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Understanding Disability in India: Social Perception, Legal Frameworks and Related Issues

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ABSTRACT

According to the Census of India 2011, approximately 26.8 million persons in India, or 2.21 per cent of the total population, were recorded as living with disabilities. Despite constitutional guarantees and a growing statutory framework, disability in India continues to be shaped by stigma, exclusion and deeply rooted social prejudice. Persons with disabilities often encounter discriminatory language, barriers to education and employment, inaccessible infrastructure, and inadequate access to social security entitlements. This paper examines disability in India through three interrelated lenses: social perceptions, legal protections and social security mechanisms. It reviews the constitutional basis for disability rights, traces the shift from the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 to the Rights of Persons with Disabilities Act, 2016, and discusses the significance of accessibility, inclusion and dignity in public policy. The paper argues that although India has developed a stronger rights-based legal regime, effective implementation remains uneven. Greater institutional accountability, awareness and accessible delivery systems are necessary to ensure that statutory guarantees translate into substantive equality for persons with disabilities.

Keywords: *persons with disabilities, social security, disability rights, accessibility, RPwD Act 2016, benchmark disability, Census 2011, India*

I. INTRODUCTION

Disability is not merely a medical condition; it is also a social, legal and developmental issue.¹ In India, persons with disabilities frequently confront multiple disadvantages arising not only from impairment but also from social attitudes, inaccessible environments and structural exclusion.

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¹ V.R. KRISHNA IYER, LAW, JUSTICE AND THE DISABLED (Deep & Deep Publications 1982).

The lived reality of disability is therefore shaped by the interaction between an individual's condition and the barriers imposed by society.

The Census of India 2011 reported that more than 26.8 million persons in India were living with disabilities.² However, the significance of disability extends beyond numerical prevalence. Persons with disabilities often face exclusion from education, employment, mobility, political participation and social recognition.³ Negative societal attitudes further intensify these disadvantages and contribute to marginalisation.

This paper analyses the concept of disability in India by focusing on definitions, forms of disability, patterns of social prejudice, constitutional and legal safeguards, and social security measures. It also examines the rights-based shift introduced by the Rights of Persons with Disabilities Act, 2016, which brought Indian law into closer alignment with contemporary understandings of disability and dignity.

II. DEFINITION, MEANING AND CONCEPT OF DISABILITY

Defining disability is complex because it encompasses physical, sensory, intellectual, mental and multiple forms of impairment, each shaped by social and institutional contexts. Disability cannot be understood solely as an individual limitation; it must also be examined as a condition produced or aggravated by inaccessible social arrangements.

The World Health Organization (WHO) has defined disability as "any restriction or lack (resulting from an impairment) of ability to perform an activity in the manner or within the range considered normal for a human being".⁴ While this definition has historically been influential, contemporary disability discourse increasingly emphasises the interaction between impairments and environmental barriers.

The Rights of Persons with Disabilities Act, 2016 adopts a broader and more rights-based understanding. Section 2(s) defines a "person with disability" as a person with long-term physical, mental, intellectual or sensory impairment which, in interaction with barriers, hinders full and effective participation in society equally with others.^{5,6} Section 2(r) defines a "person

² CENSUS OF INDIA, DATA ON DISABILITY (Government of India 2011). Census 2011 remains the most recent full enumeration; all census figures in this paper are 2011 figures.

³ S. BHUSHAN ET AL., THE SITUATION OF THE HANDICAPPED IN INDIA (Institute of Social Studies 1998).

⁴ WORLD HEALTH ORGANIZATION, INTERNATIONAL PERSPECTIVES ON IMPAIRMENT, DISABILITY AND HANDICAP.

⁵ Rights of Persons with Disabilities Act, 2016, No. 49 of 2016, § 2(s) (India).

⁶ The statutory formulation follows Convention on the Rights of Persons with Disabilities art. 1, opened for signature Mar. 30, 2007, 2515 U.N.T.S. 3 (adopted Dec. 13, 2006), which India ratified on 1 October 2007.

with benchmark disability" as a person with not less than 40 per cent of a specified disability, as certified by the competent authority.⁷

The National Sample Survey Office (NSSO) has similarly described disability as a restriction or lack of ability to perform an activity in the manner or within the range considered normal for a human being, while excluding temporary morbidity.

The WHO's earlier three-fold distinction among impairment, disability and handicap may be summarised as follows:⁸

- Impairment refers to a loss or abnormality of psychological, physiological or anatomical structure or function.
- Disability refers to a restriction or lack of ability resulting from impairment.
- Handicap, an older term now generally avoided in rights-based discourse, referred to the social disadvantage arising from impairment or disability.

Contemporary scholarship and disability rights law have moved away from the term "handicap" because of its stigmatising and reductive connotations.⁹ Current academic and legal usage prefers "persons with disabilities", the expression adopted throughout this paper and reflected in the statutory terms "person with disability" and "person with benchmark disability".

III. SOCIAL PERCEPTIONS AND THE NOMENCLATURE OF DISABILITY

One of the major barriers faced by persons with disabilities in India is the persistence of derogatory and stigmatising social labels. Disability is often interpreted through superstition, pity, fear or moral judgment rather than through the language of rights, inclusion and equality. In some communities, disability continues to be linked to notions of fate, sin, divine punishment or family dishonour. Such beliefs intensify the social exclusion of persons with disabilities and may undermine their self-worth, educational opportunities and public participation.¹⁰

The use of derogatory terms such as *andha*, *langda*, *loola*, *bahra*, *goongha*, *pagal* or *kamdimag* reflects entrenched ableism in everyday language.¹¹ Although such expressions may be common in colloquial speech, they are discriminatory and inappropriate in academic, legal

⁷ Rights of Persons with Disabilities Act, 2016, § 2(r) (India) (not less than 40 per cent of a specified disability, as certified by a certifying authority).

⁸ WORLD HEALTH ORGANIZATION, *supra* note 4. The tripartite scheme derives from the earlier WHO classification and its terminology has since been superseded.

⁹ R. PANDEY & L. ADVANI, *PERSPECTIVES IN DISABILITY AND REHABILITATION* (Vikas Publishing 1995).

¹⁰ BHUSHAN ET AL., *supra* note 3.

¹¹ PANDEY & ADVANI, *supra* note 9.

and policy discourse. Their continued use contributes to psychological harm and reinforces stereotypes of dependency, incapacity and inferiority.

A rights-based approach requires a shift from labelling to respectful identification. Accordingly, this paper uses person-first terminology such as "persons with visual impairment", "persons with hearing impairment", "persons with speech impairment" and "persons with intellectual disabilities" wherever applicable.

IV. TYPES OF DISABILITY

Disability in India takes diverse forms, many of which are recognised in census classifications, policy instruments and disability legislation. The Rights of Persons with Disabilities Act, 2016 significantly broadened the recognised categories of disability, expanding them to 21 specified conditions.¹² These include blindness, low vision, leprosy cured persons, hearing impairment, locomotor disability, dwarfism, intellectual disability, mental illness, autism spectrum disorder, cerebral palsy, muscular dystrophy, chronic neurological conditions, specific learning disabilities, multiple sclerosis, speech and language disability, thalassaemia, haemophilia, sickle cell disease, multiple disabilities including deafblindness, acid attack victims and Parkinson's disease.

Distribution by Type of Disability

Type	Persons (%)	Males (%)	Females (%)
Multiple disability	7.9	7.8	8.1
Mental illness	2.7	2.8	2.6
Intellectual disability*	5.6	5.8	5.4
Movement disability	20.3	22.5	17.5
Speech disability	7.5	7.5	7.4
Hearing disability	18.9	19.9	20.2
Visual disability	18.8	17.6	20.2
Other disability	18.4	18.2	18.6
Total	100.0	100.0	100.0

Source: Census 2011. The original census category used older terminology; this paper uses the contemporary term "intellectual disability".

¹² Rights of Persons with Disabilities Act, 2016, sch. (India) (specifying 21 disabilities, against seven recognised under the 1995 Act).

The above distribution indicates that movement disability constituted the largest reported category, followed by hearing and visual disabilities.¹³ The data also show gender variation across categories, suggesting the need for more disaggregated and intersectional policy analysis.

A. Major Forms of Disability

i. Locomotor or Movement Disability

Locomotor disability refers to a substantial restriction in the movement of limbs or in motor functioning that affects mobility from one place to another. According to Census 2011, this category accounted for 20.3 per cent of all persons with disabilities.¹⁴ Such disabilities may arise from conditions including cerebral palsy, spinal injury, amputation, muscular dystrophy, poliomyelitis, fractures or other orthopaedic impairments.¹⁵ In practical terms, the consequences often include barriers to mobility, limited access to employment, and dependence on inaccessible transport and infrastructure.

ii. Visual Disability

Visual disability includes blindness and low vision. Persons with low vision may retain partial functional sight, often with corrective or assistive support, while persons who are blind experience severe or total vision loss. Census 2011 reported that 18.8 per cent of persons with disabilities fell within this category.¹⁶ Beyond clinical impairment, visual disability becomes more disabling where educational materials, public spaces, digital systems and transport networks are not designed for accessibility.

iii. Hearing Disability

Hearing disability refers to partial or complete inability to hear. Census 2011 recorded approximately 5.07 million persons with hearing disabilities, accounting for 18.9 per cent of the population of persons with disabilities.¹⁷ The disabling effects of hearing impairment are intensified when sign language interpretation, captioning, auditory alternatives and inclusive communication systems are absent.

¹³ CENSUS OF INDIA, *supra* note 2.

¹⁴ CENSUS OF INDIA, *supra* note 2 (movement disability, 20.3 per cent).

¹⁵ D.R. MANI, *THE PHYSICALLY HANDICAPPED IN INDIA: POLICY AND PROGRAM* (Ashish House 2006).

¹⁶ CENSUS OF INDIA, *supra* note 2 (seeing, 18.8 per cent).

¹⁷ CENSUS OF INDIA, *supra* note 2 (hearing, 18.9 per cent).

iv. Speech and Language Disability

Speech and language disability affects a person's ability to produce or communicate speech effectively. Census 2011 reported that 7.5 per cent of persons with disabilities were classified under speech disability.¹⁸ This form of disability may affect educational participation, social interaction and access to services, especially in settings that assume speech as the default mode of communication.

v. Mental Illness and Intellectual Disability

Mental illness and intellectual disability must be analytically distinguished. Mental illness generally refers to clinically recognised conditions affecting mood, thought, perception or behaviour, such as depression, anxiety disorders or schizophrenia.¹⁹ Intellectual disability refers to significant limitations in intellectual functioning and adaptive behaviour originating during the developmental period.²⁰ Census 2011 reported 2.7 per cent under mental illness and 5.6 per cent under the category then termed "mental retardation".²¹ Current academic and legal usage rejects that older expression in favour of "intellectual disability".

vi. Learning Disability

Specific learning disabilities affect the acquisition and use of reading, writing, reasoning or mathematical skills. Although they may not always be visible, they can significantly affect educational performance and social participation. The RPwD Act, 2016 explicitly recognises specific learning disabilities, reflecting a more nuanced and inclusive statutory approach than earlier legislation.²²

vii. Multiple Disabilities

Multiple disabilities involve the coexistence of two or more impairments in one individual. Census 2011 reported that 7.9 per cent of persons with disabilities were categorised under multiple disabilities.²³ Persons with multiple disabilities often require integrated and individualised support systems, making inter-sectoral coordination especially important.

¹⁸ CENSUS OF INDIA, *supra* note 2 (speech, 7.5 per cent).

¹⁹ B.V. DAVAR, MENTAL HEALTH OF INDIAN WOMEN: A FEMINIST AGENDA (Sage Publications 1999).

²⁰ J.C. MARFATIA, MENTAL RETARDATION (Popular Prakashan 1966).

²¹ CENSUS OF INDIA, *supra* note 2 (mental illness, 2.7 per cent; the category then styled "mental retardation", 5.6 per cent).

²² Rights of Persons with Disabilities Act, 2016, sch. (India) (listing specific learning disabilities among the specified disabilities).

²³ CENSUS OF INDIA, *supra* note 2 (multiple disability, 7.9 per cent).

V. NATIONAL DISABILITY INSTITUTIONS IN INDIA

India has established several national institutions dedicated to disability rehabilitation, education, research and capacity building.²⁴ These institutions have played an important role in service delivery and professional development, although their nomenclature in some cases reflects older terminology. Key institutions include:

- Ali Yavar Jung National Institute of Speech and Hearing Disabilities (Divyangjan), Mumbai
- National Institute for Empowerment of Persons with Multiple Disabilities (Divyangjan), Chennai
- Swami Vivekanand National Institute of Rehabilitation Training and Research, Cuttack
- National Institute for Locomotor Disabilities (Divyangjan), Kolkata
- National Institute for the Empowerment of Persons with Visual Disabilities (Divyangjan), Dehradun
- National Institute for the Empowerment of Persons with Intellectual Disabilities (Divyangjan), Secunderabad
- Pt. Deendayal Upadhyaya National Institute for Persons with Physical Disabilities (Divyangjan), New Delhi

The renaming of many of these institutions reflects a broader shift towards respectful and updated disability terminology.

VI. DISABILITY AND SOCIAL GROUPS

PWD Population by Social Group, Census 2011

Group	PWD (%)	Males (%)	Females (%)
SCs	2.45	2.68	2.20
STs	2.05	2.18	1.92
Others	2.18	2.37	1.98
Total	2.21	2.41	2.01

Source: Census 2011.

²⁴ MINISTRY OF WELFARE, GOVERNMENT OF INDIA, NATIONAL COUNCIL FOR THE HANDICAPPED WELFARE (1994).

These figures indicate that disability is distributed across all social groups, with modest variation by caste category and gender.²⁵ The intersection of disability with caste, class, gender and rural disadvantage deserves more sustained scholarly attention, as these factors often compound exclusion.

Rural-Urban Distribution of Disability

Residence	PWD (%)	Males (%)	Females (%)
Rural	2.24	2.43	2.03
Urban	2.17	2.34	1.98
Total	2.21	2.41	2.01

Source: Census 2011.

The rural-urban distribution suggests a slightly higher prevalence of reported disability in rural areas.²⁶ This has important policy implications because rural areas often have weaker infrastructure, fewer rehabilitation services, lower institutional reach, and reduced access to assistive devices, inclusive education and formal employment.

VII. CONSTITUTIONAL PROVISIONS RELATING TO PERSONS WITH DISABILITIES

The Constitution of India does not treat disability as a marginal issue; rather, its guarantees of equality, dignity, welfare and social justice provide the normative foundation for disability rights.²⁷ Although disability is not always expressly named in every constitutional provision, persons with disabilities are fully entitled to the constitutional promises available to all citizens, and to affirmative measures designed for disadvantaged groups.²⁸

Relevant constitutional principles include:

- The Preamble, which guarantees justice, liberty, equality and dignity.
- Article 14, which guarantees equality before the law and equal protection of the laws.
- Article 15, which permits special provisions for disadvantaged groups and supports substantive equality.
- Article 16, which guarantees equality of opportunity in public employment.

²⁵ CENSUS OF INDIA, *supra* note 2.

²⁶ CENSUS OF INDIA, *supra* note 2 (prevalence of 2.24 per cent in rural areas against 2.17 per cent in urban areas; about 69 per cent of persons with disabilities were enumerated in rural India).

²⁷ DURGA DAS BASU, COMMENTARY ON THE CONSTITUTION OF INDIA vol. 5 (4th ed., Prentice Hall of India 2003).

²⁸ M.P. JAIN, CONSTITUTIONAL LAW OF INDIA (Universal Publications 2009).

- Article 21, interpreted broadly, which supports the right to live with dignity.
- Article 38, which directs the State to promote social welfare and reduce inequalities.
- Article 41, which recognises the State's obligation, within its capacity, to provide public assistance in cases of disablement, along with work and education.
- Article 46, which promotes the educational and economic interests of weaker sections.

In addition, Entry 9 of the State List in the Seventh Schedule refers to "relief of the disabled and unemployable", indicating that State Governments have an important role in designing and implementing disability welfare measures.^{29,30}

VIII. LEGAL FRAMEWORK FOR DISABILITY IN INDIA

India's disability law has evolved from a welfare-oriented approach to a rights-based framework.³¹ Major enactments include:

- The Indian Lunacy Act, 1912.
- The Mental Health Act, 1987, since repealed and replaced by the Mental Healthcare Act, 2017.³²
- The Rehabilitation Council of India Act, 1992.
- The Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995.³³
- The National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999.³⁴
- The Right of Children to Free and Compulsory Education Act, 2009.
- The Rights of Persons with Disabilities Act, 2016.³⁵

Among these, the RPwD Act, 2016 is the most significant contemporary statute because it adopts a rights-based, dignity-centred and accessibility-oriented approach consistent with modern disability jurisprudence.

²⁹ INDIA CONST. sch. VII, list II, entry 9.

³⁰ J.C. JOHARI, *INDIAN GOVERNMENT AND POLITICS* (Vishal Publications 1976).

³¹ IYER, *supra* note 1.

³² Mental Healthcare Act, 2017, No. 10 of 2017 (India), which repealed the Mental Health Act, 1987 with effect from 29 May 2018.

³³ Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, No. 1 of 1996 (India), repealed by Rights of Persons with Disabilities Act, 2016, § 102 (India).

³⁴ National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999, No. 44 of 1999 (India).

³⁵ Rights of Persons with Disabilities Act, 2016, No. 49 of 2016 (India), brought into force on 19 April 2017.

A. Key Features of the Persons with Disabilities Act, 1995

The 1995 Act was an important milestone in Indian disability law. Its major provisions included:

- Reservation of not less than 3 per cent in public employment and in educational institutions.³⁶
- Reservation of not less than 3 per cent in poverty alleviation schemes.³⁷
- Provision of aids and appliances.
- Support for special schools, vocational training, research and rehabilitation initiatives.
- Unemployment allowance in specified circumstances.³⁸
- Free education for children with disabilities up to the age of 18 years.³⁹
- Transport and access-related support, including barrier-free measures.
- Protection against denial of rights and certain employment-related safeguards.

Despite these advances, the Act remained limited in scope and reflected an older welfare model. It did not fully incorporate the principles of autonomy, inclusion, accessibility and non-discrimination that later became central to disability rights law.

B. Key Provisions of the Rights of Persons with Disabilities Act, 2016

The Rights of Persons with Disabilities Act, 2016 transformed Indian disability law by moving beyond welfare and towards enforceable rights. Some of its major features are outlined below.

i. Expanded Definition and Recognised Disabilities

The Act adopts a broad, interaction-based definition of disability under Section 2(s), and it expands the recognised categories of disability to 21 specified conditions.⁴⁰ This marks a substantial departure from the narrower framework of the 1995 Act.

ii. Equality and Non-Discrimination

Section 3 guarantees equality before the law, equal protection of the law and non-discrimination. It further affirms that no person with disability shall be discriminated against on the ground of disability unless it is shown that the impugned act or omission is a proportionate means of achieving a legitimate aim.⁴¹

³⁶ Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, §§ 33, 39 (India).

³⁷ *Id.* § 40.

³⁸ *Id.* § 68.

³⁹ *Id.* § 26.

⁴⁰ Rights of Persons with Disabilities Act, 2016, § 2(s), sch. (India).

⁴¹ *Id.* § 3(3).

iii. Women and Children with Disabilities

The Act recognises that women and children with disabilities face heightened vulnerability and requires the State to take appropriate measures to ensure their full development, protection and participation.⁴²

iv. Inclusive Education

Section 16 places a duty on the appropriate Government and local authorities to ensure inclusive education for children with disabilities in educational institutions funded or recognised by them. This includes reasonable accommodation, individualised support, accessible campuses and measures to maximise academic and social development.⁴³

v. Employment Reservation

Section 34 increases reservation in government establishments from 3 per cent under the 1995 law to 4 per cent for persons with benchmark disabilities.⁴⁴ This expansion is one of the most significant affirmative action measures in the Act.

vi. Accessibility

Section 40 empowers the Central Government to frame accessibility standards. Section 41 addresses access to transport, while Section 42 mandates accessible information and communication technology.⁴⁵ Together, these provisions recognise that exclusion often results from inaccessible systems rather than from impairment alone.

vii. Social Security, Health, Rehabilitation and Recreation

Section 24 requires the appropriate Government to formulate schemes and programmes relating to social security for persons with disabilities, while cognate provisions of the same Chapter address health care, rehabilitation and recreation.⁴⁶ These provisions are particularly important in linking disability rights with material support and social protection.

⁴² *Id.* § 4.

⁴³ *Id.* § 16. *See also id.* § 32 (reserving not less than five per cent of seats for persons with benchmark disabilities in government and government-aided higher educational institutions).

⁴⁴ *Id.* § 34(1) (not less than four per cent of the total number of vacancies in government establishments); *cf.* Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, § 33 (India) (3 per cent).

⁴⁵ Rights of Persons with Disabilities Act, 2016, §§ 40–42 (India).

⁴⁶ *Id.* § 24 (social security); *id.* § 25 (health care); *id.* § 27 (rehabilitation); *id.* § 30 (sporting and recreational activities).

viii. Legal Capacity and Limited Guardianship

Sections 13 and 14 affirm the right of persons with disabilities to equal recognition before the law and introduce the concept of limited guardianship, under which decisions are taken jointly and in accordance with the will of the person concerned.⁴⁷

ix. Protection from Abuse, Violence and Exploitation

The Act contains protective provisions for persons with disabilities who are vulnerable to abuse, violence and exploitation.⁴⁸ Section 92 provides penalties for offences such as intentionally insulting or intimidating a person with disability with intent to humiliate in any place within public view, or assaulting or outraging the modesty of a woman with disability.⁴⁹

Taken together, these provisions establish a stronger and more comprehensive legal architecture for disability rights in India. The central challenge now lies in implementation, monitoring and enforcement.

IX. SOCIAL SECURITY FOR PERSONS WITH DISABILITIES

Social security is a central dimension of disability justice because it addresses the economic and social vulnerabilities that frequently accompany exclusion, unemployment, dependence and discrimination. Persons with disabilities may require additional support in relation to education, assistive devices, health care, transportation, rehabilitation, housing and livelihood security.

In India, social security measures for persons with disabilities derive from constitutional commitments, statutory guarantees, welfare schemes and targeted benefits administered by the Central and State Governments.⁵⁰ However, access remains uneven, especially for persons in rural areas, the informal economy and low-income households.

Important dimensions of social security for persons with disabilities include:

- disability pensions and maintenance support;
- unemployment assistance;
- tax concessions;
- scholarships and fellowships;
- assistive devices and rehabilitation services;
- insurance and livelihood support;

⁴⁷ *Id.* §§ 13, 14.

⁴⁸ *Id.* § 7.

⁴⁹ *Id.* § 92.

⁵⁰ Rights of Persons with Disabilities Act, 2016, § 24 (India); INDIA CONST. art. 41.

- caregiver-related assistance;
- barrier-free access to public services.

The need for robust social security is particularly urgent because many persons with disabilities remain outside the organised labour market. Where disability intersects with poverty, caste disadvantage, gender inequality or rural exclusion, access to rights becomes even more difficult. A rights-based welfare model must therefore combine legal entitlement with administrative accessibility.

A. Selected Benefits and Entitlements Available to Persons with Disabilities

Persons with disabilities in India may avail themselves of a range of benefits in the fields of education, employment, taxation and social assistance, subject to statutory criteria and certification requirements. These include:

- Income tax deductions under the Income-tax Act, 1961, including relief under Section 80U for eligible persons with disabilities.⁵¹
- Scholarships for students with disabilities under Central and State schemes.
- Reservation in educational institutions and public employment for eligible categories.⁵²
- Age relaxation in recruitment to government posts.
- Exemption from certain application and examination fees in public recruitment.
- Priority and reasonable accommodation in posting and work allocation, where applicable.
- Disability pensions and related assistance under Central and State welfare schemes.
- Legal support through guardianship and protection mechanisms in appropriate cases under disability law.

Because schemes and monetary values may change over time, current implementation details should be verified through the relevant ministry notifications and official government portals.

X. PROBLEMS FACED BY PERSONS WITH DISABILITIES

Despite legal recognition, persons with disabilities continue to encounter layered barriers in everyday life. These barriers are social, psychological, physical, economic and institutional.

⁵¹ Income-tax Act, 1961, § 80U (India).

⁵² Rights of Persons with Disabilities Act, 2016, §§ 32, 34 (India).

A. Social Problems

Social stigma remains one of the most pervasive challenges. Persons with disabilities may face ridicule, pity, neglect, exclusion from family decisions, limited marriage prospects and reduced participation in community life.⁵³ Discriminatory language and cultural stereotypes often reinforce the notion that disability is a source of shame rather than a dimension of human diversity.

B. Psychological Problems

Psychological distress may arise not only from a disabling condition itself but also from persistent exclusion, humiliation, dependency and lack of opportunity.⁵⁴ Low self-esteem, anxiety, alienation and frustration may be intensified when social and institutional support is absent.

C. Physical and Environmental Problems

Inaccessible public buildings, transport systems, footpaths, toilets, classrooms, digital platforms and workplaces remain major obstacles. Although accessibility has improved in some sectors, implementation is inconsistent and often inadequate.

D. Educational and Employment Problems

Persons with disabilities frequently face inadequate inclusive education, shortage of assistive technology, inaccessible examinations, low expectations from institutions, and discrimination in recruitment and promotion. These barriers reduce both educational attainment and long-term economic independence.

XI. CONCLUSION

Persons with disabilities constitute a significant and diverse section of India's population, yet they continue to experience systemic disadvantage shaped by stigma, inaccessible environments and uneven implementation of legal rights. Disability in India must therefore be understood not only in medical terms but also in relation to social attitudes, institutional barriers and material inequalities.

This paper has shown that India possesses a substantial constitutional and statutory framework for the protection of persons with disabilities. The transition from the Persons with Disabilities Act, 1995 to the Rights of Persons with Disabilities Act, 2016 marks a major normative shift from welfare to rights, from charity to dignity and from exclusion to inclusion. The RPwD Act,

⁵³ BHUSHAN ET AL., *supra* note 3.

⁵⁴ DAVAR, *supra* note 19.

2016 strengthens guarantees relating to equality, accessibility, education, employment, legal capacity and social security.⁵⁵

However, the persistence of derogatory social nomenclature, poor accessibility, weak awareness and gaps in implementation demonstrates that legal reform alone is insufficient. Effective realisation of disability rights requires stronger enforcement, sensitisation of institutions, accessible service delivery, reliable data and meaningful participation of persons with disabilities in policymaking. The success of disability law ultimately depends on whether it enables persons with disabilities to live with autonomy, equality and dignity in everyday life.

⁵⁵ Rights of Persons with Disabilities Act, 2016, §§ 3, 13, 14, 16, 24, 32, 34, 40–42 (India).