

# Trends and Utilization of Government Disability benefits among Chronic Mentally Ill and Disabled Person

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**Abstract**—Mentally retarded and chronic mentally ill are being certified using IQ Assessment and Indian Disability Evaluation and Assessment Scale (IDEAS). They have been granted various benefits including monthly pension, from Ministry of Social Welfare, Government of India. The monthly pension appears to be the strongest reason for seeking certification and applying for government benefits. The caregivers appear to have only partial information and awareness about the remaining schemes.

**Objective:** The study aims to assess the severity of disability in the mentally retarded and mentally ill who are certified for disability benefits, as well as to assess the trends of utilization of disability benefits over a 3 year period.

**Materials and Methods:** This was a retrospective, file review based study of certificates of patients certified for mental disability in the period of January 2006 to December 2008. Certificates of a total of 1794 mentally retarded and 285 mentally ill were reviewed. The data regarding utilization of disability benefits was assessed. Results: Patients from rural areas did not avail any benefits other than the disability pension. Among Mentally Ill, Schizophrenia accounted for highest certifications. Males had higher disability compared to females, and Dementia showed highest disability as per IDEAS.

**Conclusion:** Though initial hurdles due to disability measurement have been crossed, disability benefits are still elusive to the vast majority of the disabled. Proper awareness and education will help in reducing the stigma and in the effective utilization of benefits.

**Keywords:** Chronic mentally ill, disability benefits, psychiatric disability, IDEAS scale

## Introduction

In India, majority of the 125 million mental ill require intensive rehabilitation services. The transient nature of the disabilities of mental illnesses and the nature of the socio-occupational impairment posed a challenge for the measurement of the disability. As this was the major hurdle in including mental illnesses into the government's social welfare benefits under the Persons with Disability Act of 1995, the Rehabilitation Committee of the Indian Psychiatric Society developed the Indian disability evaluation and assessment

scale (IDEAS),<sup>1</sup> which is now recommended by the Government of India to measure psychiatric disability.

The disabled are eligible for the following welfare schemes from the government:

1. Disability pension/unemployment pension
2. Disabled person's scholarship
3. Insurance scheme for the mentally challenged
4. Adhara scheme helping to set up small shops
5. Telephone booth
6. Free education up to 18 years
7. Free legal aid
8. Aids and appliances (for multiple disabilities)
9. 3% Job reservation (only cerebral palsy included)
10. Concessional bus passes
11. Railway concession

According to Census 2001, there are 2.19 crore people with disabilities in India, who constitute 2.13% of the total population. Of these, 9,40,643 are in Karnataka state, with 92,631 being mentally disabled. 75% of all persons with disabilities live in rural areas, 49% are literates and only 34% are employed.

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Chaudhury *et al.* found more people with schizophrenia in the rural areas and with dementia in the urban areas, with mood and anxiety disorders approximately evenly distributed. They also found that 64% of patients with schizophrenia, around 30% with mood disorders, 16.7% of anxiety disorders, had a disability of more than 40% on the IDEAS scale.

Jahan and Singh found that only 6% of the guardians of mentally retarded were aware of the persons with disabilities (PWD) Act. Singh and Nizamie reported poor awareness and underutilization of disability benefits.

Hence, in practice, disability benefits are still elusive for persons with mental disorders.

#### Aims of the present study

1. To assess the severity of disability in the mentally retarded and mentally ill certified for disability benefits.
2. To assess the trends of utilization of government benefits among chronic mentally ill, over a 3-year period.

#### Mental retardation

Out of a total 1794 who were assessed and certified during the 3-year period, 421 were seen in 2006, 931 in 2007 and 442 in 2008. A total of nine disability assessment camps, organized by the Department of Social Welfare, NGOs and self-help groups, were organized in 2007, while in 2008 there were four

camps. 2006 did not have any peripheral disability assessment camps.

The socio-demographic profile revealed that the majority of the mentally retarded study population were males, Hindus, and from rural areas.

69 (3.8%) had borderline intelligence, 431 (24.1%) had mild MR, 579 (32.3%) had moderate MR, 523 (29.2%) had severe MR, and 191 (10.6%) were certified as having profound MR.

The IQ/SQ correlated negatively with the disability percentages for both males and females and this correlation was statistically very highly significant with  $r=-0.945$  and  $P < 0.001$

Across the years, the majority of certifications were in the moderate-severe retardation categories. Severe and profound retardation also showed a significant trend toward male sex. The disability percentage did not show any correlation with the utilization of benefits other than disability pension, while the place of residence showed a very high correlation. 99% of patients from rural areas did not avail any benefits other than the disability pension, which was very highly statistically significant with  $P < 0.001$ . 6.6% of urban mentally retarded were availing special school education, while 6.8% were confined to rehabilitation/custodial care centers. 4.6% of the urban disabled availed income tax benefits.

#### Mental illnesses

Of the 285 mentally ill who were certified as disabled in the 3-year period, 16 mentally ill were certified in 2006, 210 in 2007, and 59 in 2008.

The socio-demographic profile ] shows that the majority of the mentally ill study population were males, Hindus, and from rural areas.

Of the clinical diagnoses, schizophrenia accounted for 65.3% and bipolar affective disorder accounted for 12.6%. 11.6% of cases were classified as chronic psychosis, of which many might be reclassified as having schizophrenia, according to recent ICD-10 criteria. The disability was evenly distributed across different age groups, with no statistical difference obtained when either IDEAS global score or disability percentage was compared to age groups. Males had higher disability compared to females, which was statistically very highly significant with  $P < 0.001$

#### Conclusion

Mental disorders lead to significant socio-occupational dysfunction. Though initial hurdles due to disability measurement have been crossed, disability benefits are still elusive to the vast majority of the disabled. Proper awareness and education will go a long way in reducing the stigma and help in the effective utilization of benefits. Assessing the utilization of benefits assumes importance in this direction.