

VISION 2031

Designing an Inclusive Future:

Kerala's Vision for Disability Rights and Inclusive Development

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Brandeis THE HELLER SCHOOL
FOR SOCIAL POLICY
AND MANAGEMENT

Lurie Institute for Disability Policy



Lurie Institute for Disability Policy

Working to improve the lives of people with disabilities across the lifespan

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Lurie Institute for Disability Policy

Disability policy began with **exclusion, elimination, and control** — through eugenics, forced sterilization, and institutional confinement designed to remove disabled people from society.



Photo by Ajaib S. Kochar for World Health Organization. SEARO MENTAL HEALTH. India, 1972. WHO/16259: Published in the WHO Photo Library, ref. WHO_A_010618.

Disability was also framed as **charity and welfare**, positing disabled people as **objects of pity** rather than agents with autonomy.



Philip Dunn

The medical model frames disability as **pathology** — something to diagnose, fix, and normalize — locating the “problem” in the individual.



A hospital attendant wheels a patient through a hospital in New Delhi, India, Reuters

Today, disability is understood as a matter of **civil and human rights**, demanding access, equity, participation, and structural change.



Demonstrators hold a banner that reads "Right to live with dignity" and "Stop the cycle of violence"

Rehabilitation Act of 1973 (United States)

No otherwise qualified individual with a disability in the United States...shall, solely by reason of her or his disability, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance...”

29 U.S.C. § 794(a)



Global Disability Rights Now

Americans with Disabilities Act of 1990

- **Civil rights law that prohibits discrimination against individuals with disabilities in all areas of public life**
 - employment, schools, transportation, and all public and private places that are open to the general public.
- The purpose of the law is to make sure that people with disabilities *have the same rights and opportunities as everyone else.*



The Capitol Crawl Demonstration, A.P.

The UN Convention on the Rights of Persons with Disabilities (CRPD)

- Adopted in **2006**; ratified by 190+ countries, including India
- Reframes disability:
 - From charity and medical care
 - To **human rights, equality, and state responsibility**
- Establishes the right to:
 - Non-discrimination and equality before the law
 - Participation and autonomy
 - Accessibility across physical, social, and institutional environments



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- **Accessibility** (Article 9): built environments, transport, information, services
- **Inclusive systems**, not parallel ones:
 - Education (Article 24)
 - Health (Article 25)
 - Work and employment (Article 27)
 - Independent living and community inclusion (Article 19)
- **Participation and accountability:**
 - Involvement of persons with disabilities in decision-making (Article 4.3)
 - Monitoring and implementation mechanisms



Rights of Persons with Disabilities Act, 2016

- Enacted as part of India's commitments under the CRPD
- Establishes disability as a **rights and justice** issue, not charity or welfare
- Applies across key domains: education, employment, health, housing, and public services
- Expands the definition of disability (from 7 to 21 recognized disabilities)

The RPwD Act provides India with a comprehensive legal framework for disability rights and inclusion.



Core Provisions of the RPwD Act of 2016

- Non-discrimination and equality
- Accessibility mandates for buildings, transportation, and services
- Education and employment provisions:
 - Inclusive education
 - Reservation in government employment
- Social protection and security measures
- Legal remedies and grievance redress mechanisms

The Act shifts responsibility from individuals to institutions and systems.



From Law to Lived Experience

- Strong legal framework, uneven implementation across states
- Gaps in:
 - Infrastructure and accessibility
 - Administrative capacity
 - Inter-ministerial coordination
 - Uneven enforcement across states
 - Accessibility compliance remains limited
 - Certification processes can be burdensome



Kerala: Inclusive Development

Kerala has transitioned from a conventional welfare-based model to a **rights-based life-cycle** approach for persons with disabilities

- recognizes disability as a human rights and development issue rather than a matter of charity



Kerala's Disability Inclusion Model



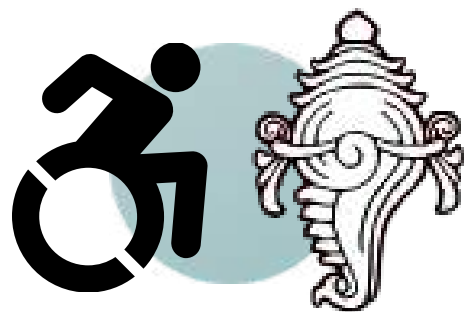
Life-Course Commitment

A comprehensive “cradle to grave” framework — from prevention and early identification to inclusive education, employment pathways, independent living, and elder support.



Rights, Not Charity

Disability is treated as a legal entitlement, with budget allocations grounded in state responsibility rather than residual welfare funding.



Universal Accessibility as State Obligation

A systemic commitment to barrier-free public spaces, services, and utilities — with the goal of full accessibility across all government infrastructure.

Institutional & Legal Architecture



Decentralized Funding Mandate

Local Self Government Institutions (LSGIs) are required to earmark 5% of their total development funds for children, persons with disabilities, and transgender persons — embedding inclusion at the panchayat and municipal levels.



Legal Alignment with National Law

Kerala has updated its state protocols to align with the Rights of Persons with Disabilities Act, 2016, expanding recognized disability categories from 7 to 21 and strengthening rights protections.

Anuyatra: Operationalizing Disability Inclusion in Kerala

Life-Course Framework

Integrated support from early identification and intervention to education, livelihood, community participation, and elder care.

Cross-Sector Implementation

Coordinates health, education, social protection, accessibility, and community-based services under a unified approach.

Service Navigation & Community Outreach

Help desks, early intervention centres, and local-level facilitation to reduce administrative and access barriers.

Transform the state into a disabled-friendly society and empowering persons with disabilities across the life span.

Reflects a holistic, integrated approach to inclusion and support for people with disabilities.



Healthcare and Insurance



Sruthitharangam (SCIP): Provides free cochlear implants for children aged 1–5 from low socio-economic backgrounds.



Niramaya Scheme: An annual health insurance program providing coverage for people with specific disabilities



Aswasakiranam assistance: Provides a monthly allowance to caregivers (often women) who have given up their jobs to provide full-time care to their disabled family members

Early Identification

Universal Hearing Screening: Neonates in government maternity hospitals undergo universal hearing screenings within their first month of life.

District Early Intervention Centres (DEICs): These centers provide a "single window" for identifying developmental delays and providing advanced services including support from developmental and occupational therapists.

Screening Programs: The Salabham program ensures that all babies born in government hospitals are subjected to comprehensive newborn screening



Education & Research

National Institute of Speech and Hearing (NISH): Offers specialized higher education for the deaf and hard of hearing

National Institute of Physical Medicine and Rehabilitation (NIPMR): A center of excellence that provides advanced neuro-rehabilitation for conditions like spinal cord injuries and strokes and manufactures assistive technology like its "Rehab on Wheels" mobile unit.

ICCONS: A specialized neuro-center managing cognitive and communicative disorders across all age groups



The challenge is not policy design

The challenge is not policy design — it is policy implementation

Why do good policies fail in practice?

How do we ensure equitable, sustained impact?

The Implementation Gap in Disability Policy

Laws without enforcement mechanisms

Budget allocations without monitoring

Accessibility standards without audits

Certification processes that exclude a significant proportion of eligible individuals

Implementation failure can reproduce inequity.



What the Global Evidence Tells Us

Australia

National Disability Insurance Scheme (NDIS) is ambitious and well-funded.
But early implementation faced:

- Workforce shortages
- Uneven rural access
- Administrative burden

Lesson: Even well-resourced systems struggle without strong implementation infrastructure.

What the Global Evidence Tells Us

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Sweden

Sweden emphasizes universal design and municipal responsibility.
However, local-level variation persists.

Lesson: Decentralization requires monitoring mechanisms.

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United Kingdom

The UK's Equality Act of 2010 created strong legal protections.
Yet enforcement gaps remain, particularly in employment and accessible housing.

Lesson: Legislation alone is insufficient without accountability and data.

From Policy to Practice: Realizing Vision 2031

Kerala has long been celebrated for its human development achievements — literacy, life expectancy, decentralized governance, and strong public health systems.

A disability policy can be visionary.

But unless it is implemented with structure, accountability, and equity, it risks becoming symbolic.

Implementation science helps us answer:

- Who is actually being reached?
- Where are implementation gaps emerging?
- How do we adapt policies to local contexts?
- How do we sustain change beyond leadership transitions?

If Kerala's 2031 development vision includes disability inclusion, the state must move from:

Policy declaration → Structured execution → Measurable equity outcomes

Implementation science gives us that roadmap.

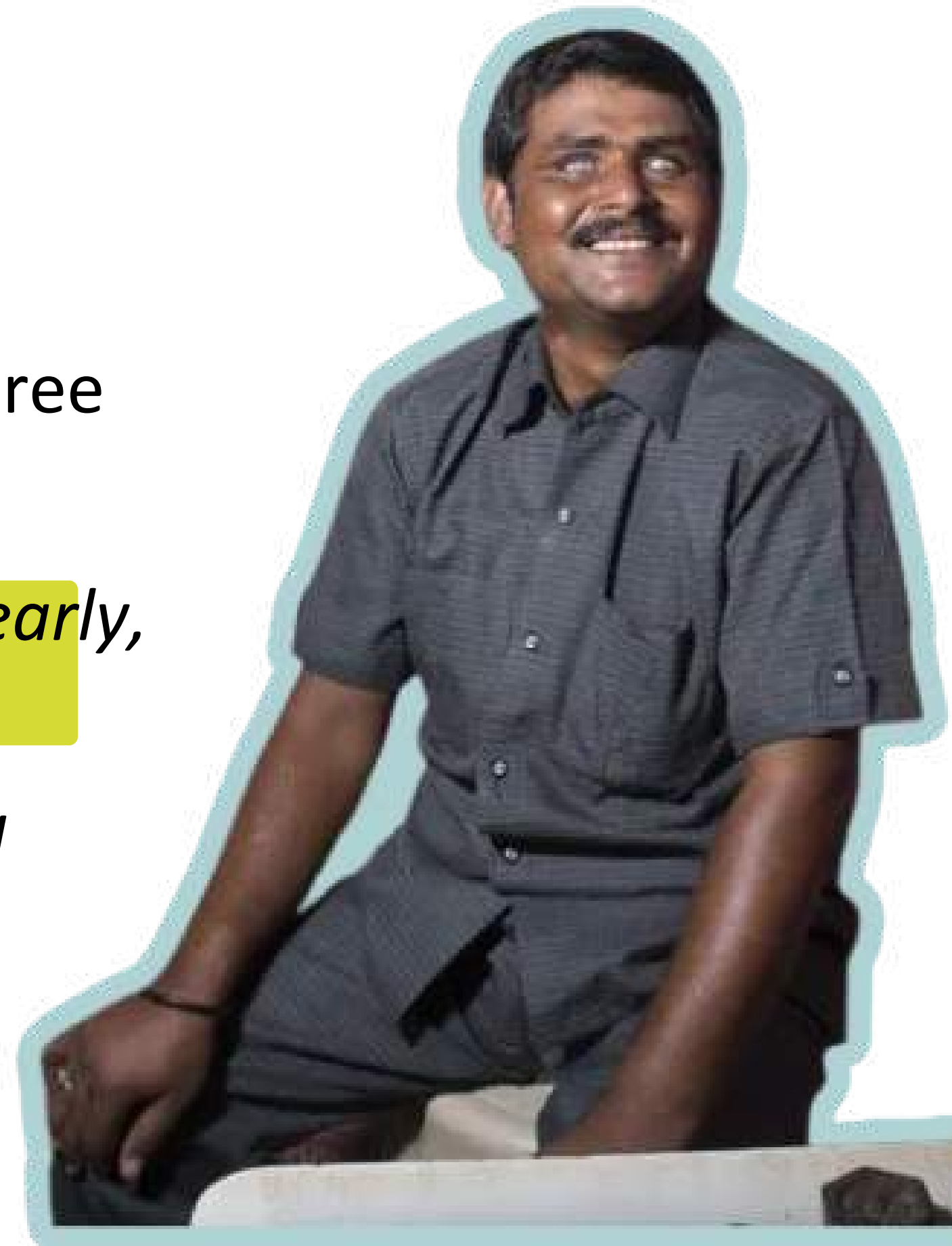
Implications for Kerala

Kerala has advantages:

- Strong public systems
- Community-based networks like Kudumbashree
- Participatory planning traditions

If Kerala integrates implementation science early, it can avoid pitfalls seen globally.

*Kerala can **move beyond compliance** toward transformative inclusion.*



Core Framework – RE-AIM Applied to Kerala

Reach

Are disability services reaching:

- Tribal populations in Wayanad?
- Coastal communities?
- Women with psychosocial disabilities?
- People with intellectual disabilities?

Effectiveness

Are we improving:

- Employment outcomes?
- Maternal health access?
- Secondary school completion?

Adoption

Are all panchayats adopting disability guidelines — or only some?

Implementation

Are accessibility standards followed in PHCs, anganwadis, and schools?

Maintenance

Are these efforts institutionalized with dedicated budgets?

Cross-cutting issues: Gender and disability

Globally, women with disabilities experience significantly higher rates of gender-based violence.

Research consistently shows:

- Increased vulnerability to intimate partner violence
- Higher risk of sexual violence
- Barriers to reporting and accessing justice

Implementation questions for Kerala:

- Are One Stop Crisis Centres accessible?
- Are police trained to communicate with women with intellectual or psychosocial disabilities?
- Are shelters physically accessible?
- Are helplines equipped with sign language or alternative communication supports?



Reproductive Justice & Health Equity

Globally, women with disabilities face:

- Coerced sterilization (historically and in some contexts, still)
- Dismissal of reproductive autonomy
- Inaccessible maternal care
- Provider bias

Kerala has strong maternal health indicators.

But implementation science asks:

- Are PHCs physically accessible?
- Are providers trained in respectful maternity care for disabled women?
- Are antenatal materials available in accessible formats?
- Are postpartum home visits inclusive?

Kerala could lead India by integrating disability-specific reproductive health indicators into maternal health monitoring systems.



Stigma and discrimination

Even well-designed programs fail when social norms remain unchanged.

Disability inclusion must include:

- Public awareness campaigns grounded in rights, not charity
- Representation of disabled persons in governance structures
- Anti-discrimination enforcement mechanisms
- Disability competency training across sectors
- Support for Disabled Persons' Organizations (DPOs)

*Inclusion is not only about ramps and budgets.
It is about dignity, agency, and belonging.*



Inclusion Is the Foundation of Implementation

For Kerala's disability policy to be effectively implemented, inclusion must be embedded at every level — not added later.

A “**Nothing About Us Without Us**” framework means:

- Disabled people are co-creators, not recipients
- Policies are shaped by lived experience
- Programs are designed with accessibility from the outset
- Monitoring includes community accountability



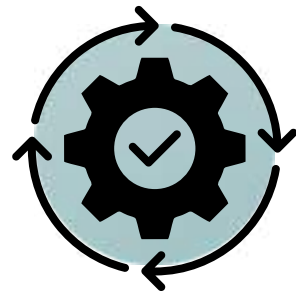
Rights-based legislation succeeds only when governance itself is inclusive.

Principles of Inclusion



Co-Design

Disabled persons' organizations involved in drafting implementation guidelines.



Co-Implementation

Hiring disabled professionals across government departments.



Co-Evaluation

Community monitoring, social audits, public dashboards.

Participation improves:

- Relevance
- Trust
- Accountability
- Sustainability

Kerala already has participatory traditions — disability inclusion can deepen them.

What gets measured gets implemented — and what gets centered gets transformed.



What gets measured gets implemented

- Clear disability indicators across departments
- Budget allocations tied to measurable targets
- Public and accessible dashboards tracking progress
- Department level accountability for outcomes
- Disaggregated data (gender, rural/urban, disability type)



What gets centered gets transformed

- Disability embedded across all sectors
- Disabled persons in leadership, advisory, and design roles
- Universal design integrated into mainstream planning
- Inclusion treated as a development priority

“By 2031, Kerala will be a society where the term **“marginalized”** becomes obsolete. It will be a state where the government acts as a **facilitator of dreams**, where the community acts as a **shield of protection**, and every resident can say with pride that they live in the **most compassionate corner of the world with their rights protected**. This is **our promise to the future**: a sustainable, inclusive, and empowered Kerala for all.”

Vision 2031



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