

STATUS OF DISABILITY IN INDIA

**A Review of Policy, Schemes
and Facts on Disability**

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UK Government



National Institute of Urban Affairs

STATUS OF DISABILITY IN INDIA

A Review of Policy, Schemes, and Facts on Disability

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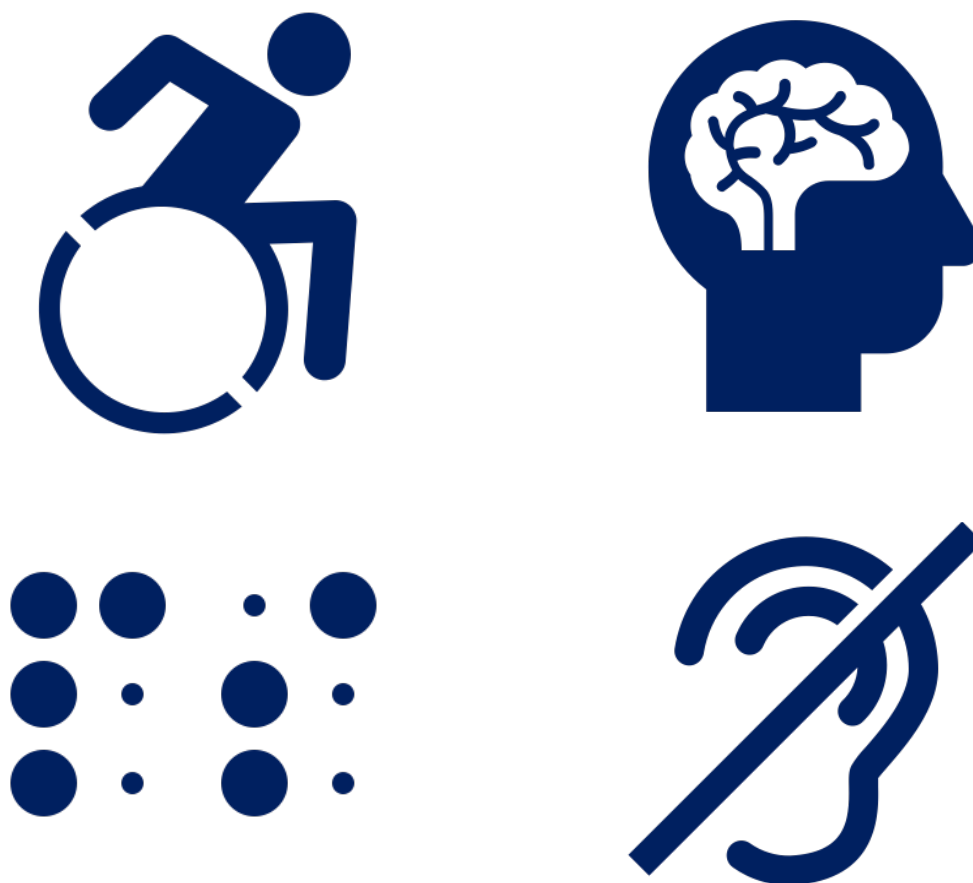
OTHER AUTHORITIES

Artificial Limbs Manufacturing Corporation of India
 Department of Empowerment of Person with Disabilities
 Ministry of Electronic & information Technology
 Ministry of Human Resource Development
 Ministry of Social Justice & Empowerment
 Ministry of Statistics and Programme Implementation
 Rashtriya Madhyamic Shiksha Abhiyan
 The National Statistical Office

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Disability



is MULTIFARIOUS!

Figure 1 Disability is Multifarious

Introduction

Between 110 million and 190 million people globally are estimated to be suffering from some form of disability and nearly a fifth of the global total, i.e. people, experience significant disabilities. In the Indian context, the NSSO estimates 2.2 per cent of the Indian population to be disabled. (NSSO 76th round, 2019). Additionally, the incidence of the disability in the Indian population during a 365-day period per 1,00,000 people was recorded to be 86. This high incident rate in conjunction with rapid population growth (Crude birth rate - 18 per 1000 people; (World Bank, n.d.)) is indicative of an impending social need and hence necessitates a more proactive and sensitive approach towards Persons with Disabilities.

The constitution of India ensures equality, freedom, justice and dignity of all individuals and implicitly mandates an inclusive society for all including persons with disabilities. To achieve this various missions and programs (namely Smart Cities Mission and Accessible India) from GoI have been launched. This has resulted in an increased recognition and emphasis on the needs and rights of people with disabilities across sectors and society at large.

Despite the positive trends in the realm of advocacy, rights, and social inclusion, much efforts are required to homogenise the definitions of disability (especially in the Indian context), improve the enumeration process (w.r.t quality of data and basic features) of people with disabilities, create robust politico-legal environment, improve economic opportunities in the IT, AT and other such sectors, and as a consequence lead to a better overall quality of life for Persons with Disabilities. Enabling these positive actions require concrete know how of the problem as well as the past efforts in that direction. However, it is often seen that efforts in mapping the landscape of disabilities have often limited themselves to either certain types of disabilities or have focussed on the purely the statistics (numbers) and have missed out on the context.

The report on "Status of Persons with Disability in India" will draw inspiration from these previous endeavours to map the global and the Indian landscape w.r.t to standards, and practices attempt to improve it by adding dimensions of policy, legislature, and socio-cultural

factors into the foray. It will also attempt to analyse the national and international trends in disability including concepts that support upward social mobility of Persons with Disabilities. The report will also probe the national data set of Census 2011 with focus on disability indicators. The report is not an attempt to provide a comprehensive narrative of the multi-dimensional concepts of disability and inclusion. Rather the report endeavours to focus on the key interventions locally and globally that have pushed people, institutions, and processes towards becoming more sensitive to the needs of Persons with Disabilities.

As an outcome of the process, it is envisaged that this holistic approach will support the roadmap of interventions that the BASIIC project has planned, draw comprehensive, descriptive and inferential conclusions on the current state of affairs on universal access, safety, and inclusion in India, and map the way forward for sustainable solutions for Persons with Disabilities in urban India.

Theory of Change

Anatomizing global demographic data tells us that one in seven people in the world face some sort of disability. Despite constituting such a significant proportion of the total population, Persons with Disabilities are subjected to a very challenging life. Often their 'disability' is perceived as their 'inability'. One of the greatest challenges lies in overcoming the social stigma that considers persons with disabilities as a liability. This, more often than not, leads to discrimination and oppression against Persons with Disabilities that inevitably leads to routine exclusion at all levels of society. It is because of this reason that civil society organisations, non-governmental organisations, and governments locally and globally have not been successful in effectively addressing disability issues.

Although disability has been an agenda in psychological domain for some time, there is limited empirical evidence on the life satisfaction of persons with disabilities, especially the effect of discrimination and factors that might mitigate it. Social exclusion and other forms of negative treatment directed toward people with a disability have been documented even among young children (Huckstadt & Shutts, 2014).

A meta-analysis of children's attitudes toward their disabled peers indicates that such negative biases are widespread (Nowicki & Sandieson, 2002). Such exclusion is often perceived to be inevitable based on a person's medical condition or physical limitations (Dunn and Brody, 2008, Yucker, 1994). Consequently, discrimination and ostracism toward people with a disability are frequently perceived as normal and justified, rather than intentional and harmful (Dovidio et al., 2011, Water Meyer and Gorgens, 2014).

In conceptualizing disability, it is possible to focus on diagnosis and treatment of different medical conditions. This approach defines people based on their prognosis and does not allow for inclusive group membership across disability types (Smart, 2009). "Considering disability as a medical pathology creates the foundation for prejudice and discrimination ... because disability is then difficult to disentangle from the individuals who live with them" (Dirth & Branscombe, 2017, p. 415). An alternative approach is to consider people with a disability as a vulnerable group with shared challenges that could be addressed by policy (Dirth & Branscombe, 2017; Scotch, 1988). For example, Foley et al. (2012) use focus groups to examine narratives about obstacles and coping among children with a disability. One of the most important themes to emerge is that they want to feel belonged. Indeed, many Persons with Disabilities have reported that social exclusion is more troublesome than the physical restrictions associated with their disability. Perhaps this is not surprising given that psychologists have long postulated the need to belong as a fundamental social motive with negative consequences when it is threatened (Baumeister & Leary, 1995).

However, how would one describe your sense of belonging to your local community?

Strange (2000) argued that a sense of belonging for persons with disabilities results from physically accessible spaces with psychological features that engender a sense of safety. To an extent, it is critical to be self-aware and understand one's rights, which also gets translated into having an understanding of the urban ecosystem one is part of. Knowledge of self refers to understanding one's preferences, goals, learning style, strengths, weaknesses, accommodation needs, and the characteristics of one's disability; while knowledge of rights refers to understanding personal rights, community rights, educational rights, steps to correct violations, and steps to advocate for change (Test, Fowler, Wood, Brewer, & Eddy, 2005). Communication and leadership include the ability to convey information to receive accommodations and support.

Our Strategic Framework is developed alongside a Theory of Change to guide and focus our work as we respond to the development needs of disabled people and the disability movement in the cities where we work. The aim is to move away from the 'charity-based

approach' to a more objective and sustainable 'rights-based approach'. BASIIC Programme envisions an urban ecosystem where Persons with Disabilities are able to enjoy an equitable quality of life and opportunities within an inclusive societal and institutional framework.

Project at a glance

National Institute of Urban Affairs (NIUA) in collaboration with Ministry of Housing and Urban Affairs (MoHUA) and support from the Department for International Development (DFID) of the UK Government is implementing the project "Building Accessible, Safe & inclusive Indian Cities (BASIIC)" through a Technical Assistance Support Unit (TASU) established at NIUA.

The principal goal of BASIIC is to build the capacities of Indian cities to be sensitive and responsive to the needs of the people with disabilities (Persons with Disabilities). The project aims to homogenise the definitions and concepts associated with Persons with Disabilities in India and to holistically build the capacity of practitioners to plan and implement with the tenets of universal access and inclusiveness. The project shall also actively work to gather the key stakeholders working on disabilities on a common platform and demonstrate innovative solutions – technologies, programs and service delivery models in the realm of universal access.

The key objectives of the project are:

- Consolidation of definitions, concepts, policies, provisions, and practice w.r.t. Persons with Disabilities in India.
- Mapping the major areas of opportunity in implementation of policies and provisions at city level and replicable solutions for making cities more accessible and inclusive for Persons with Disabilities.
- Develop a monitoring and evaluation framework for pilot cities to assess and improve their standards of universal access and inclusivity. The framework will be developed to be replicable for other Indian Cities to implement.

Approach and Methodology

The prime aim of the study is to assess the quality of life, livelihood condition, and socio-political narrative of the of Persons with Disabilities in Urban India. The study will attempt to critically analyse the global standards, practices, and our national commitments to the betterment of the Persons with Disabilities. To that end, the study will also look at the data from the Census 2011 to shed light on the demographic, spatial, and socio-economic factors that play an important part on the quality of life of Persons with Disabilities.

The study ascertains the following objectives based on its chosen approach;

- To map ample evidence on the vulnerabilities and risks faced by persons with disabilities, and other vulnerable groups in urban areas in India. Further understand how this affects their overall physical

and social development, through building more knowledge on the correlation between poverty and disability.

- To analyse the government policies and programmes w.r.t to its effectiveness in objectively reaching out to the intended beneficiaries.
- To understand and identify the role Planners can play to actively incorporate the guidelines and schemes into practice.

Limitations of the study

Statistical data from reliable government sources have been prioritized in the study, however substantiating those conclusions from other data sources with acceptability and credibility, has been a challenge. Accessing unit level data on Persons with Disabilities was found to be a critical obstacle in arriving at definitive suggestions. Despite the large body of work in the domain of disability it was challenging to access data that could paint a fair picture at ward, community, or even household level.

In Census 2011, the questions on disability were asked from one member of the household during the population enumeration phase. The Census manual states that every possible effort is to be made to seek information on disability from the person with disability herself/himself, if she/he was present at the time of Census and was able to provide information. However, it is not possible to know what proportion of the data were proxy and self-reported. In the household surveys, the information on disability was collected from the head of the household or an adult respondent. Therefore,

disability data was collected through proxy reporting in the surveys; however, it is not entirely clear whether the data were proxy-reported or self-reported or a mix of both in the Census 2011. The quality of data collection in the Census and surveys across the states could have resulted in measurement error. Several quality issues around data collection methods, skills and capacity of interviewers who collect data, and wording of questions have been highlighted for large-scale data collection in India, including the Census and household surveys, as a major reason for poor comparability of data across the various data sources.

Another limitation of the study is the lack of credible data in areas concerning impact of poor urban planning on vulnerable groups. This makes it difficult to draw an accurate picture of the multi-dimensional vulnerabilities experienced vulnerable groups such as children, persons with disabilities and elderly. The lack of data related to the urban risks and consequent vulnerabilities faced by persons with disabilities makes it difficult to measure the intensity of the problems and provision of appropriate services.

It is clear that the current estimates from the Census and surveys seem much lower than would be expected at the population level. There are multiple systemic gaps leading to the poor mapping and analysis of data regarding persons with disabilities in India. Hence, the Status of disability in India attempts to contextualize the current challenge that Persons with Disabilities are dealing, with the available data, reports, and narratives.

Understanding Inclusion

Inclusion is a multidimensional concept and often necessitates a context to be meaningful. The Cambridge Dictionary in the context of social sciences defines inclusion as "the idea that everyone should be able to use the same facilities, take part in the same activities, and enjoy the same experiences, including people who have a disability or other disadvantage". The definition in the current context is significant owing to the emphasis that an individual despite a disability or disadvantage should be able to fully experience the world around them. In other words, inclusion means that all people, regardless of their abilities, disabilities, or health care needs, have the right to be respected and appreciated as valuable members of their communities, participate in recreational activities in neighbourhood settings, work at jobs in the community that pay a competitive wage and have careers that use their capacities to the fullest, attend general education classes with peers from preschool through college and continuing education. (Anon., n.d.)

However, for the above to be true we have to assume a social system that is bereft of inherent and often inconceivable exclusionary practices. These practices create barriers that limit certain groups i.e. people with disabilities, from fully participating in the country's social, legal, political, and economic opportunities. There is a moral imperative to address social exclusion. Left unaddressed, the exclusion of disadvantaged groups can be costly. And the costs —whether social, political, or economic — are likely to be substantial. At the individual level, the loss of wages, lifetime earnings, poor education, and employment outcomes are the commonest measures of costs. At the national level,

the economic cost of social exclusion can be captured by forgone gross domestic product (GDP) and human capital wealth. Exclusion or the perception of exclusion may cause certain groups to opt out of markets, services, and spaces, with costs to both individuals and the economy. (Das, n.d.)

Hence, it is vital that national structures and systems adopt social inclusion in approach and in their *laissez-faire*. The slogan of "leave no one behind" must be given centre focus in policy making of the country. This is especially true for a country like India that is rapidly evolving and expanding its urban landscape, whilst attempting to bring equity in access to opportunities for all. However, given the multidimensional nature of the term, inclusion in practice becomes a subjective matter. To assist countries and states in arriving to a unanimous and acceptable definition of disability and inclusion the UN General Assembly adopted the United Nation Convention for Rights of People with Disabilities (UNCRPD).

The Convention is intended as a human rights instrument with an explicit, social development dimension. It adopts a broad categorization of persons with disabilities and reaffirms that all persons with all types of disabilities must enjoy all human rights and fundamental freedoms. It clarifies and qualifies how all categories of rights apply to persons with disabilities and identifies areas where adaptations have to be made for persons with disabilities to effectively exercise their rights and areas where their rights have been violated, and where protection of rights must be reinforced.

Important Fact

- ✓ The UNCRPD Convention was negotiated during eight sessions of an Ad Hoc Committee of the General Assembly from 2002 to 2006, making it the fastest negotiated human rights treaty.

Global Standards on Disability

UNCRPD

The United Nations Convention on the Rights of Persons with Disability (UNCRPD) is an international document aimed at protecting the human rights and dignity of persons with a disability (PWD). The UNCRPD was adopted by the United Nations General Assembly in December 2006 and entered into force in May 2008. The Committee on the Rights of Persons with Disabilities is an independent body responsible for monitoring the implementation of the convention by participating members. To date, 177 states have ratified the document. Of these states, 92 also ratified an optional protocol that allows the monitoring committee to investigate complaints related to alleged violations.

Persons with disabilities, according to UNCRPD, include "those who have long-term physical, mental, intellectual or sensory impairments which in interaction with various barriers may hinder their full and effective participation in society on an equal basis with others." The Convention on the Rights of Persons with Disabilities presents its principles which consist of;

- Respect for inherent dignity, individual autonomy including the freedom to make one's own choices, and independence of persons;
- Non-discrimination;
- Full and effective participation and inclusion in society;
- Respect for difference and acceptance of persons with disabilities as part of human diversity and humanity;
- Equality of opportunity;
- Accessibility;
- Equality between men and women;

These principles furthermore become a legal basis for fulfilling the rights of persons with disabilities in all policies and programs. (UN General Assembly, 2006)

Following its principles, Article 4 of UNCRPD lays out the obligations of the State Parties, including:

- Respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.
- State Parties undertake to ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability.

- With regard to economic, social and cultural rights, each State Party undertakes to take measures to the maximum of its available resources and, where needed, within the framework of international cooperation, with a view to achieving progressively the full realization of these rights, without prejudice to those obligations contained in the present Convention that are immediately applicable according to international law.
- In the development and implementation of legislation and policies to implement the present Convention, and in other decision-making processes concerning issues relating to persons with disabilities, States Parties shall closely consult with and actively involve persons with disabilities, including children with disabilities, through their representative organizations.
- Nothing in the present Convention shall affect any provisions which are more conducive to the realization of the rights of persons with disabilities and which may be contained in the law of a State Party or international law in force for that State.
- The provisions of the present Convention shall extend to all parts of federal States without any limitations or exceptions.

Defining Accessibility

UNCRPD sets forth accessibility as a basic right and nudges the governments to make reasonable accommodations "to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications, including information and communications technologies and systems, and to other facilities and services open or provided to the public, both in urban and in rural areas." UNCRPD defines reasonable accommodation as "necessary and appropriate modification and adjustments not imposing a disproportionate or undue burden, where needed in a particular case, to ensure to persons with disabilities the enjoyment or exercise on an equal basis with others of all human rights and fundamental freedoms". An alternative to reasonable accommodation is 'universal design' which seeks the universal usability of products, environments, programs and services without the need for adaptation or specialized design. (UNESCO, n.d.)

Alternative definition of Disability

'Disability is an umbrella term, covering impairments, activity limitations, and participation restrictions. An impairment is a problem in body function or structure; an activity limitation is a difficulty encountered by an individual in executing a task or action; while a participation restriction is a problem experienced by an individual in involvement in life situations.'

'Disability is thus not just a health problem. It is a complex phenomenon, reflecting the interaction between features of a person's body and features of the society in which he or she lives. Overcoming the difficulties faced by people with disabilities requires interventions to remove environmental and social barriers'. (WHO, n.d.)

Sustainable Development Goals and Disability

In September 2015, the General Assembly adopted the 2030 Agenda for Sustainable Development that includes 17 Sustainable Development Goals (SDGs). Building on the principle of "leaving no one behind", the new Agenda emphasizes a holistic approach to achieving sustainable development for all. The SDGs also explicitly include disability and persons with disabilities 11 times. Disability is referenced in multiple parts of the SDGs, specifically in the parts related to education, growth and employment, inequality, accessibility of human settlements, as well as data collection and the monitoring of the SDGs. (UNESA, n.d.)

Disability is referenced in various parts of the SDGs and specifically in parts related to education, growth and employment, inequality, accessibility of human settlements, as well as data collection and monitoring of the SDGs, for instance:

- **Goal 4** on inclusive and equitable quality education and promotion of life-long learning opportunities for all focuses on eliminating gender disparities in education and ensuring equal access to all levels of education and vocational training for the vulnerable, including persons with disabilities.
- **Goal 8** emphasises to promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all, the international community aims to achieve full and productive employment and decent work for all women and men, including for persons with disabilities, and equal pay for work of equal value.
- **Goal 10** strives to reduce inequality within and among countries by empowering and promoting the social, economic and political inclusion of all, including persons with disabilities.
- **Goal 11** would work to make cities and human settlements inclusive, safe and sustainable. To realize this goal, Member States are called upon to provide access to safe, affordable, accessible and sustainable transport systems for all, improving road safety, notably by expanding public transport, with special attention to the needs of those in vulnerable situations, such as persons with disabilities. In

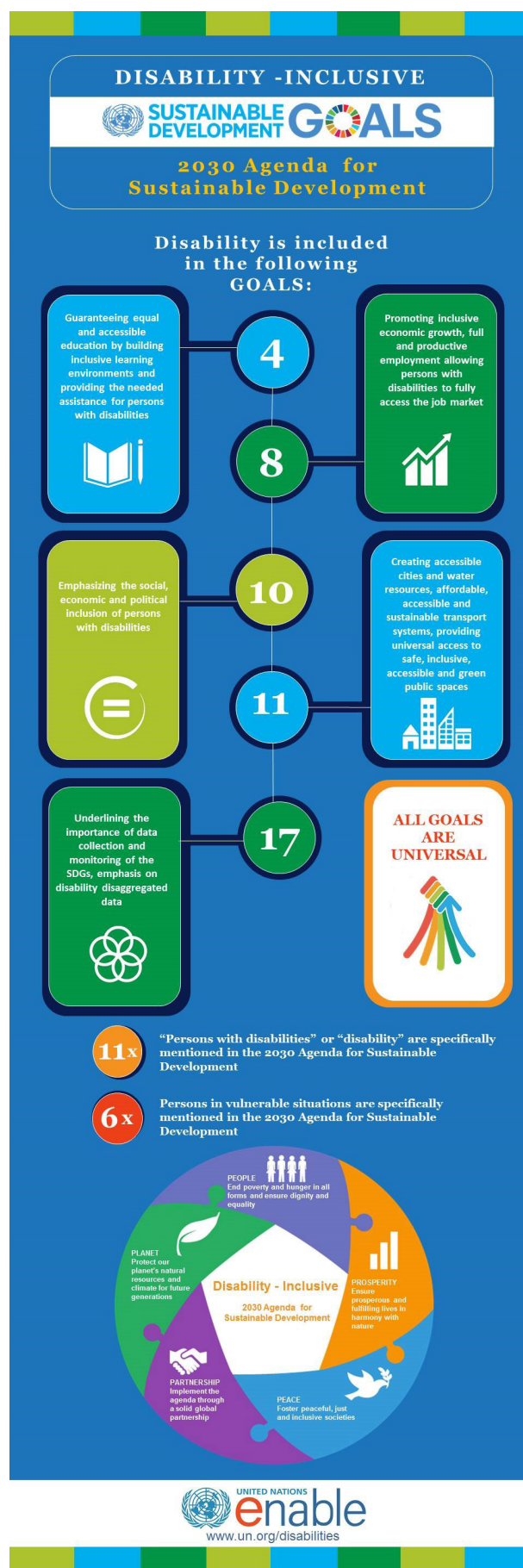


Figure 2 Disability Inclusive Goals - SDG

addition, the proposal calls for providing universal access to safe, inclusive and accessible, green and public spaces, particularly for persons with disabilities.

- **Goal 17** stresses that in order to strengthen the means of implementation and revitalize the global partnership for sustainable development, the collection of data and monitoring and accountability of the SDGs are crucial. Member States are called upon to enhance capacity-building support to developing countries, including least developed countries (LDCs) and small island developing states (SIDS), which would significantly increase the availability of high-quality, timely and reliable data that is also disaggregated by disability. (UNESA, n.d.)

Biwako Millennium Framework

In October 2002, Governments at the High-level Intergovernmental Meeting to Conclude the Asian and Pacific Decade of Disabled Persons 1993-2002, adopted the "Biwako Millennium Framework for Action towards an Inclusive, Barrier-free and Rights-based Society for Persons with Disabilities in Asia and the Pacific" as the regional policy guideline for the new decade. The "Biwako Millennium Framework" outlines issues, action plans and strategies towards an inclusive, barrier-free and rights-based society for persons with disabilities. To achieve the goal, the framework identifies seven priority areas for action, in which critical issues, targets with specific timeframe and actions are specified. In all, 21 targets and 17 strategies supporting the achievement of all the targets are identified.

The following summarises the seven priority areas for action, the targets, strategies, timeframe and supporting/monitoring mechanisms.

- Self-help organisations of persons with disabilities and related family and parent associations.
- Women with disabilities.
- Early detection, early intervention and education.
- Training and employment, including self-employment.
- Access to built environment and public transport.
- Access to information and communications, including information, communication and assistive technologies.
- Poverty alleviation through social security and livelihood programmes.

(Hooi, n.d.)

Inaccessibility to the built environment, including public transport systems, is still the major barrier for persons with disabilities. This problem will only be exacerbated, as the number of older people with disabilities increases in the region. Universal design approaches benefit all people in society, including older persons, pregnant women and parents with young children. Its economic benefits have been legitimised, yet substantive initiatives at policy level have not been taken. Three targets are set to improve the situation:

- The Government should adopt and enforce acces-

sibility standards for planning of public facilities, infrastructure and transport, including those in rural/ agricultural contexts.

- Existing public transport systems and all new and renovated public transport systems should be made accessible as soon as practicable.
- All international and regional funding agencies for infrastructure development should include universal and inclusive design concepts in their loan/grant award criteria.

(Hooi, n.d.) (UNEC, n.d.)

Sendai Framework for Disaster Risk Reduction (SFDRR)

The Sendai Framework for Disaster Risk Reduction 2015-2030 was adopted at the Third United Nations World Conference on Disaster Risk Reduction, held from 14 to 18 March 2015 in Sendai, Miyagi, Japan. The framework highlights the needs of people with disabilities to a much greater extent than its preceding document i.e. the Hyogo Framework for Action 2005-2015 (HFA).

The needs of the people with disabilities esp. in disaster risk reduction has been emphasised throughout the document. The first direct mention of individuals with disabilities appears in the preamble of the SFDRR under Paragraph 7, which calls for "a more people-centred preventive approach to disaster risk" (UNISDR 2015 a, p. 5). The SFDRR states that "While recognizing their leading, regulatory and coordination role, Governments should engage with relevant stakeholders, including women, children and youth, persons with disabilities, poor people, migrants, indigenous peoples, volunteers, the community of practitioners and older persons in the design and implementation of policies, plans and standards" (UNISDR 2015 a, p. 5).

In addition, references to persons with disabilities in Paragraph 7 in the context of design and implementation of policies, plans, and standards are significant. Also, in Paragraph 7, the SFDRR contains several important disability-related constructs that become highly relevant in disaster situations. The disability-related constructs of inclusion and accessibility appear as common terms in discussing disaster risk reduction and state "Disaster risk reduction practices need to be "inclusive and accessible in order to be efficient and effective" (UNISDR 2015 a, p. 5). Within the disability community, "accessibility" is multifaceted and has been a long-standing goal in the areas of education, transportation, housing, and employment. "Accessibility" not only refers to physical access, but access to services and resources. It is a term that applies, for example, to how individuals in wheelchairs can board public buses or enter public buildings over ramps, but also to how individuals who are blind access public documents through Braille or how Deaf individuals can access public announcements on television through closed captions. (Kang, 2015)

DISABILITY TIMELINE

Key Events in Modern History promoting Inclusion

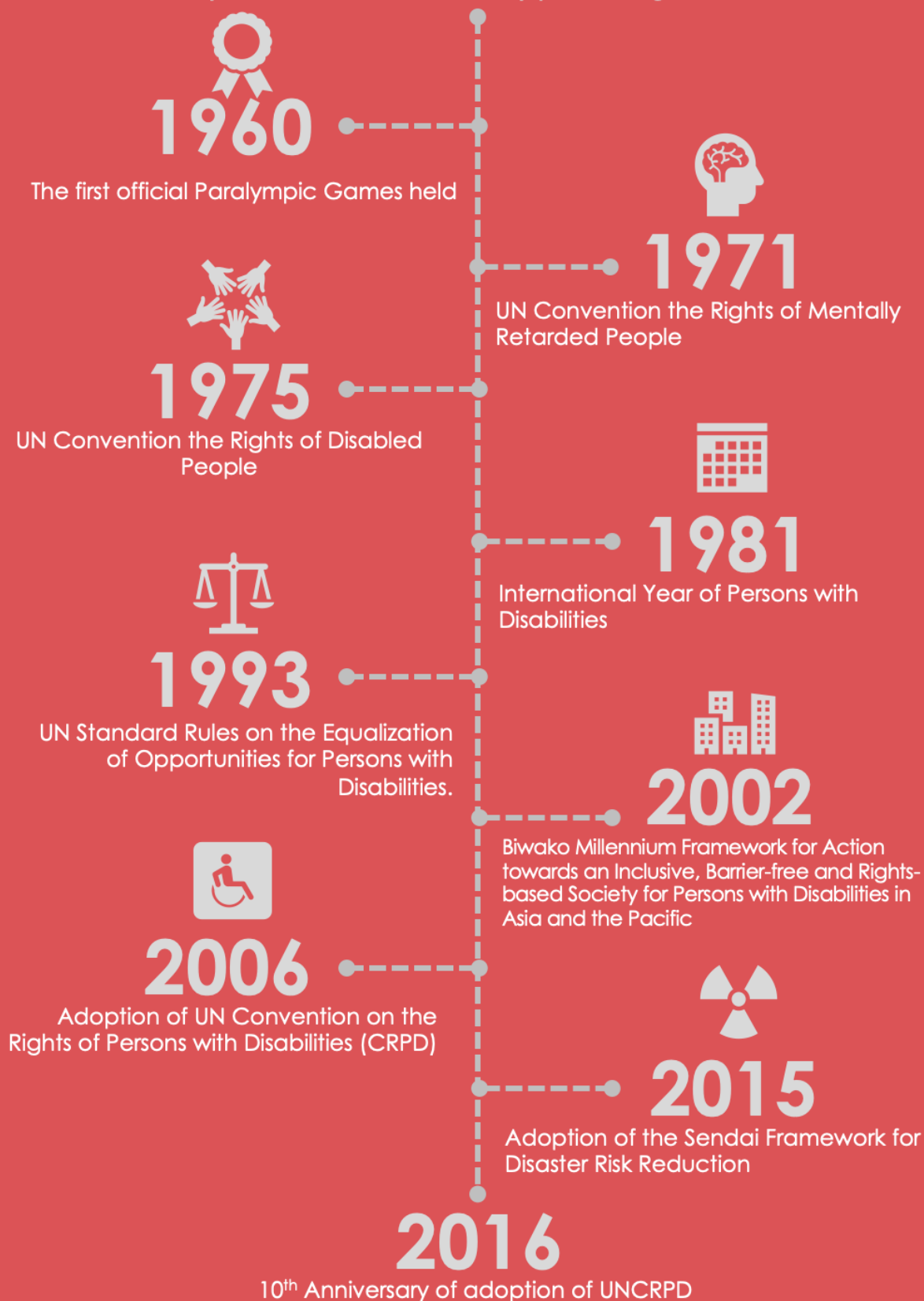


Figure 3 Timeline of global events promoting inclusion

Political & Legal Environment in India

PWD Act 1995, The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995)

The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 came into force on February 7, 1996. The PWD (Equal Opportunities, Protection of Rights, and Full Participations) Act, 1995 was enacted to give an effect to the "Proclamation on the Full Participation and Equality of the People with Disabilities in the Asian and Pacific Region." (Department of Empowerment of Persons with Disabilities, n.d.). The Proclamation was issued in a meeting of the Economic and Social Commission for Asia and the Pacific Region in December 1992 at Beijing, to launch the "Asian and Pacific Decade of Disabled Persons 1993–2002."

The Act listed seven conditions of disabilities, which were blindness, low vision, leprosy cured, hearing impairment, locomotor disability, mental retardation, and mental illness. The Act adopted an approach of social welfare in respect of PWD and the main focus was on prevention and early detection of disabilities, education and employment of the PWD. The Act also provided 3% reservation in Government jobs and educational institutions. It stressed on making the barrier-free situations as a measure of non-discrimination. (John, 2017). The Act provides for both the preventive and promotional aspects of rehabilitation like education, employment and vocational training, reservation, research and manpower development, creation of barrier-free environment, rehabilitation of persons with disability, unemployment allowance for the disabled, special insurance scheme for the disabled employees and establishment of homes for persons with severe disability etc. (Ministry of Law, n.d.)

The act further emphasizes on the following aspects of the areas;

Prevention and early detection of disabilities

- Surveys, investigations and research shall be conducted to ascertain the cause of occurrence of disabilities
- Various measures shall be taken to prevent

disabilities. Staff at the Primary Health Centre shall be trained to assist in this work

- All the Children shall be screened once in a year for identifying 'at-risk' cases
- Awareness campaigns shall be launched and sponsored to disseminate information
- Measures shall be taken for pre-natal, peri natal, and post-natal care of the mother and child

Education

- Every child with disability shall have the rights to free education till the age of 18 years in integrated schools or special schools
- Appropriate transportation, removal of architectural barriers and restructuring of modifications in the examination system shall be ensured for the benefit of children with disabilities
- Children with disabilities shall have the right to free books, scholarships, uniform and other learning material
- Special Schools for children with disabilities shall be equipped with vocational training facilities
- Non-formal education shall be promoted for children with disabilities
- Teachers' Training Institutions shall be established to develop requisite manpower
- Parents may move to an appropriate forum for the redressal of grievances regarding the placement of their children with disabilities

Employment

3% of vacancies in government employment shall be reserved for people with disabilities, 1% each for the persons suffering from:

- Blindness or Low Vision
- Hearing Impairment
- Locomotor Disabilities & Cerebral Palsy

Suitable Scheme shall be formulated for;

- The training and welfare of persons with disabilities
- The relaxation of upper age limit
- Regulating the employment
- Health and Safety measures and creation of a non-handicapping, environment in places where persons with disabilities are employed

Government Educational Institutes and other Educa-

tional Institutes receiving grant from Government shall reserve at least 3% seats for people with disabilities. No employee can be sacked or demoted if they become disabled during service, although they can be moved to another post with the same pay and condition. No promotion can be denied because of impairment.

Affirmative Action

Aids and Appliances shall be made available to the people with disabilities. Allotment of land shall be made at concessional rates to the people with disabilities for;

- House
- Business
- Special Recreational Centres
- Special Schools
- Research Schools
- Factories by Entrepreneurs with Disability

Non-Discrimination

- Public building, rail compartments, buses, ships and air-crafts will be designed to give easy access to the disabled people
- In all public places and in waiting rooms, the toilets shall be wheel chair accessible.
- Braille and sound symbols are also to be provided in all elevators (lifts) All the places of public utility shall be made barrier- free by providing the ramps

Research and Manpower Development

- Research in the following areas shall be sponsored and promoted
- Prevention of Disability Rehabilitation including community-based rehabilitation
- Development of Assistive Devices
- Job Identification On-site
- Modifications of Offices and Factories
- Financial assistance shall be made available to the universities, other institutions of higher learning, professional bodies and non-government research-units or institutions, for undertaking research for special education, rehabilitation and manpower development

Social Security

- Financial assistance to non-government organizations for the rehabilitation of persons with disabilities
- Insurance coverage for the benefit of the government employees with disabilities.
- Un employment allowance to the people with disabilities who are registered with the special employment exchange for more than a year and could not find any gainful occupation

Grievance Redressal

- In case of violation of the rights as prescribed in this act, people with disabilities may move an application to the Chief Commissioner for Persons with Disabilities in the Centre, or Commissioner for Persons with Disabilities in the State

(Think Change India, n.d.)

The Rights of Persons with Disabilities Act, 2016

On 16th Dec 2016, the Government of India passed the "The Rights of Persons with Disabilities Bill - 2016". The bill formalized the Rights of Persons with Disabilities Act (RPWD) Act and replaced the existing PwD Act 1995. The New Act was brought into effect to synergise the existing law in line with the United National Convention on the Rights of Persons with Disabilities (UNCRPD), to which India is a signatory. The bill was passed with the vision that "... It will fulfil the obligations on the part of India in terms of UNCRD. Further, the new law will not only enhance the Rights and Entitlements of Divyangjan but also provide effective mechanism for ensuring their empowerment and true inclusion into the Society in a satisfactory manner. (Bureau, 2016)

In the RPWD Act, 2016, the list of disabilities was expanded from 7 to 21 conditions to include conditions i.e. cerebral palsy, dwarfism, muscular dystrophy, acid attack victims, hard of hearing, speech and language disability, specific learning disabilities, autism spectrum disorders, chronic neurological disorders such as multiple sclerosis and Parkinson's disease, blood disorders such as haemophilia, thalassemia, and sickle cell anaemia, and multiple disabilities. The RPWD Act, 2016 provides that "the appropriate Government shall ensure that the PWD enjoy the right to equality, life with dignity, and respect for his or her own integrity equally with others." The Government is to take steps to utilize the capacity of the PWD by providing appropriate environment. It is also stipulated in the section 3 that no PWD shall be discriminated on the ground of disability, unless it is shown that the impugned act or omission is a proportionate means of achieving a legitimate aim and no person shall be deprived of his personal liberty only on the ground of disability. (John, 2017)

The bill also extensively talks about the need for inclusion and safety for Persons with Disabilities in all sectors and has attempted to be comprehensive in its application. Some of the key areas that have been talked in the bill w.r.t inclusion and safety are;

- Access to inclusive education, vocational training, and self-employment of disabled persons without discrimination and buildings, campuses, and various facilities are to be made accessible to the PWD and their special needs are to be addressed.
- Necessary schemes and programs to safeguard and promote the PWD for living in the community are to be launched by the Government.
- Appropriate healthcare measures, insurance schemes, and rehabilitation programs for the PWD are also to be undertaken by the Government.
- Cultural life, recreation, and sporting activities are also to be taken care of.
- All Government institutions of higher education and those getting aid from the Government are required to reserve at least 5% of seats for persons with benchmark disabilities.

- Four percent reservation for persons with benchmark disabilities is to be provided in posts of all Government establishments with differential quotas for different forms of disabilities.
- Incentives to employer in private sector are to be given who provide 5% reservation for persons with benchmark disability.
- Special employment exchanges for the PWD are to be set up.
- Awareness and sensitization programs are to be conducted and promoted regarding the PWD.
- Standards of accessibility in physical environment, different modes of transports, public building and areas are to be laid down which are to be observed mandatorily and a 5-year time limit is provided to make existing public building accessible.
- Access to information and communication technology is to be ensured.
- The Central and State Advisory Boards on disability are to be constituted to perform various functions assigned under the Act. District level
- Committees are also to be constituted by the State Government. Chief Commissioner and two Commissioners for PWD are to be appointed by the Central Government at the central level for the purposes of the Act.
- State Commissioners for PWD are to be appointed by the State Governments. National Funds for PWD and State Funds for PWD are to be constituted at the central and state levels respectively by the appropriate Governments.
- Contraventions of the provisions of the Act have been made punishable by a fine of an amount up

to ten thousand for first contravention and fifty thousand extendable up to five lakhs for subsequent contraventions.

- Atrocities on PWD have been made punishable with imprisonment of 6 months extendable to 5 years and with fine.
- Fraudulently availing of the benefits meant for PWD has also been made punishable.

(John, 2017)

The RPWD Act was formulated to fill in the gaps of the Persons with Disabilities Act of 1995. To this end it was able to iron out the shortcomings of the Persons with Disabilities Act to a large extent. By incorporating larger number of disabilities, benchmarking reservation in a number of sectors, and most importantly creating legal machineries that were focussed on serving Persons with Disabilities. These welcome additions to the Act bode well to augment inclusion, access, and safety for Persons with Disabilities in India. However, adherence and implementation of the act has been less than ideal in the urban context.

A 2018 study on the implementation status of RPWD Act found that over 50 per cent of the states have failed to notify the State rules, despite the act mandating the same within six months of its enforcement. The same study also found that a similar number of states have failed to constitute State Advisory Board or notify Special courts in the districts. Moreover, only one state was identified to have increased the quantum of assistance for Persons with Disabilities in the social security schemes ((NCPEDP), 2018).

Policies and Schemes for Persons with Disabilities in India

National Policy for Persons with Disabilities

The National Policy for Persons with Disability was formulated in February 2006. The Policy was an important milestone for GoI in its endeavour to be compliant to the UNCRPD and the Biwako Millennium Framework, to which it is a signatory. The policy acknowledges that Persons with Disabilities are a valuable human resource for the country and seeks to create an environment that provides them equal opportunities, protection of their rights and full participation in society. (GoI, 2006)

The policy emphasizes on the following areas:

1. **Prevention of Disabilities** - Since disability, in a large number of cases, is preventable, the policy lays a strong emphasis on prevention of disabilities. It calls for programme for prevention of diseases, which result in disability and the creation of awareness regarding measures to be taken for prevention of disabilities during the period of pregnancy and thereafter to be intensified and their coverage expanded.
2. **Rehabilitation Measures** - Rehabilitation measures can be classified into three distinct groups:
 - Physical rehabilitation, which includes early detection and intervention, counselling & medical interventions and provision of aids & appliances. It will also include the development of rehabilitation professionals.
 - Educational rehabilitation including vocational education and
 - Economic rehabilitation for a dignified life in society.
3. **Women with disabilities** - Women with disabilities require protection against exploitation and abuse. Special programmes will be developed for education, employment and providing of other rehabilitation services to women with disabilities keeping in view their special needs. Special educational and vocation training facilities will be setup. Programmes will be undertaken to rehabilitate abandoned disabled women/ girls by encouraging their adoption in families, support to house them and impart them training for gainful employment skills. The Government will encourage the projects where representation of women with disabilities is ensured at least to the extent of twenty five percent of total beneficiaries.
4. **Children with Disabilities** - Children with disabilities are the most vulnerable group and need special attention. The Government would strive to: -
 - Ensure right to care, protection and security for children with disabilities;
 - Ensure the right to development with dignity and equality creating an enabling environment where children can exercise their rights, enjoy equal opportunities and full participation in accordance with various statutes.
 - Ensure inclusion and effective access to education, health, vocational training along with specialized rehabilitation services to children with disabilities.
 - Ensure the right to development as well as recognition of special needs and of care, and protection of children with severe disabilities.
5. **Barrier-free environment** - Barrier-free environment enables people with disabilities to move about safely and freely, and use the facilities within the built environment. The goal of barrier free design is to provide an environment that supports the independent functioning of individuals so that they can participate without assistance, in everyday activities. Therefore, to the maximum extent possible, buildings / places / transportation systems for public use will be made barrier free.
6. **Issue of Disability Certificates** - The Government of India has notified guidelines for evaluation of the disabilities and procedure for certification. The Government will ensure that the persons with disabilities obtain the disability certificates without any difficulty in the shortest possible time by adoption of simple, transparent and client-friendly procedures.

7. **Social Security** - Disabled persons, their families and care givers incur substantial additional expenditure for facilitating activities of daily living, medical care, transportation, assistive devices, etc. Therefore, there is a need to provide them social security by various means. Central Government has been providing tax relief to persons with disabilities and their guardians. The State Governments / U.T. Administrations have been providing unemployment allowance or disability pension. The State Governments will be encouraged to develop a comprehensive social security policy for persons with disabilities.
8. **Promotion of Non-Governmental Organizations (NGOs)** - The National Policy recognizes the NGO sector as a very important institutional mechanism to provide affordable services to complement the endeavours of the Government. The NGO sector is a vibrant and growing one. It has played a significant role in the provisions of services for persons with disabilities. Some of the NGOs are also undertaking human resource development and research activities. Government has also been actively involving them in policy formulation, planning, implementation, monitoring and has been seeking their advice on various issues relating to persons with disabilities. Interaction with NGOs will be enhanced on various disability issues regarding planning, policy formulation and implementation. Networking, exchange of information and sharing of good practices amongst NGOs will be encouraged and facilitated. Steps will be taken to encourage and accord preference to NGOs working in the underserved and inaccessible areas. Reputed NGOs shall also be encouraged to take up projects in such areas.
9. **Collection of regular information on Persons with Disabilities** - There is a need for regular collection, compilation and analysis of data relating to socio-economic conditions of persons with disabilities. The National Sample Survey Organization has been collecting information on Socio-economic conditions of persons with disabilities on regular basis once in ten years since 1981. The Census has also started collection of information on persons with disabilities from the Census-2001. The National Sample Survey Organization will have to collect the information on persons with disabilities at least once in five years. The differences in the definitions adopted by the two agencies will be reconciled.
10. **Research** - For improving the quality of life of persons with disabilities, research will be supported on their socio-economic and cultural context, cause of disabilities, early childhood education methodologies, development of user-friendly aids and appliances and all matters connected with disabilities which will significantly alter the quality of their life and civil society's ability to respond to their concerns. Wherever persons with disabilities are subjected to research interventions, their or their family member or caregiver's consent is mandatory.
11. **Sports, Recreation and Cultural life** - The contribution of sports for its therapeutic and community spirit is undeniable. Persons with disabilities have right to access sports, recreation and cultural facilities. The Government will take necessary steps to provide them opportunity for participation in various sports, recreation and cultural activities.
(Ministry of Social Justice and Welfare, n.d.)

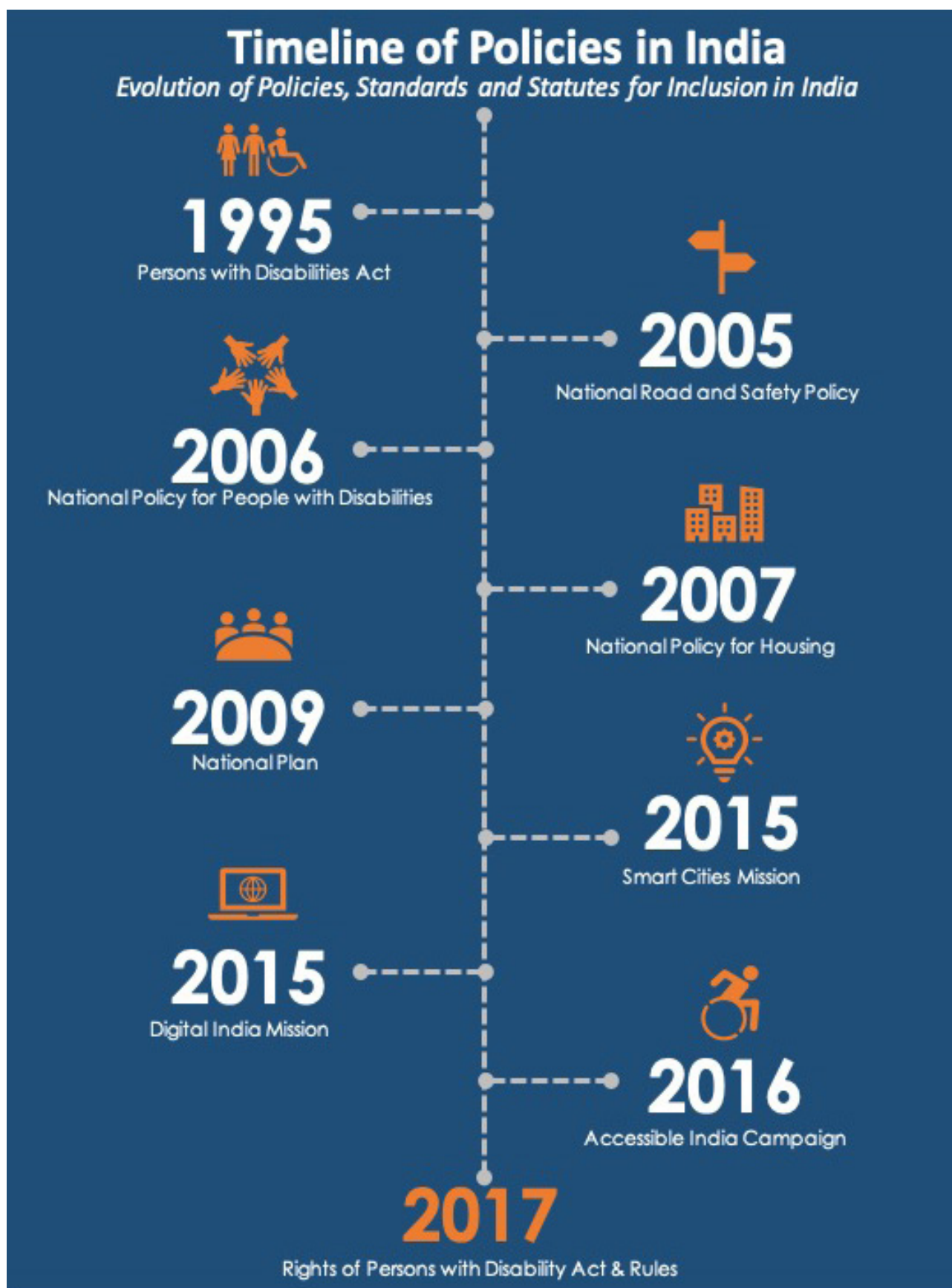


Figure 4 Timeline of Policies in India

Assistance To Disabled Persons For Purchase/Fitting Of Aids/Appliances (Adip)

The ADIP scheme is one of the oldest schemes under the Gol's endeavours for Persons with Disabilities. The scheme was launched in 1981, but came into focus in 1995 after the enactment of the PwD Act. The main objective of the ADIP Scheme is to provide grants-in-aid to the various implementing agencies (National Institutes/ Composite Regional Centres/Artificial Limbs Manufacturing Corporation of India (ALIMCO)/District Disability Rehabilitation Centres/State Handicapped Development Corporations/other local bodies/ CSOs) so that they are in a position to assist needy disabled Persons in procuring durable, sophisticated and scientifically manufactured, modern, standard aids and appliances to promote physical, social and psychological rehabilitation of persons with disabilities through reducing the effects of disabilities and at the same time enhance their economic potential. Assistive devices are given to Persons with Disabilities with an aim to improve their independent functioning, and to arrest the extent of disability and occurrence of secondary disability. The scheme is also designed to support beneficiaries for corrective surgeries, whenever required, before providing an assistive device.

A key focus area under the scheme was to hold camps under the Sarv Siksha Abhiyan (SSA) Scheme under the Ministry of Human Resource Development (MHRD). As part of the joint endeavour the scheme Assistive aids and appliances are distributed to the children below 14 years of age and those attending Schools under the Sarv Shiksha Abhiyan (SSA). As per the agreement with the Ministry, Artificial Limbs Manufacturing Corporation of India (ALIMCO), the implementing agency, was reimbursed 40% of the expenditure by the State Government Authorities and remaining 60%

of the expenditure through grants under ADIP Scheme. Arrangement for distribution of aids and assistive devices to Students with Disabilities (SWDs) studying in 9-12 standard classes (14-18 years of age) on cost-sharing basis similar to that of ADIP-SSA has also been made with Rastriya Madhyamic Shiksha Abhiyan (RMSA) Scheme of Ministry of Human Resource Development. More recently, convergence have been made between ADIP and Samgra Shiksha Abhiyan Scheme on cost sharing basis in the ratio of 60:40 between the Department of Empowerment of Person with Disabilities (DEPwD) and Ministry of HRD during the remaining period of 14th Finance Commission i.e. up to 31.03.2020.

The DEPwD under the ADIP scheme has been able to extend the benefits of the program to a number of people over the course of two decades. Although the efforts of the scheme in improving the quality of life of the Persons with Disabilities is commendable, yet the numbers leave a lot to be desired considering the scale of investments.

Table 1 Disability Aids distributed under ADIP Scheme

Type of Disability	Aids distributed under the Scheme
Visually Impaired	84
Leprosy Affected	46
Intellectual and Developmental Disabilities	72
Hearing Impaired	32
Others	34
Total	268

Source: Ministry of Social Justice, 2019

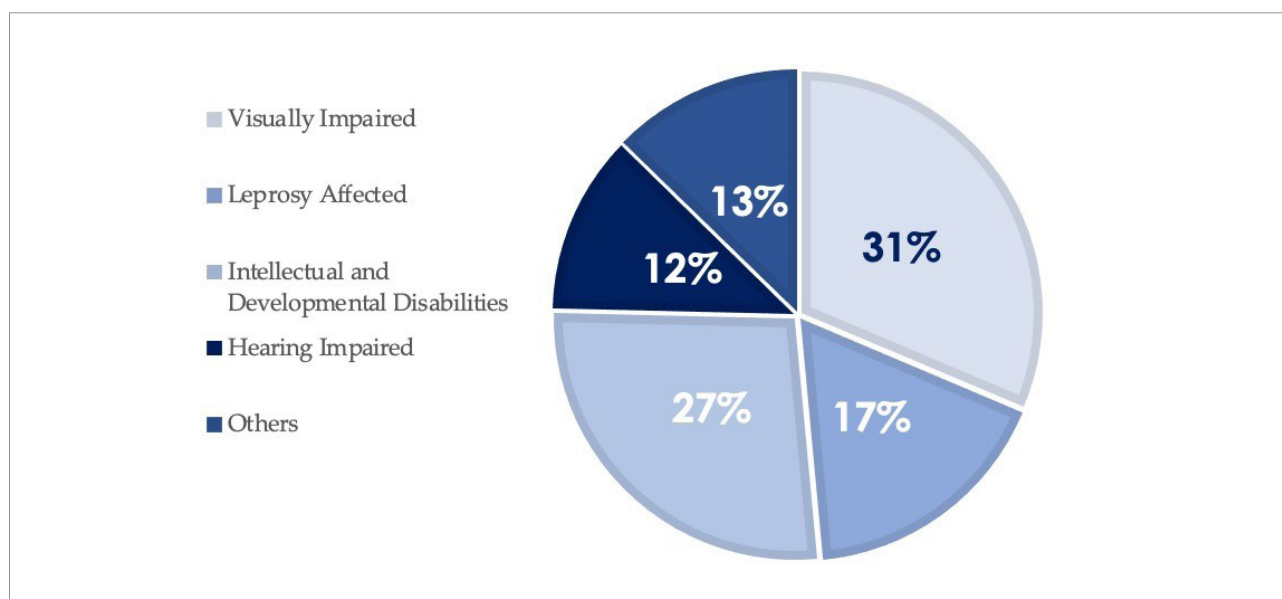


Figure 5 Disability wise aids distributed under ADIP scheme

Source: Ministry of Social Justice, 2019

A cursory assessment of the financial achievements (2014-19) of the ADIP scheme shows that against the total allocated budget of ~INR 780 Crore (Cr), the scheme was able to disburse ~INR 830 Cr in the last

five years. The highest expenditure was recorded in 2018-19 with INR 216.19 Cr. disbursed during the entire financial year.

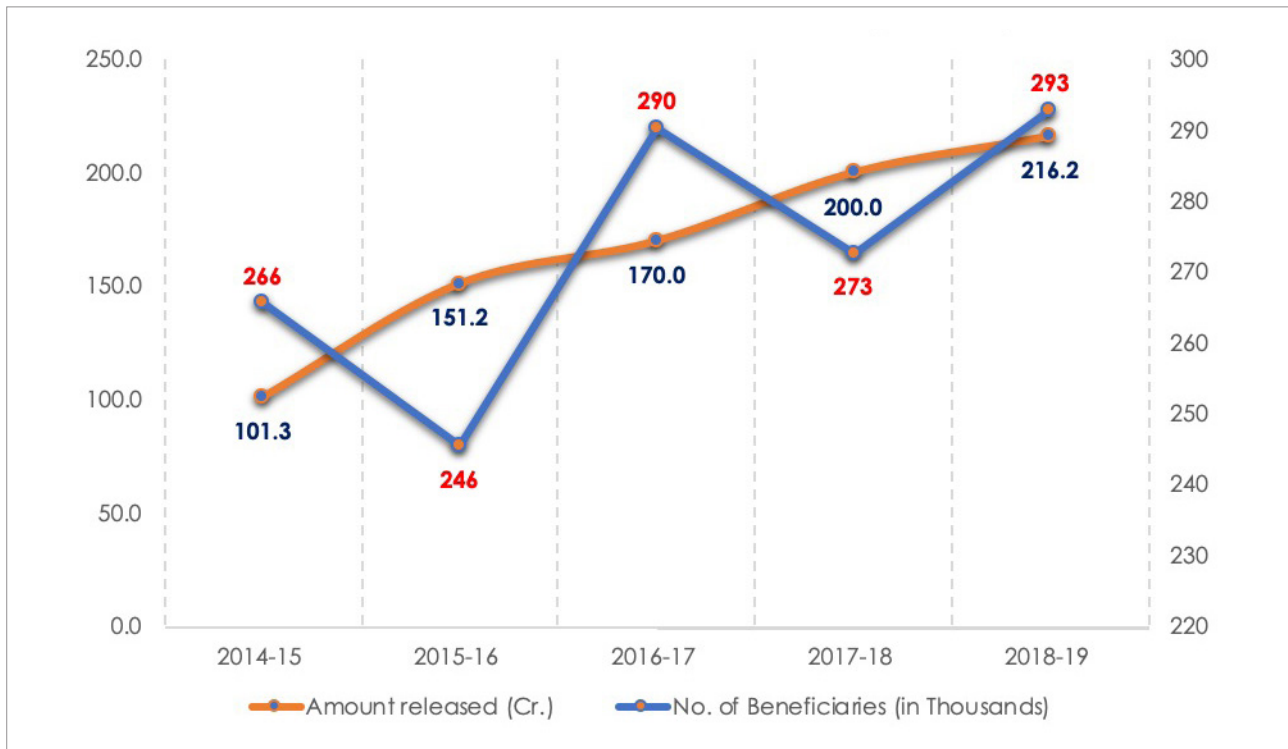


Figure 6 Year on year expenditure and beneficiaries of ADIP scheme

Source: Ministry of Social Justice, 2019

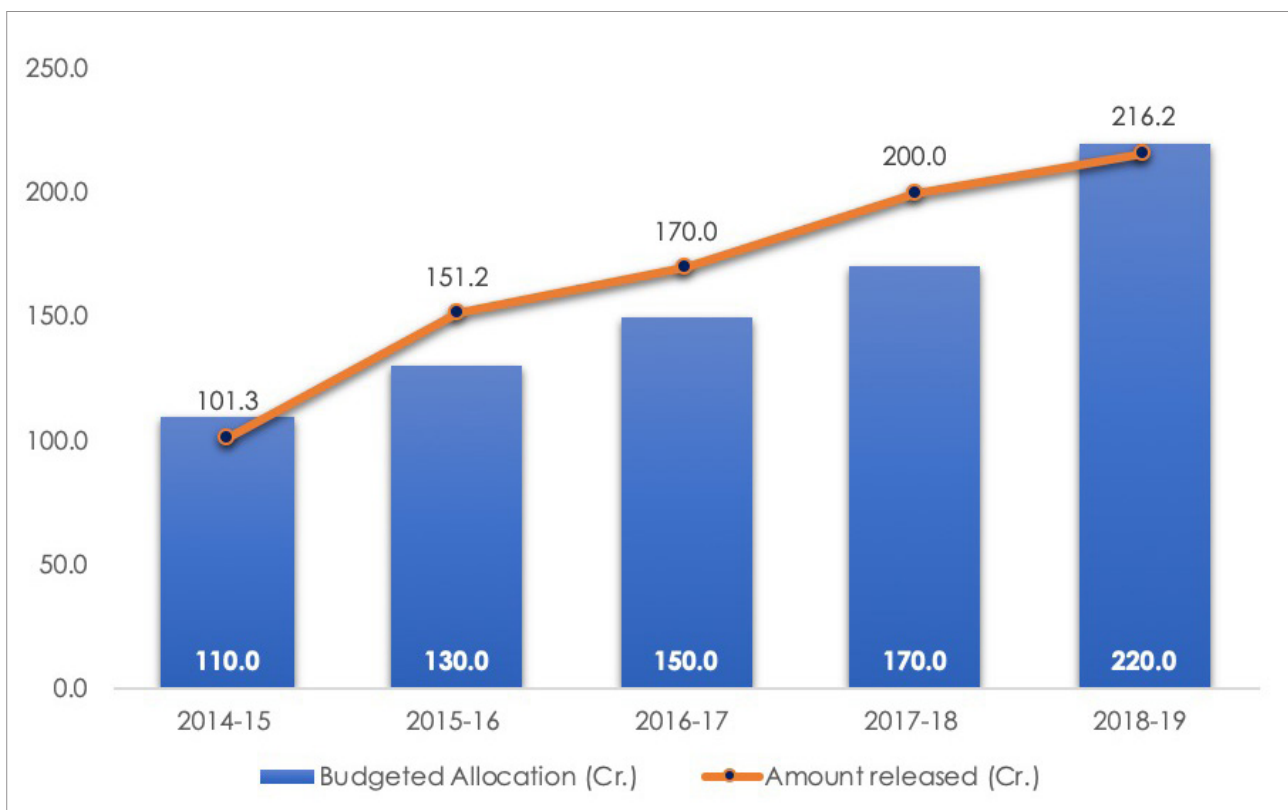


Figure 7 Financial achievements of ADIP scheme 2014-19

Source: Ministry of Social Justice, 2019

A year on year analysis of the scheme expenditure and beneficiaries shows that year 2018-19 had the most impact in terms of beneficiary count. However, year 2016-17 was the most effective year for the scheme with over 290,000 beneficiaries, against the released sum of 170 Cr.

Sugamya Bharat Abhiyan (Accessible India Campaign)

The Department of Empowerment of Persons with Disabilities (DEPwD), Ministry of Social Justice & Empowerment (MoSJE) launched the "Accessible India Campaign (Sugamya Bharat Abhiyan)" on 3rd December 2015. It was a nation-wide flagship campaign focussed on achieving universal accessibility for persons with disabilities to gain access for equal opportunity and live independently and participate fully in all aspects of life in an inclusive society. The campaign targeted at enhancing the accessibility of built environment, transport system and Information & communication eco-system.

The Campaign targeted on augmenting accessibility in three focus areas;

Built Environment

Completion of accessibility audit of 25- 50 most important government buildings in selected 50 cities and making them fully accessible by December 2017.

Making 50% of all the government buildings of NCT and all the State capitals fully accessible by December 2018.

Completing accessibility audit of 50% of government buildings and making them fully accessible in 10 most important cities/towns of States not covered in phase (i) and (ii) by December 2019.

Transport System

- All international airports are to be made fully accessible by December 2016 and domestic airports by March 2018.
- 10% of government owned public transport carriers are to be made fully accessible by March 2018.
- A1, A, & B categories of railway stations are to be made fully accessible by December 2016, and 50% of all railway stations to be made fully accessible by March 2018.

Information and Communication Ecosystem

- At least 50% of Central and State Government websites are to be made accessible by March 2017.
- Developing and adoption of national standards on captioning and sign-language interpretation in consultation with National media authorities by July 2016.
- Ensuring that 25% of all public television programmes aired by government channels meet these standards by March 2018.

Since its inception in 2015 the National Campaign has gained significant momentum in the target areas. As of 2019, accessibility audit of over 1600 buildings have been completed. The table below captures the overall progress of the scheme across the three focus areas and the targets therein.

The physical and financial progress of the AIC in the past three financial years has been substantial. The Campaign has disbursed upwards of INR 300 Crores since 2016 to sanction over 1000 public buildings that are compliant to the parameters set forth in the campaign. The year 2018-19 had the most impetus with ~133 crores sanctioned for 463 buildings.

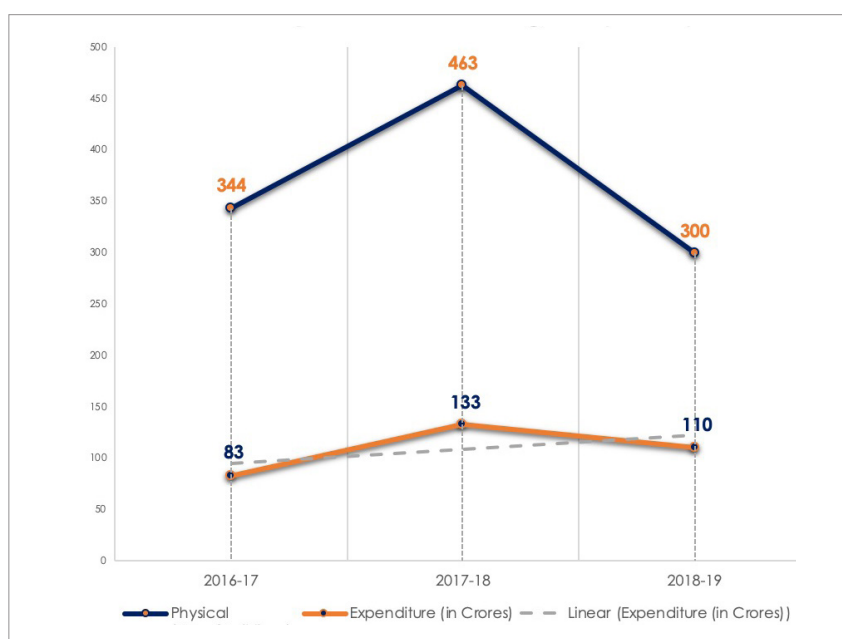





Figure 8 Year on year expenditure and progress of AIC 2016-19

Source: Ministry of Social Justice, 2019

Table 2 Progress against target areas of AIC

TARGET AREA	PROGRESS (YTD)
 <p>Built Environment Accessibility</p>	Accessibility audit of 1662 buildings is completed.
	1662 access audit reports submitted to the State Nodal Officers.
	Proposal of 997 buildings has been received under Scheme arising out of PWD act 1995 (SIPDA) for release of grant-in aid.
	Sanction of Rs 160.53 core issued for 615 buildings.
	Rs.283 lakh has been released to auditors for conducting access-audit.
 <p>Transportation System Accessibility</p>	All 34 international airports & 48 Domestic Airports, have been provided with accessibility features namely, ramps, accessible toilets, lifts with braille symbols and wauditory signals.
	Ministry of Road Transport & Highways have issued instructions to the States/ SRTUs to ensure that 10% of Govt. owned Public Transport is made fully accessible by 2018.
	12,894 buses out of 1, 41,572 provided with accessibility features in 52 reported SRTUs out of total 61 in the country.
	Out of 709 A1, A & B category railway stations, 653 are made accessible in short term features.
	Short term features are – Provision of standard ramp; Earmarking two parking lots for physically challenged; Provision of non-slippery walkway from parking to Station Building; Provision of sign-ages; Provision of at least one disable-friendly toilet; and "May I help You Booth".
 <p>Information & Communication System accessibility</p>	917 websites of States/UTs have been identified to make it accessible. Already 111 websites have been made accessible and work is in progress for others.
	Ministry of Electronic & information Technology (MeitY) has initiated a project development of Content Management Framework (CMF) for making 100 Government websites accessible. Out of which 78 websites have been made accessible, 3 websites have been made accessible but yet to give live, 2 websites are in process of being made accessible and 4 websites are yet to be on boarded.
	MeitY had issued accessibility guidelines regarding making Government notifications/ circulars accessible on 28th May 2015.

Source: Ministry of Social Justice, 2019

Urban Facts on Disability

(An Overview of Census 2011)

Recognition of facets and issues related to disability in the Indian context has enabled the Government to evolve its definitions and the context in which it is often used. Historically, the term disability carried the connotation of an impairment, abnormality or a pathological issue. However, in the recent past attempts have been made by the Government and stakeholders across the board to sensitize and broaden the understanding of disability in the society. Similar efforts have also been undertaken during the process of enumerating persons with disability in India. These endeavours include collection of data on various types of disabilities through Census and the National Sample Survey. More focussed data on services and participation is also collected at regular intervals i.e. participation of Children with Special Needs (CWSN) in school education done by the Ministry of Human Resource Development (MHRD). It is crucial that data on Persons with Disabilities is accurately and regularly collected to facilitate decision making in all realms of the government especially in policy making for Persons with Disabilities.

India has been historically proactive in enumerating people with disabilities. The earliest records go back to the inception of the modern Indian Census in 1872. The questionnaire of the 1872 Census included questions not only on physically and mentally infirm but also persons affected by leprosy. Collection of information on infirmities in each of the successive decadal censuses continued till 1931 (MOSPI, 2012). Over the next 130 years or more the Census has attempted to widen the scope of defining disability both in its structure and function.

Census 2011

In more ways than one, Census 2011 was an important leap in enumeration process of Persons with Disabilities in India. In Census 2011 for the first time, information on eight types of disability; disability in seeing, in hearing, in speech, in movement, in mental retardation, in mental illness, any other and multiple disability) was collected, which was three more than the preceding Census of 2001.

As per the 2011 Census, India had 2.68 Crores person

with disabilities, that represents 2.21 per cent of the total population at the time (i.e. 121 Crores). NITI Aayog (formerly Planning Commission) recognizes this figure as 5%. A report by the World Bank states that while estimates vary, there is growing evidence that persons with disability are around 40-80 million, which constitute between 4-8% of India's population. Irrespective of the varying estimates, because of the sheer size of the Indian population, even the lowest estimate of disability makes it equal to the population of several European countries put together. Viewed in this perspective, persons with disability represent the single largest combined minority group in India. (Shenoy, 2011)

The percentage of disabled to the total population increased from 2.13% in 2001 to 2.21% in 2011. In urban areas, it increased from 1.93% to 2.17% during this period. The same trend was observed among males and females during this period.

With regards to the type of disabilities, it was seen that 20% of the disabled persons have disability in movement, 19% are with disability in seeing, and another 19 % are with disability in hearing. 8% has multiple disabilities. In comparison, urban India had 17% of Persons with Disabilities in movement, 18.7% people who were visually impaired, and 20.5% with hearing disabilities.

Disabilities in relation to age is an important dimension to understanding its impact on an individual. In Census 2011, the number of disabled persons was registered to be highest in the age group of 10-19 years (46.2 lakhs). It was observed that 2.44% of all Persons with Disabilities in urban India were the age group of 20 + years. In the 10-19 years age bracket 1.86% percent were enumerated with some form of disability. However, in the urban context the highest concentration of Persons with Disabilities was observed in the 20+ years age group.

India is the second largest country by population and seventh largest in terms of area. These statistics represent a significant number of people spread across a large geographical region. This alone makes planning and policy formulation a task. A spatial analysis of the Persons with Disabilities shows that a few states and

Table 3 Spectrum of Disability defined in Census 2011

In Movement	Mental Illness	In Seeing	Mental Retarded-ness	In Hearing	In Speech	Any Other	Multiple Disabilities
Do not have both arms or both legs; or	Is taking medicines or other treatment for mental illness; or	Cannot see at all; or	Lacks understanding/ comprehension as compared to her/his own age group; or	Cannot hear at all; or	Cannot speak at all or she/ he is unable to speak normally on account of certain difficulties linked to speech disorder; or	If the person has a disability other than the categories mentioned above, or	Multiple Disabilities means a combination of two or more specific type of disabilities.
Are paralyzed and are unable to move but crawl; or	Exhibits unnecessary and excessive worry and anxiety; or	Has no perception of light even with the help of spectacles; or	Is unable to communicate her/ his needs when compared to other persons of her/his age group; or	Has difficulty in hearing day-to-day conversational speech (hard of hearing); or	Able to speak in single words only and is not able to speak in sentences; or	The respondent fails to report the exact type of the disability, or	The question has been designed to record a combination of maximum three types of disabilities.
Are able to move only with the help of walking aids; or	Exhibits repetitive (obsessive-compulsive) behaviour/ thoughts; or	Has perception of light but has blurred vision even after using spectacles, contact lenses etc.	Has difficulty in doing daily activities; or	If she/he is using a hearing aid.	Stammers to such an extent that the speech is not comprehensible.	Disabilities like "Autism" etc. (Difficulty in communicating, interacting with others; unusual & repetitive behaviours etc.)	
Have acute and permanent problems of joints/muscles that have resulted in limited movement; or	Exhibits sustained changes of mood or mood swings (joy and sadness; or	Can see light but cannot see properly to move about independently; or	Has difficulty in understanding routine instructions; or	Hearing problem in one ear not to be considered as having hearing disability.			
Have lost all the fingers or toes or a thumb; or	Has unusual experiences - such as hearing voices, seeing visions, experience of strange smells or sensations or strange taste; or	Has blurred vision but had no occasion to test if her/his eyesight would improve after taking corrective measures.	Has extreme difficulty in making decisions, remembering things or solving problems.				
Are not able to move or pick up any small thing placed nearby; or	Exhibits unusual behaviours like talking/laughing to self, staring in space, or	One-eyed person not to be considered as disabled in seeing.					
Have stiffness or tightness in movement, or	Has difficulty in social interactions and adaptability						
Have difficulty in balancing and coordinating body movements; or							
Have loss of sensation in the body due to paralysis or leprosy or any other reason; or							
Have any deformity of the body part/s like having a hunch back; or very short statured (dwarf).							

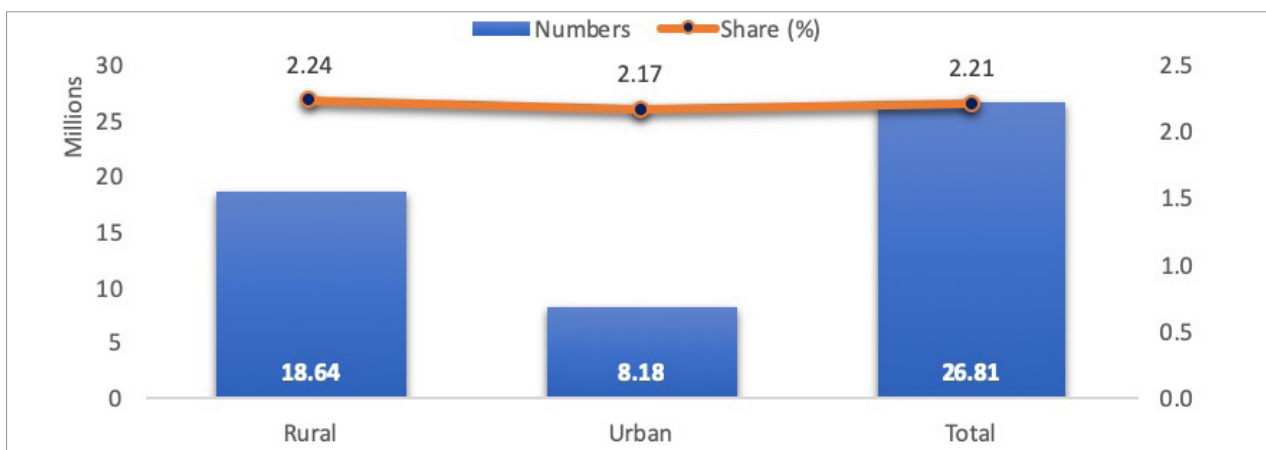


Figure 9 Disabled population in India,

Source: Census 2011

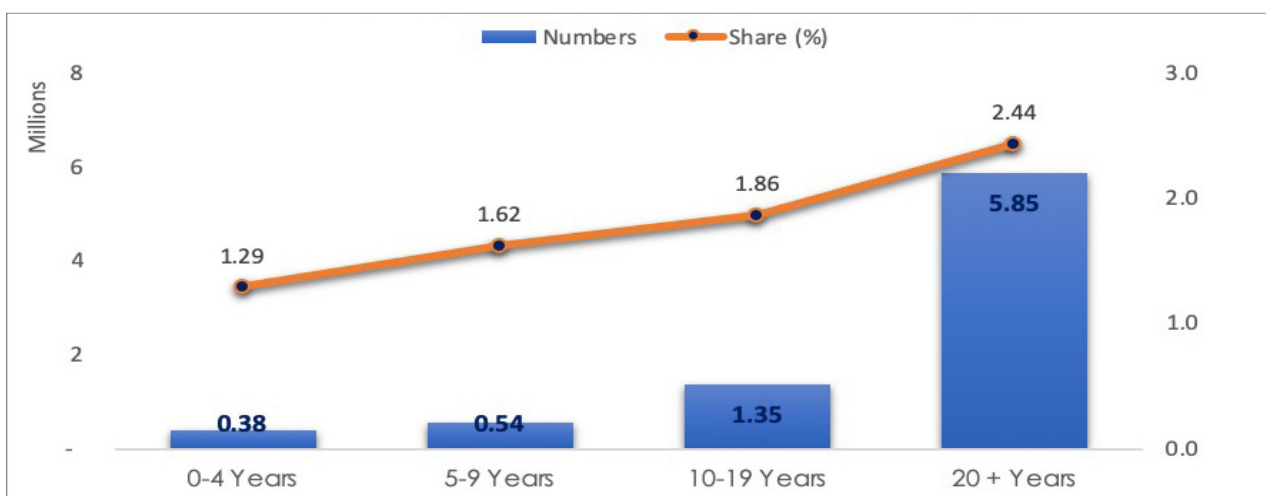


Figure 10 Disabled population by Age Groups in Urban India, 2011,

Source: Census 2011

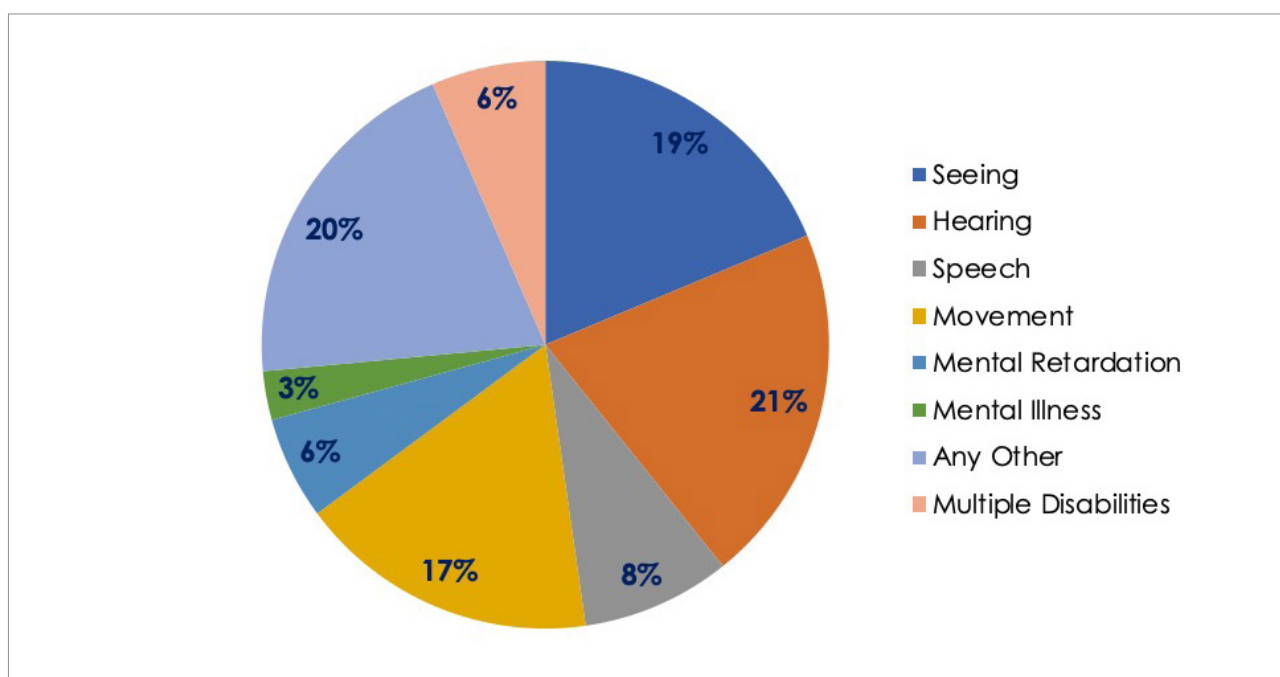


Figure 11 Percentage share on population by disability type in urban India

Source: Census 2011

cities have a lopsided concentration of Persons with Disabilities compared to the national averages. At the national level, disabled persons constituted 2.21% of the total population. Among the State/ UTs, Sikkim have a higher prevalence rate of disability than the national averages. Sikkim reported 2.98% of its total population as disabled, while Daman & Diu (0.9%) reported the lowest prevalence of disability. The highest number of disabled persons is from the state of Uttar Pradesh. Nearly 50% of the disabled persons belonged to one of the five states; Uttar Pradesh (15.5%), Maharashtra (11.05%), Bihar (8.69%), Andhra Pradesh (8.45%), and West Bengal (7.52%).

With regards to the concentration of Persons with Disabilities in states and urban agglomerations (UA) vis-à-vis the urban population, the following five states top the list; Maharashtra (15.9%), Uttar Pradesh (12.1%), Andhra Pradesh (9.2%), West Bengal (7.9%), and Tamil Nadu (6.8%). A similar analysis shows that Greater Mumbai (12.6%), Kolkata (8.9%), Hyderabad (7.7%), Bruhat Bangalore (6.6%) and Delhi (6%) are the five leading UA's w.r.t concentration of Persons with Disabilities in the urban India.

Table 4 Top 5 states and UA's with concentration of Persons with Disabilities in Urban India,

States/UTs	Numbers (Thou-sands)	Share (%) to India
Maharashtra	1297.3	15.9
Uttar Pradesh	990.9	12.1
Andhra Pradesh	753.6	9.2
West Bengal	648.5	7.9
Tamil Nadu	558.2	6.8
India	8178.6	
UAs/Cities		
Greater Mumbai UA (Maharashtra)	484.7	12.6
Kolkata UA (West Bengal)	342.3	8.9
Hyderabad UA (Andhra Pradesh)	294.1	7.7
Bruhat Bangalore UA (Tamil Nadu)	251.6	6.6
Delhi UA (Delhi)	228.4	6
Total (52 UAs/Cities- Million Plus)	3832.8	

Source: Census 2011

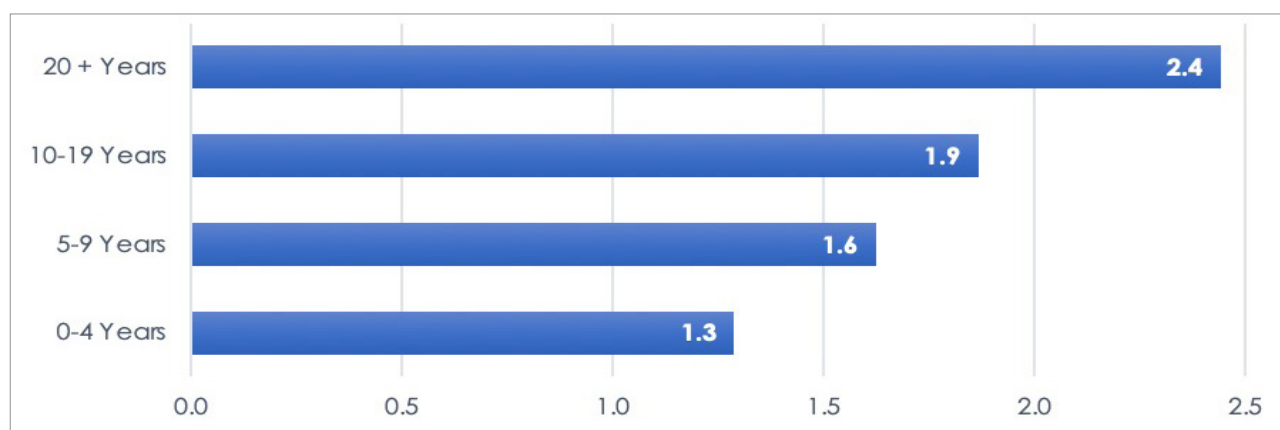


Figure 12 Percentage share of disabled population by age group in urban India.

Source: Census 2011

Table 5 Type of Disability and share in top five UA's

	Seeing	Hearing	Speech	Movement	Mental Retardation	Mental Illness	Any Other	Multiple
Delhi UA	12.81	14.71	6.46	28.63	6.99	4.28	15.75	10.37
Bruhat Bangalore UA	31.68	24.52	4.03	6.65	5.48	0.96	22.99	3.69
Hyderabad UA	22.76	23.94	9.55	6.92	3.78	1.10	28.31	3.64
Kolkata UA	24.62	18.62	8.35	10.82	6.55	2.91	22.70	5.44
Greater Mumbai UA	21.96	21.24	18.79	9.50	4.42	1.68	18.76	3.65
All 52 UAs/Cities	21.38	22.30	9.00	13.05	5.32	2.61	21.05	5.28

Source: Census 2011

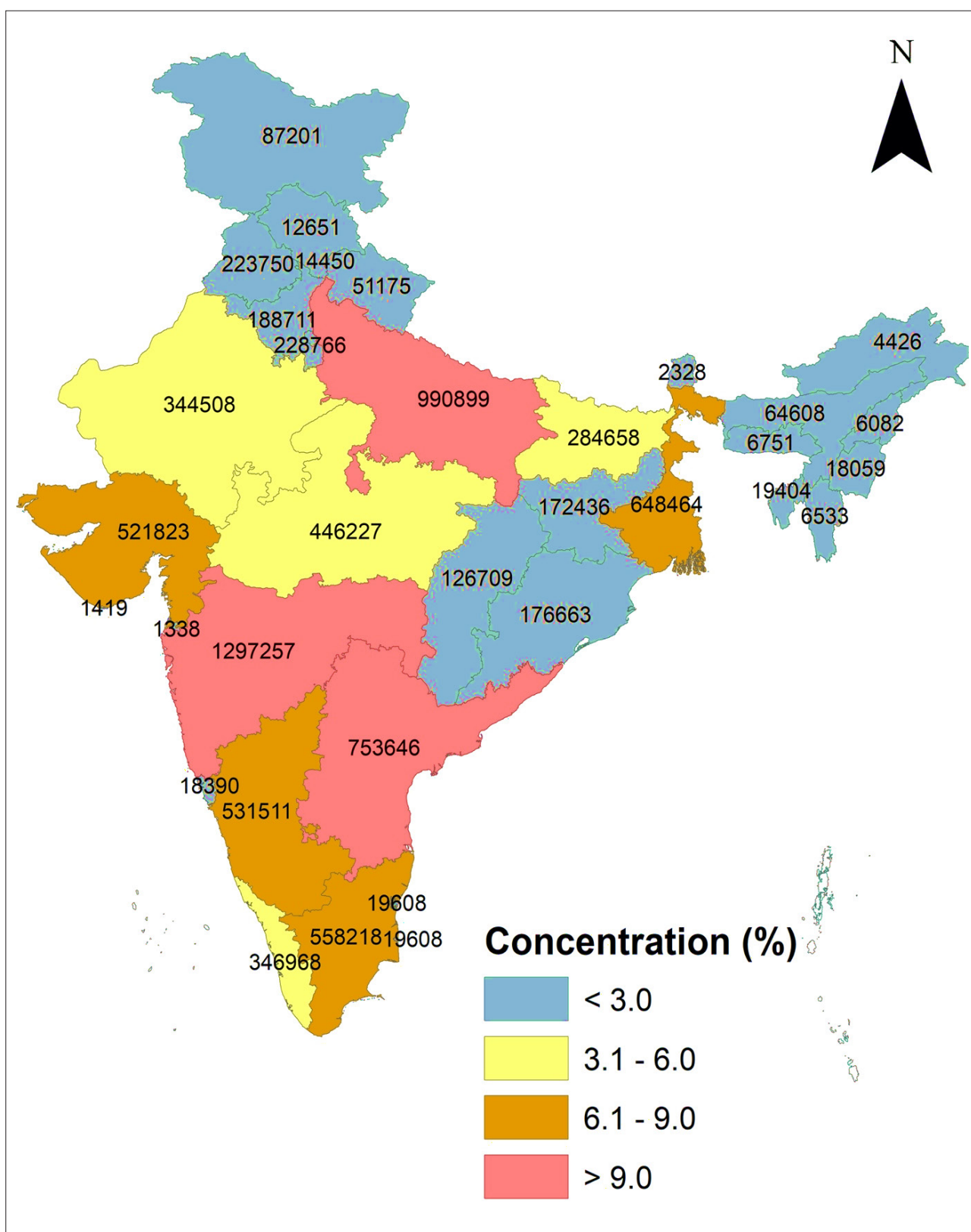


Figure 13 State wise concentration of Persons with Disabilities in India

(Data Source: Census 2011)

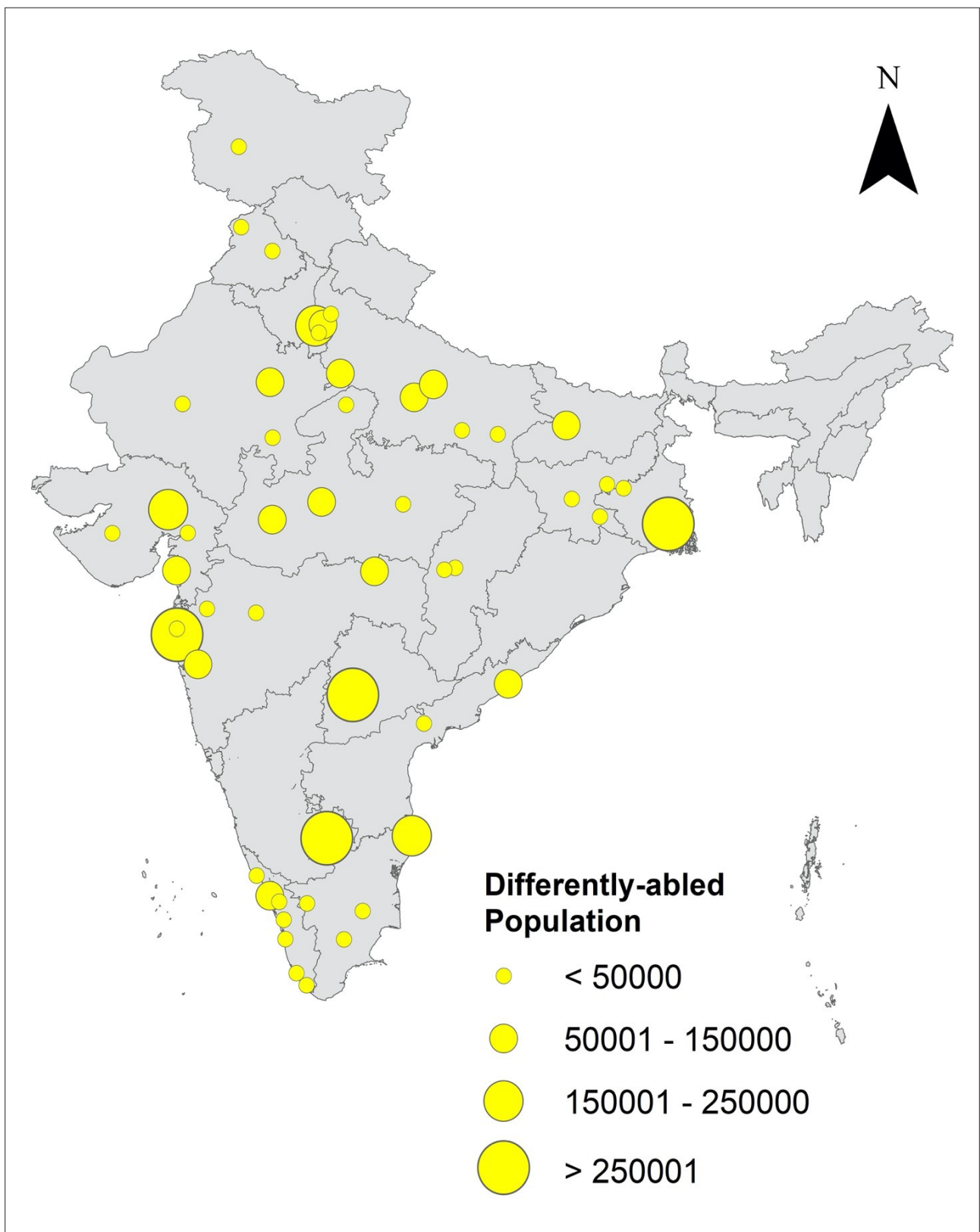


Figure 14 State wise share of Persons with Disabilities in India

Data Source: Census 2011)

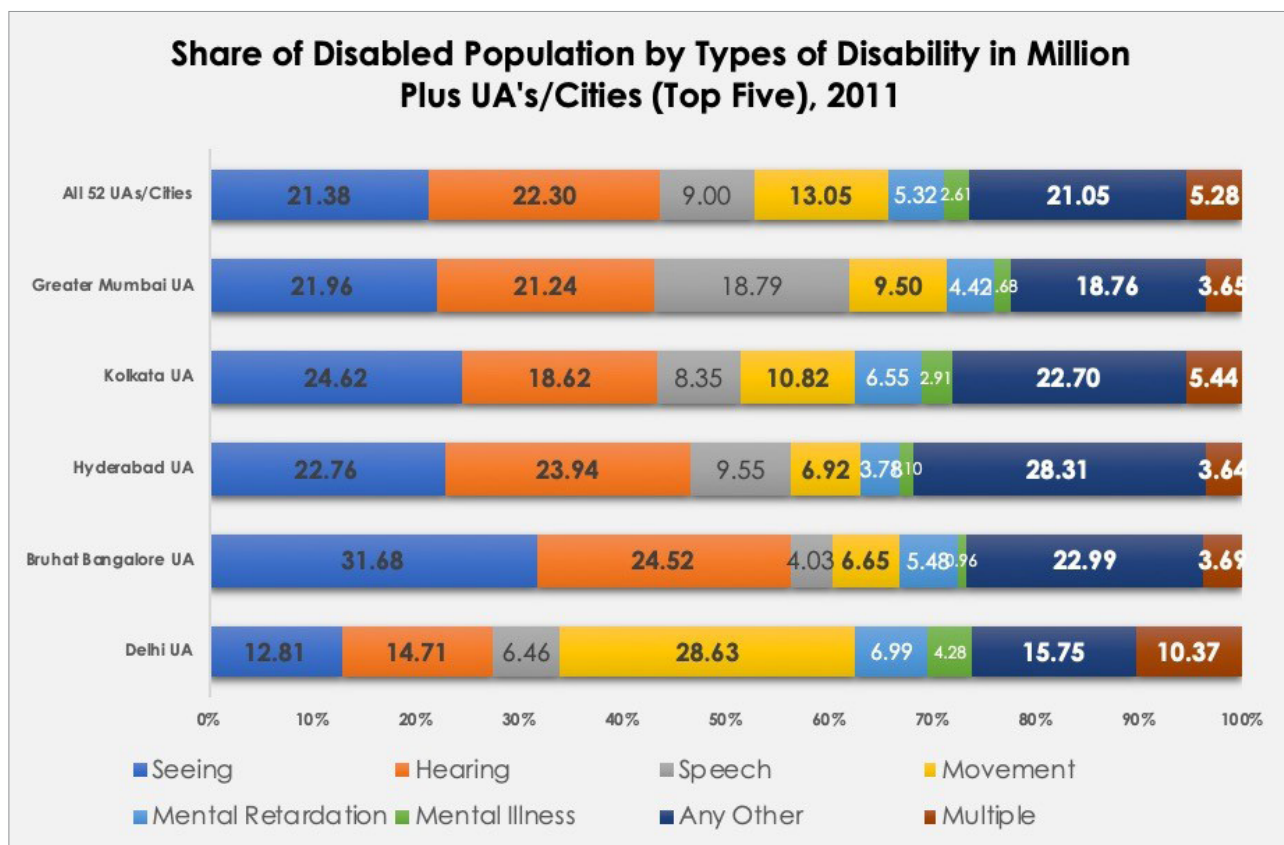


Figure 15 Share of Persons with Disabilities by type in million plus UA's

Source: Census 2011

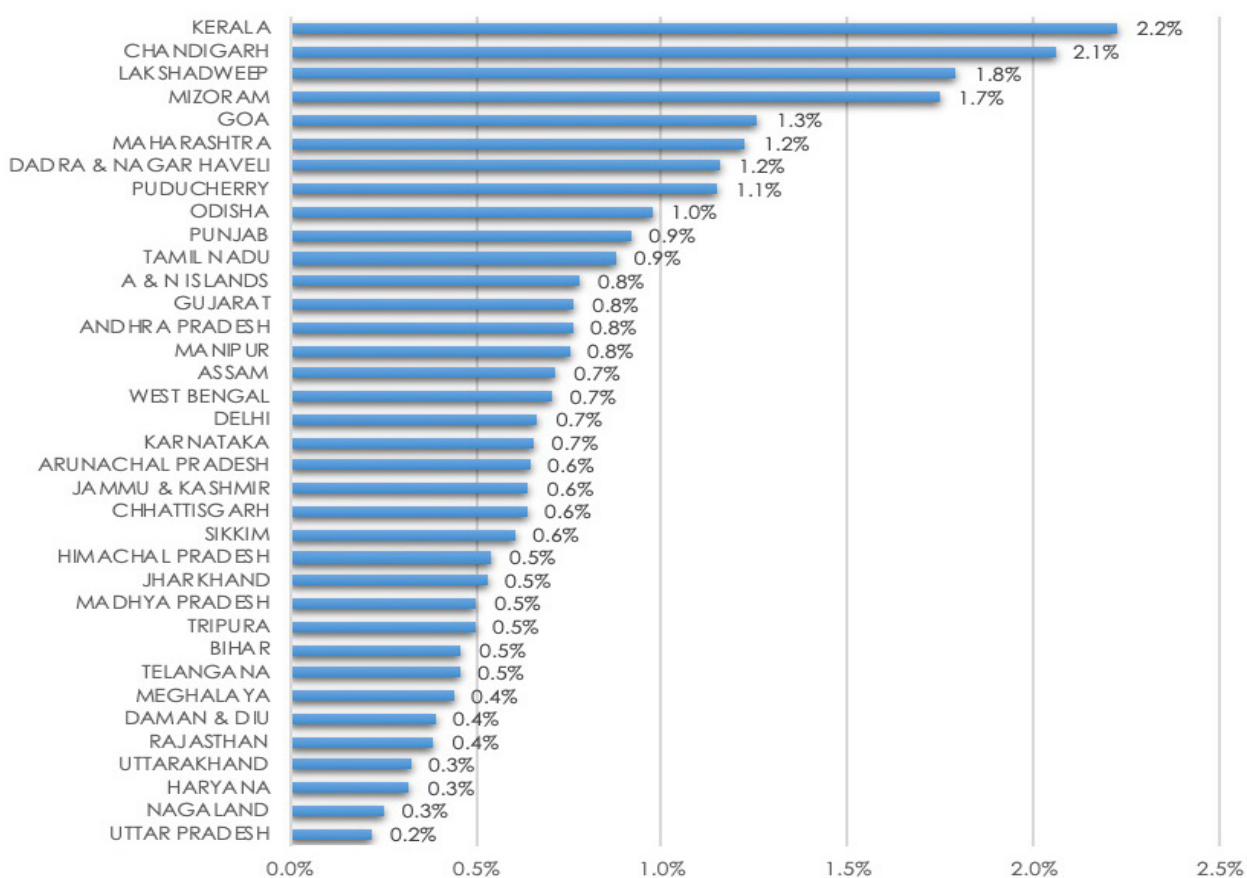


Figure 16 State wise enrolment of CWSN, 2016-17

Source: Census 2011

A further analysis of the top 5 UA's with highest concentration of Persons with Disabilities w.r.t the type of disabilities, shows that Delhi has the highest percent share of people with movement, mental and multiple disabilities. While Bangalore, registered the large number of people with visual and auditory impairments. Seeing, hearing, and speech constitute nearly 50 percent of all Persons with Disabilities across all 52 UA's.

Quality of life is an important parameter that all countries are striving to achieve for both urban and rural residents. Equal opportunities to good primary education and employment are key enablers in achieving a higher standard living, this is especially true for Persons with Disabilities. As per 2011 census, the

literacy rate for Persons with Disabilities stood at 54.52% which was significantly lower than the literacy rate of the population, which was observed to be 74.04%. Among those who are able to access school education only 26% reach up to the primary level; 6% middle level and only 13% secondary level and above. This objective gap in the standards of literacy negatively impacts the compounded by the barriers to social inclusion. A visible impact of this gap is in the employment rates of the Persons with Disabilities.

Analysing the data on enrolment of Children with Special Needs (CWSN) in urban India, it was seen that across all states the average enrolment rates are less one percent of the total enrolments. The highest enrolment rates for CWSN was observed in Kerala

Important Fact

- ✓ Four States namely, Uttar Pradesh (20.31%), Bihar (14.24%), Maharashtra (10.64%), and West Bengal (6.48%) together have the burden of more than 50% of the disabled children.

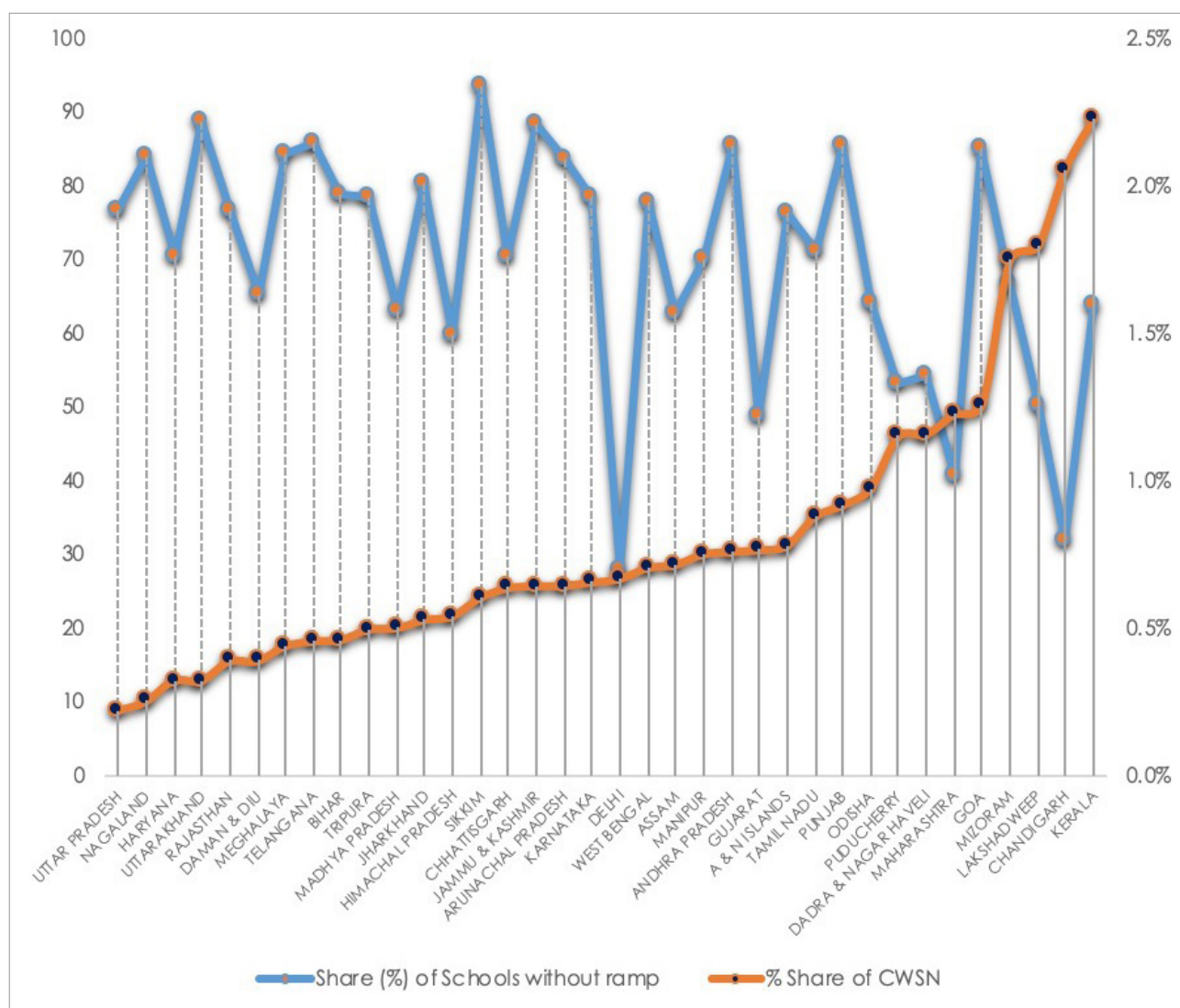


Figure 17 Percentage share of schools with ramps and enrolment rates of CWSN in Urban India

Source: Census 2011

(2.2%), while Uttar Pradesh registered the lowest enrolment rates (0.2%), followed by Nagaland (0.3%) & Haryana (0.3%).

Upon overlaying the data of CWSN enrolment rates with percentage of schools without ramps in urban India, it was seen **that states with highest percentage of schools without ramps had a significantly low rate on enrolment among CWSN**. The states of Uttar Pradesh (77%), Haryana (70%), Rajasthan (70%), and Uttarakhand (89%) have the highest number of schools without ramps and lowest enrolment rates across all states in urban India.

As discussed earlier, there is a significant level of interdependency in the level of education and employment opportunities in the later years of an individual. The Persons with Disabilities Act of 1995 attempted to curtail this by reserving 3% of all categories of jobs in the government sector for disabled persons, and provides employment incentives for public and private sector companies, that have at least 5% of their workforce comprising of disabled persons. However, sadly it was estimated that by 2011 only about 0.1 million have succeeded in getting employment in the industries. (Shenoy, 2011)

Conclusion

To sum up, it would be fair to state that the social constructs, policies, schemes, and intent for Persons with Disabilities over the past hundred years has significantly leaped forward. This has been a secular trend across the globe and more so on in the first world countries. The ratification of the UNCRPD was a step in the right direction to take such actions and measures to all member countries. India, a signatory of the bill, has shown considerable intent and action in improving the social and institutional status of the Persons with Disabilities. In fact, India's PwD Act of 1995 predates the CRPD and showcases the "rights-based approach" that has been emphasized across the board. The PwD Act was drafted with enough foresight to enable Persons with Disabilities in India to find equitable opportunities in education and employment. However, it must be reiterated at this point that intent without conviction often fails to translate into action. Despite its attempt to address a wide gamut of societal aspects, the Persons with Disabilities Act failed to augment the quality of life for Persons with Disabilities in India.

The RPWD tried to mitigate the shortcomings of the PwD Act by expanding the spectrum of disability from seven to twenty-one. The bill also segued into emphasising the concept of safety and integrity for Persons with Disabilities, along with inclusion and accessibility. The Act also expanded the reservation for Persons with Disabilities in both education and employment sectors. However, as discussed, the Act has less than desirable impact in the country. This was primarily due to the lack of adherence and compliance on the part of state and city level institutions.

A key demographic endeavour that took place between the acts was the Census of India. The 2011 Census was a quantum leap in the enumeration process compared to its preceding rounds esp. for Persons with Disabilities. Not only did it encompass a greater diversity of disabilities in the process, but also laid grounds to a more sensitive data collection

process. The Census data highlighted some of the prevailing issues faced by Persons with Disabilities in India. The operative word being "some" and not "all". This inherent restrictiveness in the data, as well as, an underestimation of the population with disabilities has led many to be apprehensive in drawing objective conclusions and suggestions.

At the time of drafting the report we are cognizant of the fact that The National Statistical Office (NSO), Ministry of Statistics and Programme Implementation (MoSPI) completed the Survey of Persons with Disabilities during July 2018 to December 2018 as a part of 76th round of National Sample Survey (NSS). The survey has primarily focussed on providing sample estimates on incidence and prevalence of disability, cause of disability, age at onset of disability, facilities available to the persons with disability, difficulties faced by persons with disability in accessing/using public building/public transport, arrangement of regular care giver, out of pocket expenses relating to disability. Moreover, the 76th round also disaggregates the aforementioned indicators across disabilities stated in The Rights of Persons with Disabilities Act, 2016.

The representative nature of the NSS and greater data points for the current round on disability gives us an opportunity to draw more detailed inferences on the Status of Disability in India. It is because of this reason that we intend to prepare a quantitative version of the current report that would build on the findings of the NSS 76th round and juxtapose the data from global sources i.e. WHO, World Bank, UNICEF, etc with the local findings. It is envisaged that these data sources will enable more objective and clear understanding of the current context of disability in India especially w.r.t economic opportunities, health and nutrition, education and literacy, and the role that technology has played in the last decade to augment the quality of life for Persons with Disabilities.

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UK Government

The Department for International Development (DFID) leads the UK government's work to improve inclusive growth needed for poverty reduction to make development sustainable in line with the International Development Act (2002), the Gender Equality Act (2014) and the Sustainable Development Goals (SDGs). The UK has expertise in a range of sectors highly relevant to the poverty reduction, inclusive growth and economic development including finance and infrastructure. Helping partner countries develop these sectors and improve their business environment will give firms and people, greater opportunities to work in a stronger, more productive economy.

By 2030, India will become the most populous nation and third by GDP size (=>USD 5 billion). India's development trajectory in the next decade presents significant opportunities and challenges for global development.

India-UK development partnership is focussed on inclusive economic development through building markets using development capital investment and technical assistance.



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Established in 1976, National Institute of Urban Affairs (NIUA) was tasked to bridge the gap between research and practice on issues related to urbanization, and suggest ways and mechanisms to address these urban challenges of the country. For more than 40 years now, NIUA has been the vanguard for contributing to, and at times, building the urban narrative for a fast-evolving urban India. The Institution has been actively working towards bringing forth key areas of concern for urban India in order to build the urban discourse at various scales.

It has utilized its competencies in research, knowledge management, policy advocacy and capacity building to address the urban challenges, and continuously strive to develop sustainable, inclusive, and productive urban ecosystems in India. It has emerged as a thought leader and knowledge hub for urban development in India, and is sought out by both Indian and International organizations for collaborations and partnerships for India's urban transforming journey. NIUA is committed towards aligning its efforts towards achieving the Sustainable Development Goals (SDGs) through all its initiatives and programs.

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