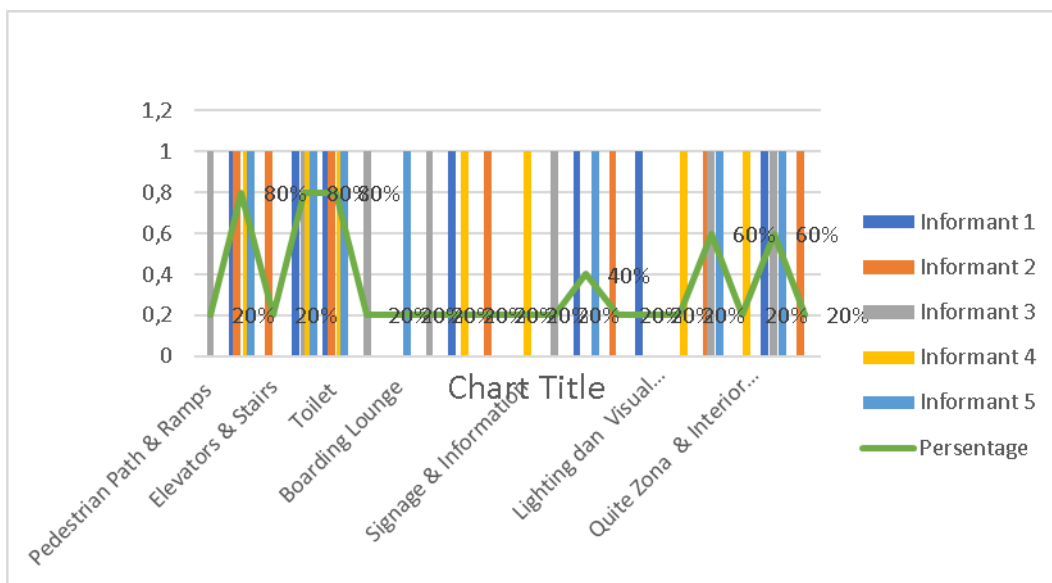


Figure 1. Facility Accessibility Evaluation Graph by Respondents with Disabilities

The characteristics that can be observed from this graph of Figure 1 are analyzed as follows: Pedestrian Paths & Ramps, in this aspect, are the basic elements of accessibility. As many as 40% of respondents were satisfied, while others gave a neutral or dissatisfied assessment. For people with visual and physical disabilities, the existence of ramps is not enough—what is important is ease of navigation, the existence of guiding blocks, and safety when used unaccompanied. The blind resource person revealed that the existence of ramps that are too sloping or without a guide texture can make it difficult when you have to move alone.

The elevator & stairs on the evaluation graph showed the same low level of satisfaction as the pedestrian path, with most respondents being at both satisfaction and neutral levels. The use of elevators and stairs by people with visual and physical disabilities should be equipped with voice, braille, or access buttons that can be easily reached. In some testimonials, it is mentioned that the use of ramps is more often relied upon than elevators, due to optimal access to sound and information that is not yet available.

The restrooms are the aspect with the highest level of satisfaction—80% of respondents stated that they were satisfied or very satisfied. This means that the design of the toilet for people with disabilities in this terminal is quite good, both in terms of space dimensions, handrail position, and easy door access. However, there is still input from visually impaired informants regarding the importance of audible or visual markers to distinguish male and female toilets, which are not always captured by visual symbols.

The waiting room for people with disabilities is available and quite spacious; only 20% of respondents gave positive scores, the rest were neutral or dissatisfied. This reflects that the existence of special priority areas for disabilities still needs to be expanded and multiplied. In some cases, priority seats are often occupied by non-disabled people without any supervision or control from officers.

Signage & Information shows satisfaction is at a significant low. Most respondents revealed that there is no information available in the form of voice, braille, or inclusive visuals, making it difficult for users with visual or cognitive limitations to navigate independently. This is important because signage is not only a direction, but also part of one's independence in exploring space.

Lighting & Indicators received a satisfaction rating from 40% of respondents. However, some respondents with mental disabilities, such as bipolar disorder, revealed that light that is too bright or blinding actually triggers stress and disorientation. This shows that lighting needs to consider sensory sensitivity, not just technical intensity.

The calm zone and interior materials showed a satisfaction score in 60% of respondents, but still left 20% who felt dissatisfied. Some respondents emphasized the importance of having a space with a calm and acoustic atmosphere that does not trigger anxiety. Interior materials such as floors

that do not cause echoes and chairs with a comfortable texture can help reduce sensory stress, especially for users with mental disabilities and sensitive to crowds.

Broadly speaking, the accessibility evaluation graph shows that most respondents expressed satisfaction with the existence of facilities such as accessible toilets, ramps, and elevators. Toilets are the aspect with the highest level of satisfaction, followed by pedestrian paths and waiting rooms. This indicates that the basic infrastructure is already functionally available. However, there are important notes regarding signage and information. Most of the informants stated that there were no clues in the form of voice, braille, or inclusive visuals. Blind people feel dependent on companions because directional information is not available in a form that they can access independently. Likewise, deaf respondents complained of the absence of visual information when the screen was off or in emergencies. The quiet zone and interior materials still don't get much attention. People with mental disabilities, such as bipolar disorder, perceive terminal public spaces as too busy and anxiety-inducing environments. They suggest the need for a sensory space or quiet lounge without having to pay for a commercial lounge.

2. Evaluation of Comfort and Sense of Place

Table 2 shows the results of informant interviews related to comfort and sense of place at Terminal 3 of Soekarno Hatta Airport in the Likert scale as follows.

Table 2. Interview Results: Data related to Comfort and Sense of Place in the Likert Scale

Informant	Evaluation of Comfort and Sense of Place											
	Mobility & Navigation			Security & Confidence	Clarity of information			Social Interaction		Sensory Conditions		
	Dissatisfied	Satisfied	Very Satisfied	Satisfied	Neutral	Satisfied	Very Satisfied	Dissatisfied	Satisfied	Dissatisfied	Neutral	Satisfied
Informant 1			1	1			1	1		1		
Informant 2		1		1		1			1		1	
Informant 3		1		1			1		1			1
Informant 4		1		1	1				1		1	
Informant 5	1			1		1			1		0	1
Percentage	20%	60%	20%	100%	20%	40%	40%	20%	80%	20%	60%	20%

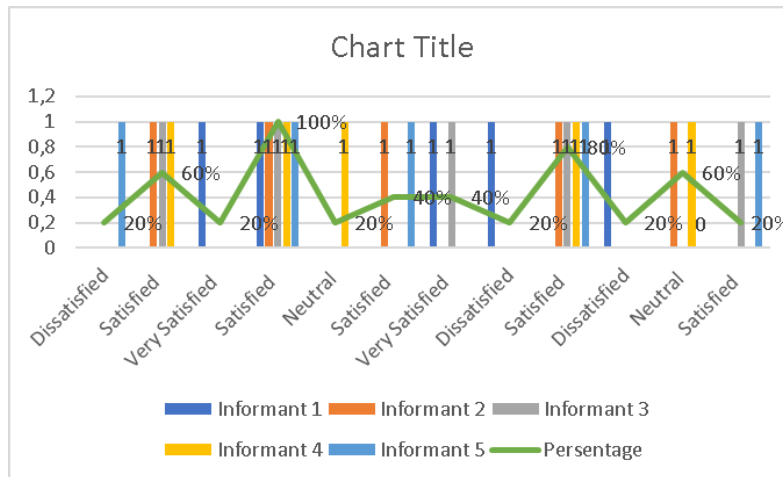


Figure 2. Graph of Evaluation of Comfort and Sense of Place by Respondents with Disabilities

Figure 2 is a comfort and Sense of Place evaluation graph highlighting elements such as Cleanliness, Safety, and quiet zones that are most perceived to support comfort and shape the sense of place experience. Each individual who crosses the public spaces of the airport brings a different experience. In the context of airports as complex transition spaces, the experience of comfort and emotional attachment is important, especially for people with disabilities. The results of the evaluation, shown in the graph, illustrate a diverse spectrum of satisfaction. Most of the informants expressed satisfaction to be very satisfied with several aspects of comfort, such as ease of mobility, lighting, and security. This shows that the interior design and service of the terminal have adequately answered the basic needs of comfort. However, there are still critical records from some informants. For example, social interactions and spatial ambience, such as quiet zones or sensory conditions (light, sound, and spatial texture) are still a challenge.

Some respondents with mental disabilities said that too bright light or a crowded atmosphere can trigger anxiety, so they feel they haven't fully found a space that supports their emotional stability. Meanwhile, respondents with physical disabilities were more likely to express a sense of security and confidence when using the facility. Adequate access and the presence of accompanying officers provide a sense of being served and humanized. A sense of place arises when users feel that the space is not only functional but also provides tranquility, social connectedness, and a sense of belonging. Most of the informants stated that they began to feel a sense of place when the facilities and attitude of the officers supported their independence and comfort. Overall, this graph shows that comfort is not just about physical facilities, but also includes emotional nuances and the presence of a social environment. A good public space design is one that embraces a diversity of experiences, making each individual-including people with disabilities, a user, but an integral part of the space.

Evaluation of Sense of Place based on Physical Setting based on the Pritz Steel framework, sense of place through direct experience of physical settings, and how these settings affect the sense of comfort, attachment, and meaning of space for its users. In the context of users with disabilities,

the experience of airport public spaces is not just the presence of facilities, but the extent to which the facilities can be used and utilized functionally, comfortably, and without a sense of isolation.

Based on the experience of persons with disabilities, informant 1, for example, the physical setting element is highly determined by the texture of the floor, guiding blocks, or voice clues. So that the absence of a guiding block and voice-based information makes informant 1 must always be accompanied, which reduces the sense of independence and confidence. This shows that the ideal sense of place has not been fully formed because the space facilities are not fully agile and safe, and support user autonomy. Disability (Fathimah & Apsari, 2020)(Wahyuni, 2016).

Meanwhile, for people with physical disabilities, informant 3 and informant 4 said the same thing that spatial elements such as ramps, toilets, and wheelchairs greatly determine the sense of acceptance and comfort. They said that toilets are indeed available and easy to use, but the distance between zones, such as from the waiting room to the toilet, is still too far and drains energy. This reflects that the scale and proportion of the space have not taken into account low physical effort, as emphasized by the principle of inclusive design (Eslami & Mahmoudi, 2016)

Informant 2 people with mental disabilities experienced challenges on the sensory aspect, stating that overly bright LED lights and noisy terminal ambience can trigger anxiety and mental fatigue, which makes them reluctant to explore and use the facility to its fullest. This suggests that a sense of place is also emotional and very sensitive to interior design implementations such as lighting, wall materials, and noise levels, which in many cases are not specifically designed to take into account the sensory needs of users with disabilities. (Najafi & Shariff, 2011)

One of the most important dimensions in the sense of place is the social dimension. Steele (1981) mentioned that a person's attachment to a place is not only shaped by the shape of the space, but also by the way he is treated in that space. All informants emphasized the importance of positive social interaction. Informant 1 stated that "the friendly officer made me feel comfortable." Informant 5 even assessed that communication with officers was much more crucial than the existence of facilities. In this case, the role of the officer as a 'social bridge' between design and comfort becomes vital. Without specific training for officers to understand disabilities, any physical design approach can fail to create an emotionally inclusive space.

3. Qualitative Findings: Voices and Stories from Respondents with Disabilities

The results of the interviews show that the meaning of accessibility is not only limited to the existence of physical facilities, but also to the social and psychological context of the user. Listening directly to the voices of the respondents opens a window into a deeper understanding of how accessibility is interpreted in their daily lives. The narratives they conveyed were not just complaints or praise for facilities, but a living reflection of how public spaces can affect confidence, comfort, and the meaning of being part of society.

Informant 1, a person with a visual disability, revealed that he always uses a companion when traveling through the terminal. For him, independence has not been fully achieved due to the absence of voice and Braille clues. He states that accessibility is not only about facilities, but also the attitude of the people around him: "Hospitality is part of accessibility". This experience highlights the importance of empathy and social support as part of public service.

Informant 2, as a person with bipolar disorder, has difficulty adapting to the large and noisy terminal environment. He feels that he often experiences "misdirection" or loss of direction, not because there are no facilities, but because the design does not support orientation for users with mental disorders. He suggested a quiet room that was free of charge for the mentally disabled, because currently, the only quiet room is an exclusive lounge. He also highlighted that interactions with airport staff are often a source of stress due to a lack of understanding of mental needs.

Informant 3 and Informant 4, as persons with physical disabilities, highlighted the important role of physical facilities and accompanying officers and appreciated the ease of access to toilets and the role of officers who are always ready to help, but Fatimah complained that there was no priority in the use of facilities such as golf cars and priority chairs. He said that the facilities provided are often used by non-disabled users without control from officers. Informant 5, a deaf person, voiced a major challenge in access to information. The absence of visual information when the power goes out, the absence of officers who are able to speak sign language, and the lack of a special communication room make them feel marginalized. He emphasized that the symbols of the facility only accommodate wheelchairs or the elderly, while deafness and other invisible disabilities are not considered. From these narratives emerges one common thread: true accessibility is a combination of inclusive physical design and supportive social systems: **Reflection on the Meaning of Inclusive Design Principles and Sense of Place.**

If an airport is a public space, then it should belong to all. From the above findings, it becomes clear that universal design principles still do not adequately cover the entire spectrum of needs of users with disabilities. For too long, public design has focused on wheelchair users and the blind, while users with deaf, mental disabilities, and other invisible disabilities are often left behind. In other words, the design must be responsive to the needs of the deaf, mentally, and other invisible disabilities. The absence of visual cues, sounds, and inclusive symbols is a form of subtle exclusion. When symbols only depict a wheelchair, when information is only in the form of writing or sound without visual alternatives, then exclusivity occurs subtly but systematically

Public spaces such as airports should be the face of a nation's inclusivity. Terminal 3 of Soekarno-Hatta Airport has the potential to become an inclusive public space model if all stakeholders realize that design is not only about form, but also about taste. A sense of calm, a sense of belonging, and a sense of place are at the heart of a sense of place. The sense of place for people with disabilities is not only born from the visual beauty or splendor of architecture, but from the ease

of access, friendliness of interaction, and symbols that greet and acknowledge their existence. A space designed with empathy will be able to provide a sense of comfort while forming an emotional attachment. A sense of place in the context of people with disabilities is born from an integral experience: accessible spaces, warm interactions, and non-discriminatory facilities. Terminal 3 has the potential to become an inclusive model of public space if facility management is accompanied by officer training, multisensory design, and regulations that represent all types of disabilities.

Multisensory design, officer training, dual information systems (audio and visual), cross-disability symbol representation, and affordable quiet spaces are some concrete forms of inclusive principles. Inclusivity is not just about adding facilities, but about changing the way of thinking: that every user has an equal right to feel welcome. The results and discussion show that accessibility evaluation cannot be separated from human values. Good design is not just aesthetic or functional, but humanizes everyone who is in it. By responding to these needs, the airport is not just a temporary stopover, but a humanizing space. A space that shapes stories, experiences, and a sense of belonging, that is the deepest meaning of inclusive design and a true sense of place. The results of the above findings suggest a number of improvement strategies, including 1) adding guiding blocks and voice information in the main navigation area to support the independence of visually impaired users. 2) Providing alternative visual information layers that are not dependent on one digital system in the event of a power outage. 3) Development of a quiet zone that is freely accessible and open to people with mental disabilities (neurodivergent). 4) Training of airport personnel and staff to understand sign language, etiquette in interacting with people with disabilities, and social inclusion awareness.

The principle of inclusive design, according to Eslami (Eslami & Mahmoudi, 2016) should not only be a checklist of technical sheets, but also understood as an ethical and humanitarian approach. Public facilities such as airports should be a representation of space justice, a place where everyone can feel a sense of security, a sense of comfort, and belonging in every public space of transportation, such as airports.

CONCLUSION

This study seeks to dive into the experiences of people with disabilities in living their daily lives in Terminal 3 of Soekarno-Hatta Airport. Based on the results of interviews with five disability informants, it was revealed that spaces that appear aesthetic and functional on the surface but are not fully friendly in the context of depth of meaning. Facilities such as accessible toilets, ramps, and elevators are available, but there are still gaps in terms of ease of navigation, adaptive information provision, and a sense of calm.

For many respondents, the sense of place is not about the luxury of the facilities, but about how the space can welcome and understand them. Informant one was one of the speakers who stated that it was necessary to change the guiding block and voice instructions made him never feel safe and

comfortable enough to walk alone in the airport public space. Informant 2 felt mental distress due to overly bright lighting and a noisy atmosphere. Informant 3 and informant 4 complained about the distance between facilities, which made physical activity tiring. An inclusive space is a space that is not only accessible to airport users but also can feel a sense of place. In this context, the sense of place according to Steele (1981) becomes an important guide: the attachment to space grows from a combination of physical elements, social relationships, and emotional comfort. When only one of these elements is ignored, the meaning of space becomes uneven.

The findings of this study show that attention to social interaction and sensory aspects is also very important for physical development. When officers show a friendly and helpful attitude, the confidence of disabled users grows. But when visual cues are unreadable, or voices are inaudible to users with disabilities who need them, space turns into a field of alienation. This indicates that inclusive design cannot only be built with infrastructure, but also requires empathy and a willingness to understand human diversity. According to Eslami & Mahmoudi (2016), inclusive design principles that emphasize equality of use, ease of information, and tolerance for errors are still not fully part of the operational design of airports. This is a reminder to be able to rearrange perspective: that in the context of design, it should depart from human diversity, not from the average user. The conclusion of this study shows that accessibility is not only a technical and regulatory issue, but also a matter of values and social commitment. Airport Terminal 3 is not only a transit space for human mobility, but also a meeting room, where people feel safe, respected, and in control of their experiences.

Interpreting public space as shared property means giving the same space to those who have not always been seen by the system. The potential of Soekarno-Hatta Airport Terminal 3 is to become a pioneer of inclusion, not only through the physical appearance, but also through a real commitment to listen, respond, and involve all its users. By combining the principles of inclusive design and a sense of place approach, airports are not just a departure and arrival point—but a place that embraces diversity, honors rights, and respects every step of the human experience, in every way without exception.

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