



CDLA presents...

Empowerment through Law: A Disability Rights Newsletter

Edition V

PREFACE

We are delighted to present the Bi-Annual Newsletter of the Centre for Disability Law and Advocacy (CDLA), reflecting our commitment to advancing disability rights through research, education, advocacy, and meaningful engagement. This edition highlights the Centre's initiatives, key legal and policy developments, landmark judicial decisions, emerging research, national and international developments, and significant observances relating to the rights of persons with disabilities.

At CDLA, we seek to foster multidisciplinary dialogue by bringing together academicians, advocates, researchers, students, activists, and civil society organisations to strengthen scholarship and advocacy in the field of disability law. Through collaborative research, knowledge dissemination, sensitization programmes, and capacity-building initiatives, we strive to promote an inclusive academic environment and contribute to the evolving discourse on disability rights.

With every edition, we aim to encourage informed discussions, inspire innovative research, and strengthen collective efforts towards ensuring equality, accessibility, and the effective realization of the rights of persons with disabilities. Your support, engagement, and feedback remain invaluable in shaping this initiative and furthering our shared commitment to a more inclusive and equitable society. We look forward to your continued collaboration as we work together to advance disability rights and inclusive justice.

Disclaimer & Acknowledgement

The Centre for Disability Law and Advocacy (CDLA) expresses its sincere gratitude to the National Law University Odisha (NLUO) for providing a conducive platform to advance research, education, and advocacy in the field of disability law and the rights of persons with disabilities. The Centre places on record its profound appreciation to Dr. Tanwi Shams , Director, CDLA, for her invaluable guidance, constant encouragement, and unwavering support in the publication of this newsletter.

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The contents of this newsletter are intended exclusively to disseminate information and promote academic discourse on contemporary developments in disability law and policy. References to external sources should not be construed as an endorsement of the views expressed therein by the Centre for Disability Law and Advocacy.



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Reaffirming Disability Rights Through Substantive Equality: The Supreme Court's Ruling in *Sujata Bora v. Coal India Limited*

Lack of physical sight does not equate to a lack of vision

~Stevie Wonder

The commencement of the new year 2026 brought with itself remarkable news for Persons with Disabilities (PwDs). The Supreme Court on 13th January 2026, gave a monumental judgement in the case titled *Sujata Bora v. Coal India Limited & Otrs.*, wherein it proclaimed that the rights of persons with disabilities cannot be sacrificed under the guise of maintaining procedural technicalities. A bench comprising of Justices J.B. Pardiwala and K.V. Viswanathan emphasized that substantive equality, reasonable accommodation, and inclusivity are constitutional mandates, and neither mere matters of charity nor optional choices.

The cause of action arose due to a recruitment process which failed to uphold the principles of fairness and equality, thereby infringing upon the rights of Ms. Sujata Bora. In 2019, Coal India Limited had published an advertisement for the position of Management Trainee. Ms. Bora had applied under the visually disabled category, and had qualified for the interview round. After successfully passing it, she was further called for document verification and an Initial Medical Examination (IME) in 2021, wherein she was declared medically unfit and ineligible for the job on the grounds of visual disability together with residual partial hemiparesis.

Aggrieved by this, she approached the Calcutta High Court, seeking to reject the IME result. The judge leaned towards her demand, and quashed the IME result, stating that CIL could not deny appointment based on the multiple disabilities category. However, it only granted limited relief to her by directing consideration in the subsequent recruitment cycle, since the initial recruitment process had already concluded. Further, the Division Bench set even this aside, stating that the panel had expired.

When the matter reached the Apex Court, a comprehensive medical report of Ms. Bora was asked to be prepared by a medical team of AIIMS, New Delhi, and was presented before the court. This definitive report concluded her disability to be at 57%, which was clearly above the 40% benchmark, thus rendering her eligible for the appointment under the Rights of Persons with Disabilities Act (RPwD Act). Consequently, the court set aside the decision of the Division Bench, as it believed it would be unfair to the appellant to deny her the appointment simply because the recruitment process had concluded and the panel had expired.

This judgement touched upon numerous substantial aspects of inclusive governance, the primary being the principle of reasonable accommodation. It stated that this concept, which emanates from Article 41 r/w Articles 14 and 21 of the Constitution, is indeed a fundamental right and is present throughout the RPwD Act. The court established that this right is a gateway right, and is indispensable in enabling PwDs to enjoy and exercise their other inviolable rights. Denial of reasonable accommodation amounts to discrimination and undermining of substantive equality as enshrined in the RPwD Act. The Court rejected the constricted understanding of accommodation, limited to physical aids or infrastructural adjustments. It instead propagated a comprehensive, purposive and inclusive interpretation, aligned with self-respect, autonomy and participation of all.

Further, the court addressed and acknowledged the intersectionality of disability with gender. It recognized that the appellant was a single woman with a disability, striving to pursue her goals and earn a respectable livelihood. Thus, it held that analysis of equality cannot be based on a sole determinant when numerous spheres of disadvantage exist together.

Another outstanding feature of this judgement is the decision of the Supreme Court to invoke Article 142 of the Constitution, which empowers it to pass orders as it deems are necessary to ensure 'complete justice' in a particular case. The court ordered CIL to form a supernumerary post and appoint the appellant as a Management Trainee since it believed that ordinary remedies would not suffice. Additionally, the Court directed that the appellant be given a suitable desk job along with necessary assistive devices and accessible facilities required to perform her duties effectively. Such directions highlight that the drive for inclusion is not limited to recruitment; employers also need to provide conditions and opportunities for PwDs to work with dignity and independence.

Additionally, the Court also linked disability rights with constitutional jurisprudence by invoking Articles 14, 21, 39(a) and 41 of the Indian Constitution. It elaborated on how directive principles and fundamental rights are 'two wheels of a chariot' by citing the case of 'Minerva Mills Ltd. v. Union of India' (1980). It established that right to livelihood and work is very integral to lead a meaningful life.

The Supreme Court referred to the UN Guiding Principles and ILO documents and concluded that disability inclusion comes within the ambit of Corporate Social Responsibility (CSR) of companies and ESG frameworks. It emphasized, "True equality at the workplace can be achieved only with the right impetus given to disability rights as a facet of CSR." It equated disability rights with human rights and stated that it must be addressed from a humanitarian and non-bigoted perspective.

In conclusion, *Sujata Bora v. Coal India Limited* marks a monumental step towards the evolution of disability rights in India. It firmly established that reasonable accommodation is an intrinsic component of fundamental rights, and that the intersectionality of identities and disadvantages needs to be taken into account while ensuring substantive equality. This decision reinstated the primacy of the Indian Constitution and fundamental rights over institutional convenience. This judgement heralds a powerful warning to administrations and corporations throughout India, one that would continue to resonate for decades to come. As India's legal framework continues to evolve, this judgement is likely to serve as a significant precedent in further strengthening disability rights jurisprudence in the near future.

Written by Sarah Anand Raj

Beyond the Certificate: How India's UDID Ecosystem is Reshaping Disability Rights and What Lies Ahead

For years now, procuring a disability certificate in India has been quite an ordeal for many people with disabilities, with long waiting times and fragmented processes involving several office visits, re-assessments and paperwork to gain access to government schemes, reservations in education and employment, as well as social security facilities. While the rights of people with disabilities have gradually developed through judgments and legal amendments, the ease of administration has been one of the biggest stumbling blocks.

With the launch of the Unique Disability ID (UDID) project, there is hope that everything will take a drastic turn for the better. This scheme, as its name suggests, seeks to establish a digital identity for persons with disabilities throughout India. What makes the project unique is that it goes beyond being just another technological innovation, and seeks to bring a revolution in the way disability management is handled.

The relevance of the initiative was seen even more clearly during the process prior to and throughout early 2026 when the efforts of the Union Government as well as various State Governments towards digitization of disability certificates and service delivery have gained momentum. In sum, these initiatives are examples of the gradual shift of India from a welfare regime to a rights-based regime with an emphasis on accessibility and dignity in disability governance.

About the UDID Initiative

The Unique Disability ID (UDID) Initiative by the Department of Empowerment of Persons with Disabilities (DEPwD), Ministry of Social Justice and Empowerment aims to create a nationwide registry of disabled people while granting unique identity cards and digital disability certificates to the beneficiaries. Through the UDID system, individuals can apply for disability certification, renewal of their certificates, updating personal details, and downloading digital versions all within one online portal.

Furthermore, through the portal, it will be possible to facilitate integration between hospitals, health officials, district offices and other government agencies, which will help to simplify the certification process. The overall aim is to ensure that people with disabilities have access to related services no matter where they are located.

Consequently, through the UDID scheme, on one hand, the lives of people with disabilities will be simplified and, on the other hand, it will provide the government with a dependable source of data to design welfare programs for people with disabilities.

Legal Basis for Digital Inclusion

One of the most important sources of significance of the UDID scheme is the Rights of Persons with Disabilities Act, 2016 (RPwD Act). It was a revolutionary step in Indian disability laws as it replaced the Persons with Disabilities Act, 1995 and expanded the categories of disabilities from seven to twenty-one, enhanced the protection against discrimination, provided reservations in government employment and higher education and recognized accessibility, equality, and reasonable accommodation as fundamental rights instead of charity.

The Department of Empowerment of Persons with Disabilities remains the main body tasked with the responsibility of implementation of these legislative mandates through various schemes, policies, and digitization projects such as the UDID project. In this regard, the UDID card should not only be seen as an identity document but also as a means of ensuring that the statutory rights granted by the RPwD Act are achieved.

Recent Developments: Improved Certification Process

Continuing development of the UDID framework has been witnessed through various administrative and technological changes. The Government has from time to time published various notifications and guidelines meant to improve online applications, strengthen verification systems, and improve service delivery for applicants. This is an indication of efforts made by the government to continue perfecting the digital certification process. These include operational changes meant to facilitate proper cooperation between certifying agencies and applicants so as to improve the efficiency and transparency of the process.

Another response to the issue of certification backlogs has been the responses by the various State Governments. A case in point was in Odisha where the State has put forward the idea of Single Integrated Evaluation Platform (SIEP), meant to ensure that disability certificates are issued correctly and there is no administrative stress. Even though these are State-specific initiatives, they highlight a national trend towards digitisation of governance and standardised disability certification.

Importance of Digital Certification

The significance of an effective disability certification process goes far beyond mere administrative convenience. A disability certificate is often the key to a number of entitlements under law. Failure to secure a disability certificate may deprive eligible people of their right to scholarships, pensions, assistive devices, healthcare assistance, educational reservations, job facilities, travel discounts and many other forms of social security and protection.

With digital certification, the need for paper work gets eliminated; record duplication is avoided; multiple authorities get the ability to verify the certificate online; fraud and duplicate certificates

become harder to forge and detect. At the same time, digital records give disabled people a chance to maintain permanent online access to their records without depending on physical records that can get lost or damaged. Creation of the centralised database allows making well-informed decisions and policy based on the accurate data on demographic patterns, regional imbalances and gaps in services for the disabled people.

Challenges That Have Yet To Be Addressed

However, there are still some challenges related to the introduction of UDID that have yet to be overcome.

The first of them is the problem of uneven digital access. People with disabilities in rural areas might not have sufficient digital access to the network or adequate levels of knowledge about using computers, and they do not have close medical boards that perform disability examinations.

Also, some areas still lack specialist doctors who are necessary for disability examinations, which results in delays regardless of the improvements made in digital facilities. Administration, employee training, and interdepartmental cooperation play an important role here.

The next problem is making sure that all the institutions accept digital UDID cards without any physical checkups or extra documentation. Increased understanding on the part of government agencies is crucial for the project.

What Do We Have to Look Forward to in the Future?

In the future, disability governance in India is expected to become more integrated, data-based, and citizen-oriented. UDID is anticipated to see more integration with other government digital platforms, which will allow automatic eligibility to the beneficiaries of schemes without submitting the same documents over and over again. This will greatly minimize administrative workloads.

Also, artificial intelligence and data analytics will enable the government to identify areas that have been overlooked and predict future demand for disability services. At the same time, cooperation of the Union Government with State Governments can contribute to the standardization of certification processes. The future reforms would entail efforts towards enhancing accessibility within the digital platform through enhanced multilingual features, assistive technology compatibility, and adherence to the universally acceptable accessibility criteria.

In essence, it is important to note that technology needs to be a means rather than an end. The digital platform may help to make processes easy, but the process of inclusion will depend on continued investment in accessibility to healthcare services, education, employment, and successful implementation of the Rights of Persons with Disabilities Act.

Conclusion

The development of the UDID project can be seen as part of the wider transition in India from paper-based and bureaucratic procedures to modern service delivery based on the Rights of Persons with Disabilities Act, 2016 and continuous improvement of policies. With the Rights of Persons with Disabilities Act in place, it is envisioned that disability certification would become a tool of inclusion and not a barrier to access to rights.

Despite implementation difficulties, recent advances made by both Union and States have indicated an increasing interest in updating the process of disability governance. Provided that institutional capacity building, access to technology and enforcement of the rights of persons with disabilities take place, the UDID ecosystem can become one of the greatest achievements of India towards equality and independent life for persons with disabilities.

Written by Stuti Jha

A Victory Beyond Numbers: Moving from Medical Limits to Meaningful Inclusion

A Victory Beyond One Appointment

In the landscape of Indian disability jurisprudence, March 2026 marked a significant doctrinal moment. In the case of *Prabhu Kumar v. State of Himachal Pradesh*, the Supreme Court of India dealt with the issue that lay at the intersection of equality, dignity, disability rights, and public employment, that 'whether the State could exclude a candidate from a reserved disability quota because his disability was considered "too severe"'.

The Court's answer was clear and unequivocal that States do not get to decide based on their whims and fancies and thus, struck down a recruitment condition that restricted eligibility to candidates possessing between 40% and 60% disability. The Court held that the Rights of Persons with Disabilities Act, 2016 (RPwD Act), establishes a threshold of inclusion for all beyond their disabilities, not a ceiling for exclusion. In doing so, the judgement has once again reaffirmed that modern Indian disability jurisprudence is rooted in inclusion, equality, and reasonable accommodation rather than rigid medical classifications.

Further, the decision marks yet another step forward in the dogmatic shift that has characterised the Supreme Court's disability jurisprudence in recent years, from a welfare-oriented understanding of disability towards a rights-based constitutional framework. By rejecting arbitrary distinctions within the class of persons with disabilities, the Court reinforced the idea that substantive equality requires dismantling institutional barriers rather than merely providing formal access to opportunities.

The Facts Behind the Litigation

The controversy arose on account of the recruitment process which was conducted by the Himachal Pradesh Public Service Commission for the post of Assistant District Prosecutor. Though the State government had made reservation for people with disabilities but it had placed an odd condition regarding it whereby the candidate would have a disability between 40% to 60%.

Prabhu Kumar, a practising advocate suffering from 90% locomotor disability due to left shoulder disarticulation, applied for the post. Despite successfully clearing the selection process and emerging as one of the most meritorious candidates within the reserved category, he was denied appointment solely because his disability exceeded the prescribed 60% limit. The State argued that he fell outside the eligibility criteria laid down in the advertisement. The matter eventually reached the Supreme Court after the Himachal Pradesh High Court declined to grant relief.

As such, while rendering its judgment, the Court noted that the applicant had been able to practise his profession as a lawyer since 2015, thus showing his capability of fulfilling professional duties regardless of his disability. However, he was not allowed to work because of a numerical limit rather than lack of qualification.

A Floor, Not a Ceiling

The central issue before the Court was whether the State could impose a maximum disability limit when the RPwD Act only prescribes a minimum threshold of 40% benchmark disability. The Supreme Court held that the legislation creates a floor of inclusion, not a ceiling of exclusion. In other words, the law specifies the minimum degree of disability required to avail reservation benefits but does not authorise any government to exclude persons whose disability exceeds a particular percentage just on the basis of their will.

The Court found no rational basis for the 60% upper limit and observed that the State could not justify why a person with a 59% disability would be considered suitable while a person with a 90% disability would automatically become unsuitable. Such a distinction, the Court held, was arbitrary and inconsistent with both the RPwD Act and constitutional guarantees of equality under Articles 14 and 16.

Moving Beyond Medical Percentages

Perhaps the most significant contribution of the judgement lies in its understanding of disability itself as for decades, disability law has often relied upon a medical model that viewed disability primarily as an individual's limitation. Contemporary disability jurisprudence, however, adopts a social and rights-based model. Under this approach, barriers arise not merely from physical impairments but from institutions and systems that fail to accommodate diverse abilities.

The Court therefore rejected the notion that disability rights can be reduced to rigid medical classifications. Instead, it emphasised that the State has a positive obligation to ensure meaningful participation in public employment. This reasoning aligns with earlier decisions such as Vikash Kumar v. UPSC, where the Supreme Court strongly endorsed the doctrine of reasonable accommodation.

A Strong Message to Governments

Importantly, the Supreme Court did not merely stop at declaring the disability ceiling gross and illegal.

The Court directed the State to appoint the appellant and ordered that his appointment relate back to 2019 for the purpose of notional benefits. It further imposed costs of ₹5 lakh upon the State for the prolonged injustice suffered by him. This aspect of the judgment underscores that disability rights now, are not merely aspirational promises but enforceable legal entitlements.

Why This Judgment Matters

The significance of the decision extends far beyond a single recruitment process in Himachal Pradesh. Across India, persons with disabilities continue to encounter barriers in education, employment, transportation, and public services. Many of these barriers are justified through assumptions about what disabled persons can or cannot do.

By striking down the disability ceiling, the Supreme Court challenged those assumptions directly. The ruling sends a simple but powerful message: individuals should be evaluated on their abilities, qualifications, and actual performance rather than on arbitrary numerical labels.

At its core, the judgment reminds us that disability law exists not to determine who is capable enough to participate in society, but to ensure that society removes the barriers preventing participation in the first place. In doing so, the Court has taken another important step toward transforming the constitutional promise of equality into a lived reality for persons with disabilities.

Written by Aarohee Purohit

Supreme Court's Interpretation of Acid Attack Victims under RPwD Act

“for all intents and purposes, and in order to give full effect to the legislative scheme underlying the 2016 Act, the expression ‘acid attack victims’ shall be construed to include victims to whom acid has been administered”

– Shaheen Malik v. Union of India & Anr.

The Supreme Court ruled in a significant and broad reading of the Rights of Persons with Disabilities Act, 2016 (the "RPwD Act") that individuals who are forced to consume acid must also be considered "acid attack victims" under the law, even if they do not experience obvious external disfigurement. By acknowledging that acid assaults are not limited to situations in which acid is poured on a victim's body, the order greatly expands the protection afforded to victims of acid violence. The Court also made it clear that people who have internal injuries from ingesting acid have the same right to the statutory benefits and protections provided by the RPwD Act. Acid attack survivors' entitlement to disability certificates, reservations, rehab programs, healthcare benefits, remuneration, and social security benefits under the RPwD Act and related welfare systems is expected to be significantly impacted by the decision.

On a larger scale, the ruling is indicative of the Supreme Court's ongoing trend toward pragmatic interpretation of disability laws in order to prevent limited or technical interpretations of definitions from undermining statutory benefits. The term "Acid Attack Victim" nevertheless does not currently include victims of thermal burns caused by the hurling of kerosene, gasoline, or a similar substance.

One of the most heinous crimes against young ladies is acid attack. The Justice Verma Committee's report and the 226th Law Commission's report both observed that this offense has a more gender-specific component, with a greater focus on women. Acid attack instances have been on the rise globally since the 1990s. Bangladesh has recorded the most amount of acid attack incidents, and between 1999 and 2013, the country has reported the highest rate of crimes against women. Although the idea of victimology has developed from criminology, it was introduced and spread independently to illustrate the predicament faced by victims of crime. The Code of Hammurabi, a Babylonian legal document pertaining to justice and law, is where the consideration of the victims' predicament first appeared. The justice of monarchs throughout Hindu and Muslim rule is also revealed in the ancient Indian setting. According to the UN Convention on Justice and Support of Victims of Crime and Abuse of Power, victims can be any people or individuals who have experienced physical, mental, emotional, financial, or basic rights violations. Over the past several decades, there has been an increase in acid attack incidents, which has also contributed to an increase in violent crimes against women.

It is impossible to ignore this horrible crime, which is mostly reported in Bangladesh, Pakistan, and India. Even though there have been a lot of incidents recorded in India over the past ten years, the government's efforts have changed the frequency of these cases. The inclusion of victims of acid attacks in the categories of disabilities has also led to a commendable attempt to make the victims' lives easier.

A step toward societal acceptability for the disabled has also been made possible, particularly by the financial support and reservation offered to them. In addition to amending the Indian Penal Code, the government has introduced Acts to protect the rights of victims with disabilities. All hospitals, whether public or private, that are managed by the federal government, state governments, or local organizations are required by Section 357C to offer free medical care to victims of acid attacks and to notify the police of such incidents under various sections. *"Any individual who is disfigured due to violent assaults by the throwing of acid or a similar corrosive substance"* is the definition of "acid attack victim" under the RPwD Act. Although this classification was revolutionary in that it recognized survivors of acid attacks as people with disabilities, it unintentionally left a big gap. The phrase excludes individuals who sustain similarly severe damage from violent acid swallowing since it only addresses external deformities brought on by acid thrown on a person. A possible turning point is indicated by the Supreme Court's involvement in this case. The Court has recognized the urgency and validity of the petitioner's concerns by ordering all States and Union Territories to reply to the PIL and giving the Solicitor General instructions to create a reasonable policy framework.

The emphasis on changing the criteria to include survivors of acid consumption is important, but it might not be enough. The more general problem is the requirement for an all-encompassing structure to identify and assist all victims suffering from chemical violence, irrespective of the particular mode of assault. The law needs to be adaptable enough to accommodate new types of violence and disabilities without necessitating ongoing revisions. Despite being sympathetic and forward-thinking, the Court's views fail to address the structural problems that first cause acid violence. Stronger preventative measures, such as tighter control of acid sales, public education initiatives, and combating the violence based on gender that frequently underpins acid attacks, are just as important as acknowledging victims as people with disabilities.

A significant precedent for the definition and recognition of disability in India would be established by the possible revision of the term "acid attack victim" to include victims of forcible acid intake. It would uphold the idea that the functional consequence of an ailment, rather than its appearance or particular conditions of its emergence, should be the basis for

disability designation. This idea may also have an impact on other types of disabilities, promoting a more adaptable and diverse method of disability recognition. Under the RPwD Act, recognition encompasses inclusiveness in society, dignity, and affirmation in addition to facilitating access. This strategy may have an impact on the creation of stronger victim compensation programs throughout India.

Written by Raginee Panda

Beyond Visible Scars: Shaheen Malik and the Substantive Redefinition of Disability under the RPwD Act

Think about the pain of being made to ingest acid. The highly corrosive substance tears the internal organs apart, burns out the oesophagus, and leaves the individual with life-altering physical impairments forever. The victim's ability to eat, breathe, and live without experiencing intense pain becomes compromised forever. But, until the end of last month, if such a victim turned up at the local medical board in India without any apparent scar on their face, then the government agency would essentially convey to the victim that they do not qualify to receive the 'disabled enough' certificate.

This legal paradox, where the law acknowledged physical deformity but turned a blind eye to physical trauma inside the body, is the very problem that the Supreme Court of India sought to tackle and resolve on May 4, 2026, through the historic ruling in the case of *Shaheen Malik v. Union of India*. This is not merely a correction of a definitional mistake; it is a landmark jurisprudential development that fundamentally redefines the very concept of an 'acid attack victim'.

The Background: Challenging the Invisible Gap

The PIL, *W.P. (Civil) No. 1112/2025*, was argued before the division bench consisting of CJI Surya Kant and Justice Joymalya Bagchi. The PIL, led by the activist and acid attack survivor Shaheen Malik, highlighted how the plight of victims of forced consumption had been overlooked within the realm of law until now. The interpretation of the statutory definition of "acid attack victim" was too narrow for it to encompass those who had not undergone visible mutilation through acid attacks. In the absence of any certificate of disability, the victims were denied access to all the benefits offered by various welfare schemes, rehabilitative programs, reservation in jobs, and compensation.

The Legal Issue: Definitional Under-Inclusiveness

The heart of the issue centers on the Schedule of the RPwD Act of 2016, which categorizes "acid attack victims" under "locomotor disability." This is a historically rooted concept linked to physical disfigurement and limited movements as its defining criteria. The local medical boards defined disability for cases of acid attacks based strictly on observable symptoms. Any absence of facial or limb injuries would result in the closure of the case. This resulted in extreme under-definition of disability. Respiratory damage, narrowing of the foodpipe, deep gastrointestinal damage, and psychological damage were not being legally

considered as disabilities just like the obvious ones. The narrow approach was in total opposition to the social and functional approach of the UN Convention on the Rights of Persons with Disabilities (CRPD), a convention which India is also a part of. The insistence on observable injuries meant that the state's understanding of disability remained medically oriented and anatomically restrictive.

The Court's Reasoning: Substantive Equality and Lived Reality

This part of the order's doctrinal content is an exemplar of transformative constitutionalism in practice. The Court ruled that the existing interpretation is 'under-inclusive' and breaches Article 14 of the Constitution. Different treatment of the victims of forced ingestion and those with burnt injuries, who both face serious functional impairments because of the same abhorrent act, constituted clear arbitrariness.

The Court also referred to Article 21, Right to Life and Personal Liberty. Chief Justice Surya Kant underscored that the right to dignity remains an empty shell if the state fails to recognize invisible injuries which take away people's capacity for self-determination. The essence of a disability in the RPwD Act should be seen not in appearance but in functionality.

The Remedy: The "Deemed Amendment"

As opposed to mandating the government to draw guidelines, a process that takes years, the Court ordered the Ministry of Social Justice & Empowerment (DEPwD) to issue a notice amending the definition in the RPwD Schedule within two weeks. Significantly, the Court ruled that without this notice being issued, its order itself will serve as an amendment.

This point is vital for advocates working on the ground. While the procedure could be subject to criticism for being an example of judicial legislation, from the standpoint of human rights, it is necessary to overcome executive lethargy. The advocates appearing before medical boards at the district level to get certification of internal injury can now cite the Shaheen Malik judgment to make this right a reality.

The Emerging 2026 Judicial Triad

Shaheen Malik cannot be discussed in isolation either. This is very clearly what the Supreme Court is communicating this year: it is working towards undoing administrative rigidity in disability certification and reasonable accommodation. In three important decisions of 2026, the court has created a trilogy.

In Prabhu Kumar v. State of Himachal Pradesh, the court has invalidated any upper limit on disability percentage that is used as an arbitrary criterion.

In Sudhanshu Kardam v. Comptroller and Auditor General of India, the court mandated supernumerary posts for persons with disabilities, saying that administrative convenience cannot be an excuse not to give rights of employment.

And finally, in Shaheen Malik v. Union of India (May), the visual disability myth has been debunked. All these cases together have a definite message to the executive: the RPwD Act is good law, and any confusion must be resolved in favor of enlarging the rights of PwDs.

The Road Ahead

Regardless of the excellence of the ruling, the proof of the pudding will be in the eating. Local medical boards have always been notorious for their aversion to quick juridical changes, and there is also the clear absence of any standardized evaluation instruments for measuring “internal functional impairment” on the basis of the percentage system followed by the RPwD Act. The Ministry of Social Justice & Empowerment along with the Directorate General of Health Services need to issue urgent guidelines for medical examination of internal chemical burns. Otherwise, the boards will end up falling back on arbitrary judgments.

Conclusion

The Shaheen Malik v. Union of India case holds much deeper meaning beyond being just a legal triumph; it is the validation of suffering which has gone unnoticed till now. For the victims of forcible acid consumption, it brings hope that the pain that they have endured as well as face on a daily basis will at last be witnessed by the eyes of the law even when it goes unnoticed by the naked eye. In terms of the wider context of disability law, this is a sign of how ready our courts are to fill the gap left behind by the legislature and move the legal system of India away from the old-fashioned medical approach and towards the functional rights-based one.

Written by Krishna Sachdeva

The Silent Crisis Inside India's Rehabilitation Centres

On the 16th of June, 2026, the Hon'ble Supreme Court of India issued notice on a Public Interest Litigation (PIL) for the regulation and supervision of rehabilitation homes, child development homes, and mental health institutions serving the disabled children. A bench comprising Chief Justice Surya Kant and Justice V. Mohana noted that the matter involves some important issues which need consideration 'on priority'. This is an important development because it gives expression to an existing crisis that has been going on for too long in silence.

The petition presents an alarming situation. It states that the protection offered by legislation in the form of Rights of Persons with Disabilities (RPwD) Act 2016, Rehabilitation Council of India (RCI) Act 1992, and the Mental Healthcare Act (MHCA) 2017 is constantly violated within the rehabilitation centres for the children with disabilities. The lack of skilled personnel deprives the children of necessary treatment. Insufficient supervision makes them vulnerable to hazardous situations and directly undermines the best interests, developmental rights, and dignity of these children.

The petition brought to light some specific complaints raised by parents from different parts of the country regarding the "false promises" made by some of the mental health care facilities for curing patients suffering from autism spectrum disorder and Attention Deficit Hyperactivity Disorder (ADHD) while charging huge amounts without any scientific rationale behind their claims.

The petition also raises a pointed institutional failure. The Mental Healthcare Act, 2017, requires States to prescribe minimum quality standards for mental health establishments catering to children with mental illnesses. Only a handful of States and Union Territories have done so. The petitioners have accordingly sought directions to State governments to enforce registration and inspection requirements, prescribe minimum quality standards for mental health services, and establish time-bound mechanisms for the registration of mental health professionals.

The PIL's allegations do not emerge from a legal vacuum. India has, over the past three decades, built a reasonably comprehensive statutory architecture for the rights of children with disabilities.

The cornerstone of the current framework is the Rights of Persons with Disabilities Act, 2016. The RPwD Act expanded the recognised categories of disability from seven to twenty-one, and defined "inclusive education" under Section 2(m) as a system wherein students with and without disability learn together, with teaching adapted to meet diverse learning needs. Section 31 of the Act mandates every child with a benchmark disability between the ages of six to eighteen shall have the right to free education. Section 16 directs all government-supported educational institutions to provide inclusive education without discrimination.

The Rehabilitation Council of India Act, 1992, is also relevant to the concerns raised in the PIL. The RCI Act was enacted specifically to regulate the training of rehabilitation professionals and to ensure that children with special needs are taught and supported by trained personnel. The very existence of this statute acknowledges that the qualifications of those working with disabled children cannot be left unregulated.

There is also an inconsistency in the law worth noting. The RCI Act, 1992, still uses the term "handicapped" under Section 2(c) to describe disability, a definition tethered to the now-repealed Persons with Disabilities Act, 1995. This means the RCI Act has not been updated to align with the modern, rights-based framework of the RPwD Act, 2016 a gap that creates ambiguity in the very law meant to govern professional standards in rehabilitation.

Article 21 of the Constitution of India, guarantees the right to life and personal dignity and Article 21A guarantees the right to education. In the present case, The PIL contends that the absence of timely therapeutic interventions at a crucial developmental stage has profound long-term consequences. The constitutional guarantee of dignity under Article 21 requires therapeutic assessments and rehabilitation interventions to be individualised, evidence-based and free from stereotypical or unscientific assumptions.

The United Nations Convention on the Rights of Persons with Disabilities (UNCRPD), adopted in 2006 and ratified by India in 2007, is the primary international instrument. Article 24 explicitly articulates the right to education for persons with disabilities on the basis of equal opportunity, and calls for an inclusive model of education. Article 7 of the UNCRPD specifically addresses children with disabilities, obligating States to ensure they enjoy all human rights and fundamental freedoms on an equal basis with other children, and to guarantee their right to freely express their views.

The UN Convention on the Rights of the Child, 1989, is equally relevant. Article 23 recognises the right of children with disabilities to a full and decent life, and encourages the provision of special care and assistance. It also promotes international cooperation in preventive healthcare, medical, psychological, and functional treatment for disabled children. The Committee on the Rights of the Child's General Comment No. 9, which elaborates on the CRC's application to children with disabilities, emphasises non-discrimination and the prohibition on exclusion from the general education system.

What the PIL describes is a long standing problem. The progress in the rehabilitation of children with disabilities is limited by a lack of specially trained educators and financial resources, and that the amenities designed to train teachers for inclusive education are insufficient. The bulk of school and rehabilitation centre employees, including teachers, staff, and support members, are not properly skilled to plan and implement inclusive or

therapeutic programmes, and governments have consistently failed to train them adequately. Certain implementation challenges however need to be addressed. These include low awareness among parents and communities about existing laws; insufficient infrastructure; bureaucratic delays in obtaining disability certificates; fragmented coordination among government departments; and societal stigma that persists despite legal protections. In rehabilitation centres these failures compound without meaningful accountability.

The Supreme Court's notice is a beginning, not an end. If the PIL proceeds meaningfully, it could produce enforceable directions that close some of the most dangerous gaps in the regulatory oversight of rehabilitation centres.

The current scenario needs an action based strategy. First, the RCI Act, 1992, must be amended to align its definition of disability with the RPwD Act, 2016, and its regulatory powers must be strengthened to actually enforce professional qualification standards in rehabilitation centres. Second, all States must be required whether by court direction or executive action to frame minimum quality standards under the MHCA without further delay. Third, a transparent grievance mechanism must be created so that parents can report abusive or fraudulent practices by rehabilitation centres without fear of retaliation or institutional indifference. Fourth, teacher and therapist training programmes must be expanded and adequately funded, so that the chronic shortage of qualified professionals can begin to be addressed.

The children at the centre of this PIL are among the most vulnerable in the country. For them rehabilitation is the foundation to a life of dignity. The system now needs to fulfill the promises which the law has already promised them!

Written by Poorna Mishra

CENTRE FOR DISABILITY LAW & ADVOCACY

Bi-Annual
Newsletter

THE TEAM

D i r e c t o r

DR. TANWI SHAMS

C o - D i r e c t o r

MS. ATHENA SOLOMON K

E d i t o r i a l T e a m

Krishna Sachdeva (Editor-in-Chief)

Anshika Pal (Design)

Sarah Anand Raj

Aarohee Purohit

Srishti Prasad

Vanshaj Mediratta

Stuti Jha

Pratichhe Kujur

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Linkedin: [Centre for Disability Law and Advocacy](#)

Instagram: [nluo.cdla](#)

Email: cdla@nluo.ac.in
