State of Unique Disability
Identity (UDID)
Implementation in
Karnataka

Insights from a Survey Study









Preface

The Unique Disability Identity (UDID), an identity card for persons with disabilities in India, allows them to avail of services provided by the Center. The UDID project creates a central-level database of persons with disabilities in the country, allowing the central government to streamline benefits and increase the efficiency of service delivery to beneficiaries.

While the UDID project is well-intended, the process of obtaining the card is tedious. The current study was inspired by early survey results of Nayi Disha, which highlighted the challenges faced by parents/caregivers in obtaining the UDID in Telangana. Acknowledging the hardships, Pacta and Nayi Disha conducted a large-scale survey across five states in 2023: Karnataka, Madhya Pradesh, Maharashtra, Telangana, and Uttar Pradesh to obtain a deeper understanding of the challenges to ease the process of obtaining a UDID through informing policy changes.

The survey study indicates significant variations in the implementation of the UDID across states.

This report highlights the findings from the State of Karnataka.

Message

The UDID (Unique Disability ID) was introduced as a national database to standardize and streamline the registration of individuals with disabilities, ensuring access to government services and benefits. However, its implementation has varied across states, creating challenges for persons with disabilities and their families in availing the certificate. This inconsistency limits access to government schemes and benefits linked to the UDID, and the national database remains incomplete when individuals are unable to apply.

In Telangana, for instance, the requirement of a Saderam card for UDID registration complicates the process, and the lack of standardized medical assessments further restricts access to services for families.

We are grateful to Pacta for conducting research in partnership with Nayi Disha to highlight these issues. This research sheds light on the challenges faced by persons with disabilities and their families in obtaining the UDID certificate and emphasizes the need for a uniform, simplified process to ensure equitable access for all.

- *Prachi Deo*Founder-Executive Director,
Nayi Disha

Acknowledgments

This report carries the effort of several people and friends of Pacta. This report is compiled by Krithika Sambasivan, under the guidance of Nivedita Krishna (Founder-Director, Pacta) with contributions of the Pacta research team comprising - Riddhi Lakhiani and Gokul Nath (Data Analysis), Greeshma (Qualitative Research), Sudeshna Bose and Susan Job (Report Design and Content Editing), interns and volunteers.

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Background

The UDID (Unique Disability Identity) project, introduced by the Department of Empowerment of Persons with Disabilities in 2016, Ministry of Social Justice and Empowerment, aims to build a national database for persons with disabilities in India.

The UDID enables easier access to government benefits and services for persons with disabilities across the country.

Benefits of the UDID

Loan at concessional rates from the National Divyangjan Finance and Development Corporation (NDFDC)

Pree special educational courses offered by the Rehabilitation Council of India (RCI)

Pree assistive devices under the Assistance to Disabled Persons for Purchase/Fitting of Aids/Appliances (ADIP) Scheme

Free special education, vocational training courses, and rehabilitation services provided by National Institutes and Composite Regional Centres

National Overseas Scholarship Scheme for Persons with Disabilities

Free skill training from empanelled training institutions

Pree rehabilitation education under the Deendayal Disabled Rehabilitation (DDRS) Scheme

GST concession by the Ministry of Industries for the purchase of vehicles for locomotor disabilities

Disability Pension, transport facilities, and other benefits offered by the State/Union Territories based on their respective arrangements

Benefits of the UDID: The reality?

Insufficient Benefits for Persons with Disabilities



The government has **not provided sufficient benefits** to motivate us to obtain the disability
card. While there are concessions like loans, these **primarily benefit** the **middle and upper-middle classes**. For lower-income families, the process is
cumbersome, leading us to question whether we
should pursue it or accept our current situation.

- Parent of a child with a disability

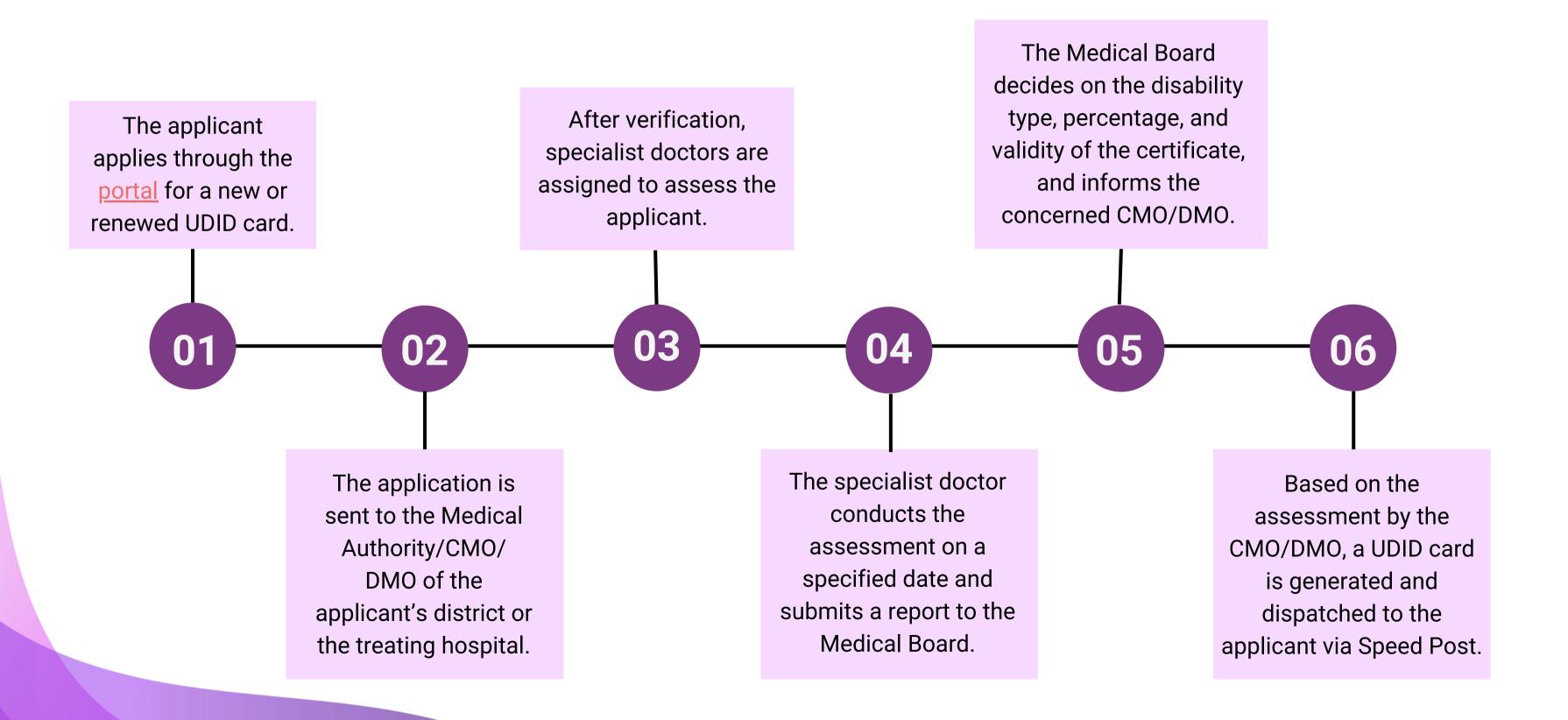
Benefits of the UDID: The reality?

Benefits should accomodate all irrespective of the severity

The government should clarify that a UDID (Unique Disability ID) will not be issued for disabilities below the 40% threshold. However, this information is not consistently communicated. Additionally, various schemes require a disability percentage of 40% or higher for eligibility. I have not seen a UDID issued for those below this threshold. It is essential that individuals with a 40% disability can access benefits, and the criteria for these schemes should be reconsidered to accommodate those with lower percentages.

- A social worker

Card Issuance Process



Types of UDID Cards Issued

White Card: For less than 40% disability Yellow Card: For 40% to 79% disability Blue Card: For 80% and above

Amendments to the UDID Process

Amendments likely to increase the difficulty in obtaining the card

The Union Government has notified the Rights of Persons with Disabilities (RPwD) (Amendment) Rules, 2024 under the RPWD Act, 2016, introducing changes to the process of applying for and obtaining disability certificates and UDID Cards.

The amended rules require all applications to be submitted through the UDID portal and the timeframe for issuing certificates and UDID cards has been extended from one month to three months. Applications may now be deemed void if the relevant medical authority fails to decide within two years.

Challenges

Multiple hurdles faced by the beneficiaries in obtaining the card

The various challenges in obtaining UDID cards include a lack of awareness, technical issues, and hurdles in the medical assessment process. In some cases, cards are officially dispatched but not delivered to the recipients.

Unlike the state disability certificate, the UDID card does not provide direct benefits like pensions (unless linked to the State benefits), which may lead to limited awareness and motivation to obtain it. With only 17 central schemes mandating its use, the incentive to apply remains low.

I've noticed a trend: parents from upper-middle-class
backgrounds are often less motivated to pursue UDID cards.
The Karnataka Government offers limited benefits for UDID
holders, primarily benefiting those with a disability percentage
above 45% and an intellectual disability percentage above 75%,
along with an income cap of 3 lakhs per year. For families in
higher income brackets, the benefits—around 1,800 to 2,000
per month—are not significant enough to warrant the effort of
obtaining a UDID card.

- Parent of a child with a disability



The online application process, predominantly in English, further restricts accessibility for many.

Research Objectives

To understand the state of implementation of the UDID in Karnataka through a survey of persons with disabilities and their families.

To examine some of the challenges faced with regard to the implementation of the project from the lens of the beneficiaries.

Number of Beneficiaries

Discrepant numbers do not reveal actual state of implementation



- India's total disability population (2011 Census):
 - 2.68 Crores
- Population of people with disabilities in Karnataka:
 - 13.24 Lakh
- % of population of persons with disabilities in Karnataka to India's Total:
 4.94%



- Total number of UDID
 Cards issued in India (As of Dec 23, 2024): 1.53 Crores
- Number of UDID Cards issued in Karnataka:
 16,63,546

The lack of updated population-level data on persons with disabilities makes it hard to assess the state of implementation in Karnataka.

Methodology for Current Study

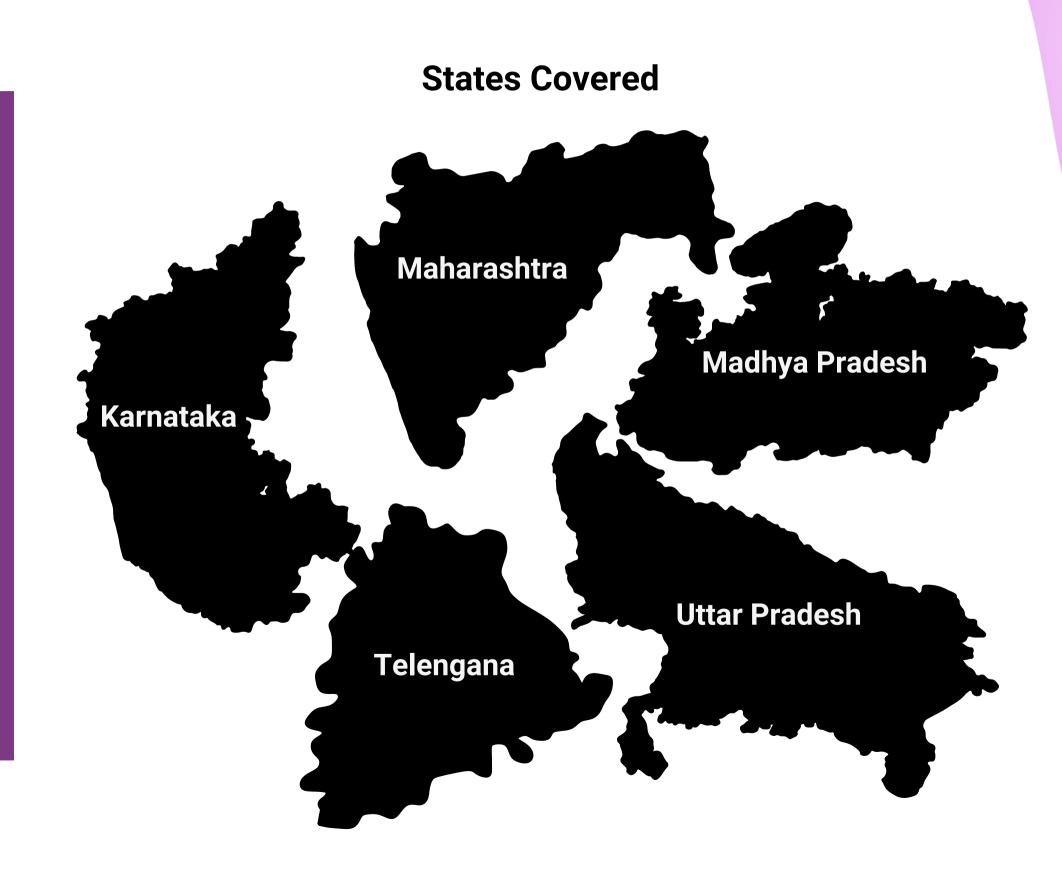
Participants:

- Persons with Disabilities
- Parents/Care givers

Survey Medium: Google Forms

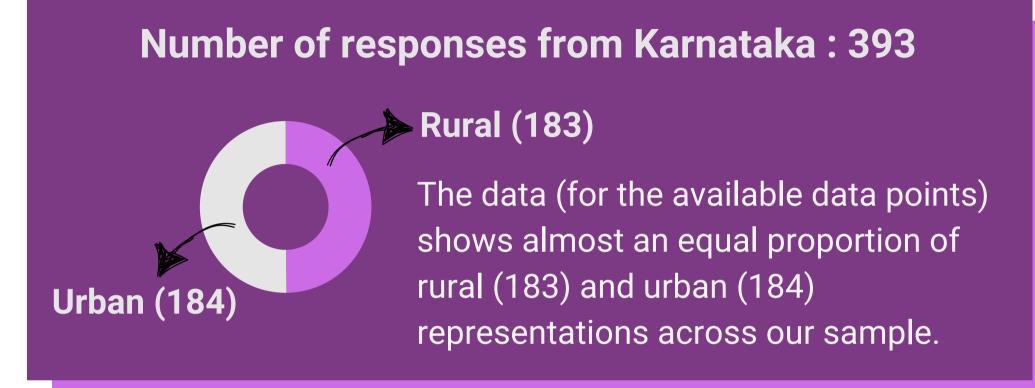
- Translated into four regional languages
- **Distribution Method:** Circulated through parent groups and NGO networks
- A representative from local NGOs
 assisted participants with disabilities or
 no digital access.
- Anonymous participation

Data Analysis: Cleaning and analysis done in Python

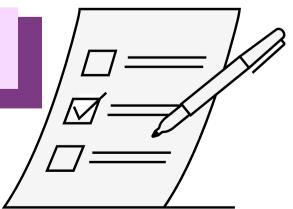


State-Specific Methodology: Karnataka





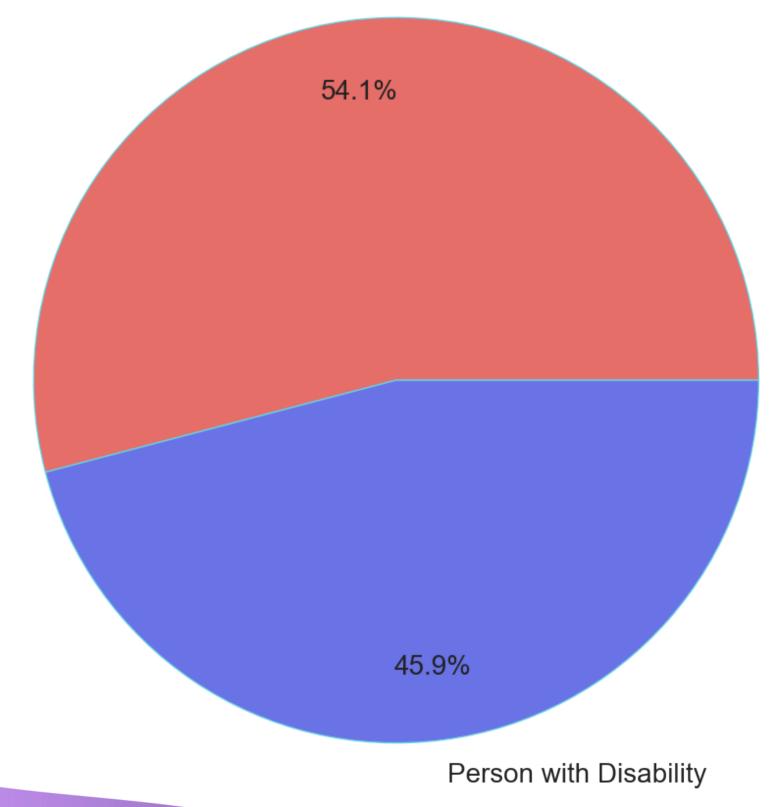
The Google form was available in Kannada.



Respondent Demographics

Survey Respondent Profile

Parent/Caregiver to a Person with Disability



There was almost equal representation of parents/caregivers and persons with disabilities (self-reported) who responded to the survey.

Age of Respondents

• Parents/Caregivers

```
17 years 42 years 76 years (Youngest) (Average) (Oldest)
```

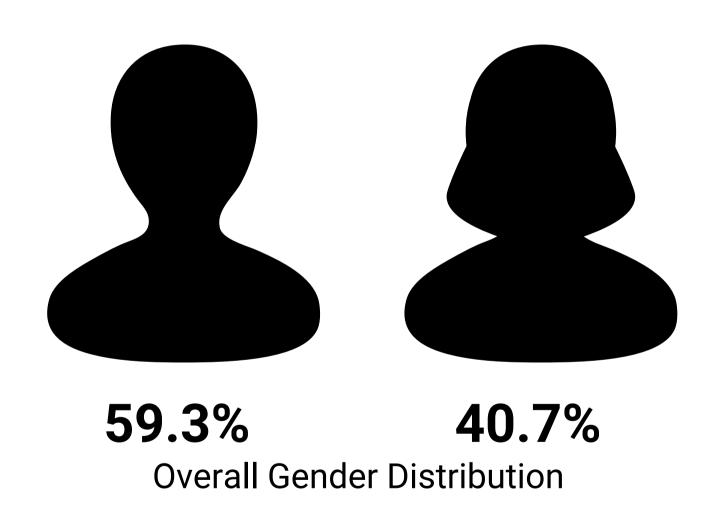
Persons with disabilities (reported by parents/caregivers)

```
2 years 15 years 65 years (Youngest) (Average) (Oldest)
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Persons with disabilities (self-reported)

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22 years 37 years 95 years (Youngest) (Average) (Oldest)
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Gender Distribution of Persons with Disabilities

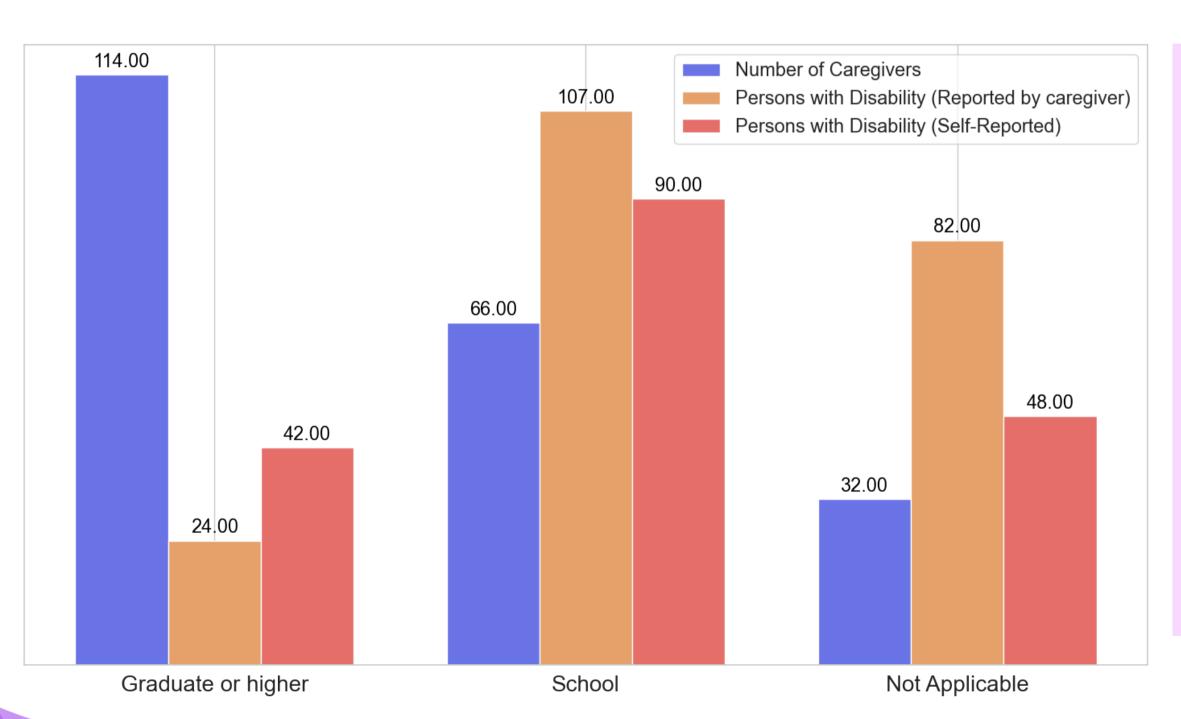


Higher distribution of males in the sample

In the group reported by parents/caregivers, there were 61.6% male compared to 38.4% female persons with disabilities.

In the self-reported persons with disabilities group, there were 56.67% male compared to 43.33% female.

Educational Levels of Respondents



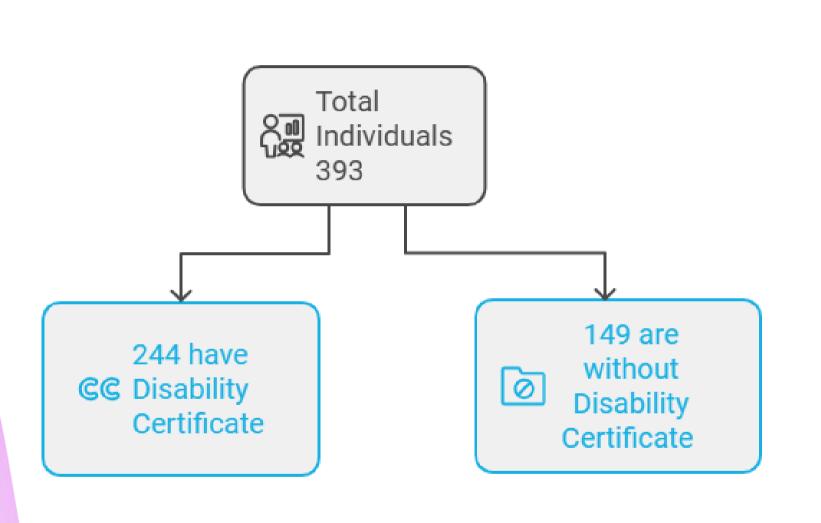
More than half of the parents had a graduate or higher level of education
Out of the 212 parents/caregivers
surveyed, 53% have a graduate or higher level of education.

A majority of persons with disabilities had a school-level education

Among the 180 self-reported persons with disabilities, 23% are graduates or higher.

State Disability Certificate Status

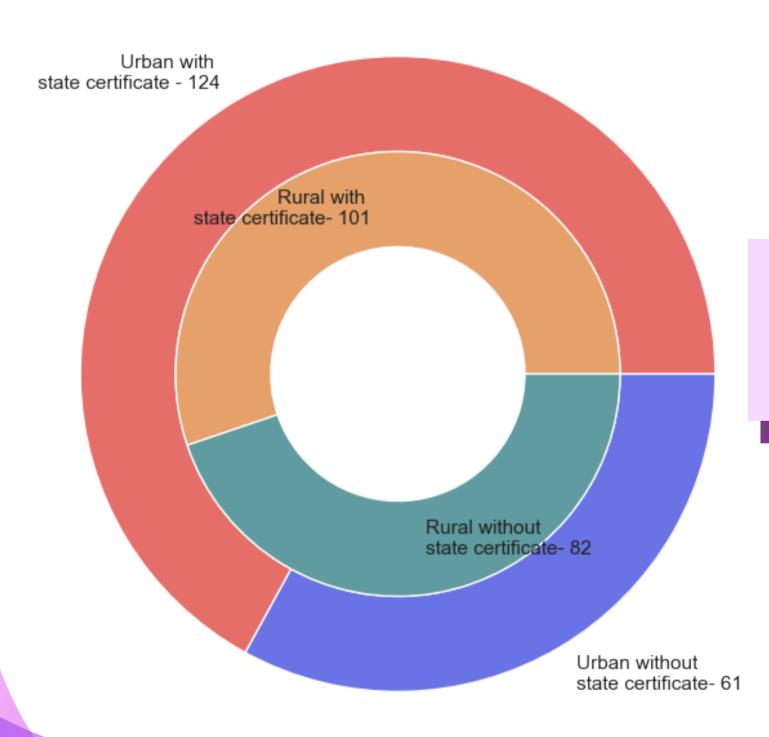
62% of the sample had State-Issued Disability Certificates; 90.5% had Karnataka state disability certificates



| State | Certificate_count |
|-----------------------------------|-------------------|
| Karnataka | 221 |
| Kerala | 3 |
| Maharashtra | 1 |
| Rajasthan | 1 |
| Tamil Nadu | 6 |
| Telangana | 1 |
| The Government of NCT of Delhi | 1 |
| (blank) | 10 |
| Total | 244 |

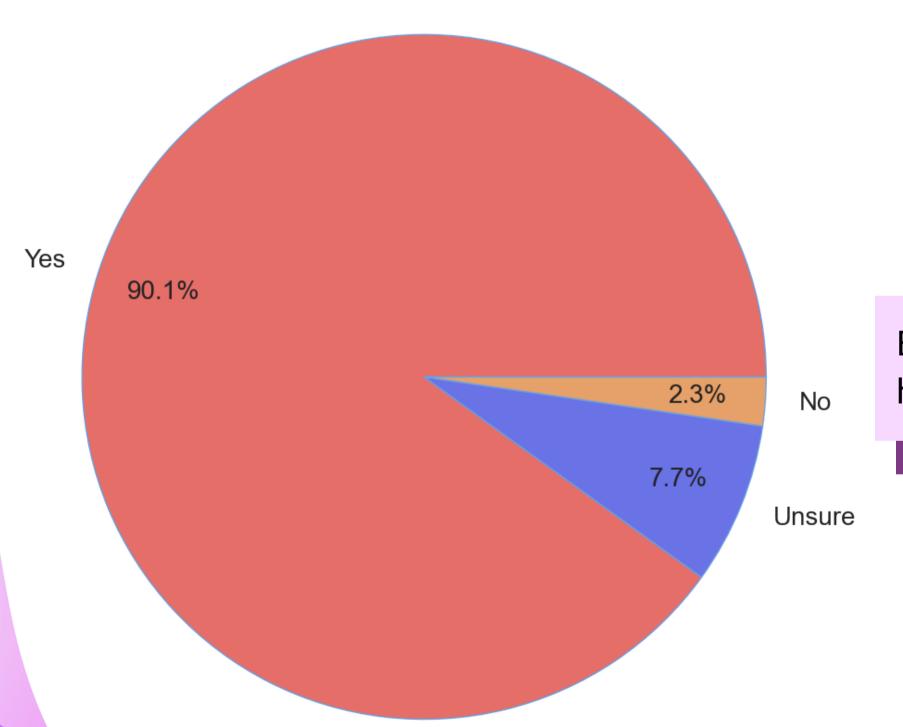
The table shows the States that have issued certificates, indicating that some members have migrated to Karnataka.

More number of persons with disabilities have State-Issued Disability Certificates in urban areas compared to rural.



Among the respondents, 55% of rural individuals and 67% of urban individuals possess state-issued disability certificates.

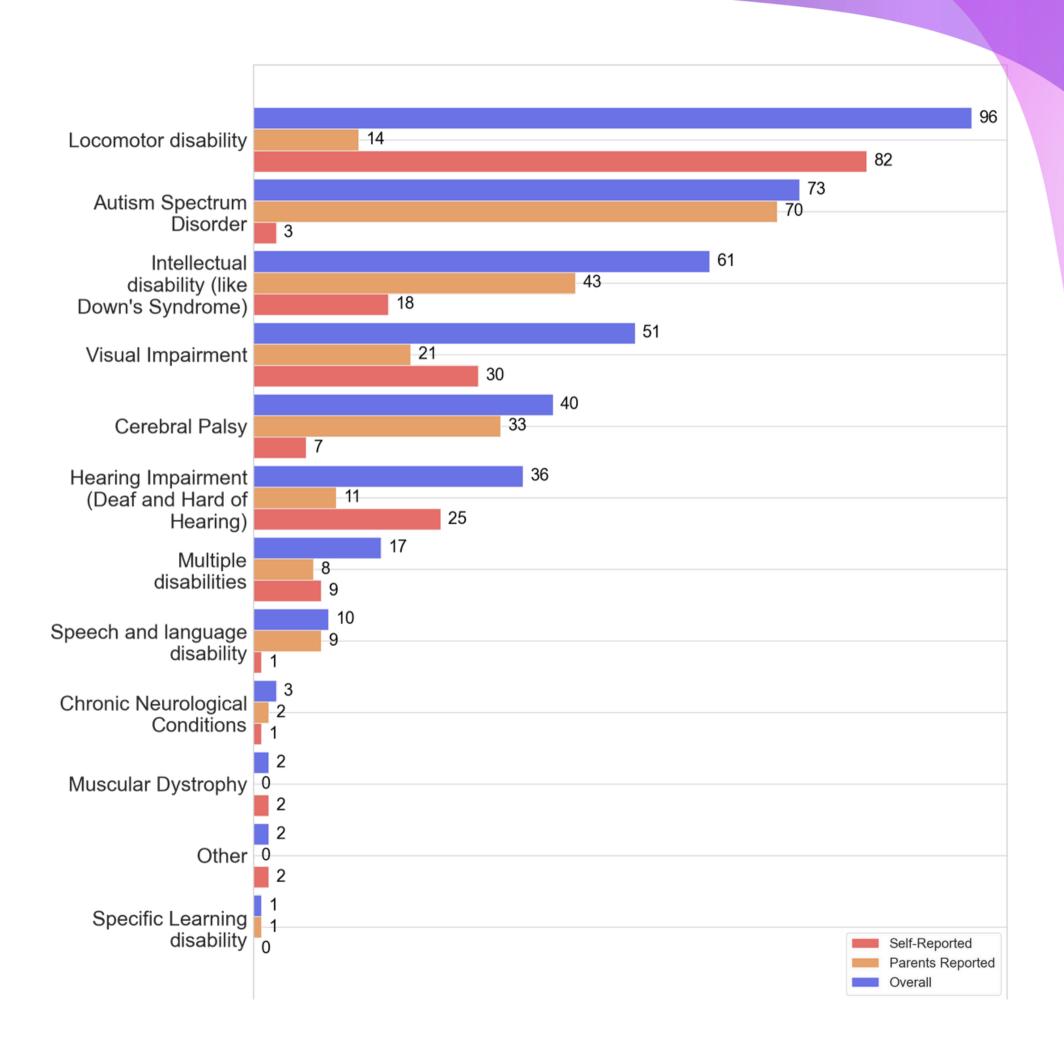
Diagnosis of Permanent Disability in the Sample



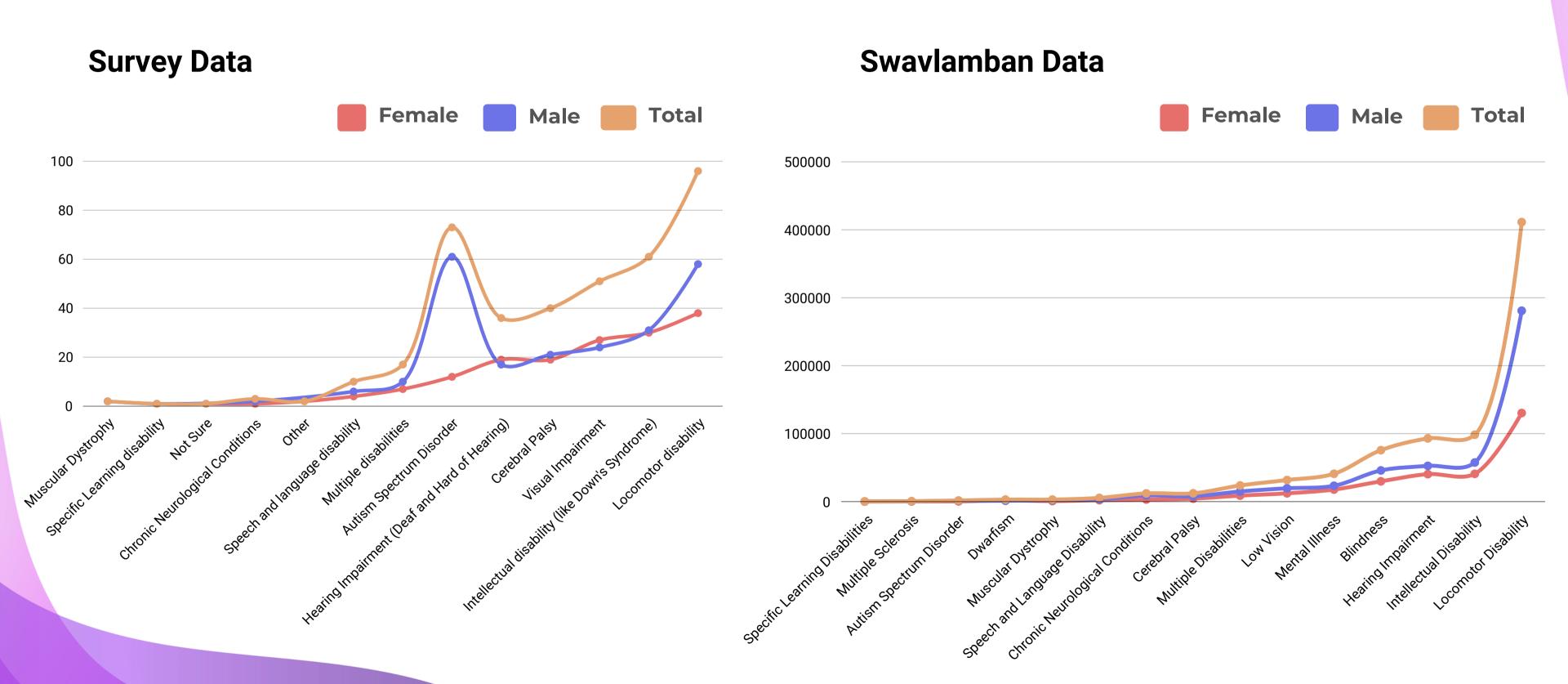
Based on the disability certificate, most respondents reported having been diagnosed with a permanent disability.

Disability Types in the Sample

- Responses from parents/caregivers showed representation of persons with Autism Spectrum Disorder, Intellectual Disability, and Visual Impairment.
- Self-reported responses were from individuals with Locomotor and Hearing Impairment.



Similar trends in National reports and Survey data on UDID issuance based on disability type

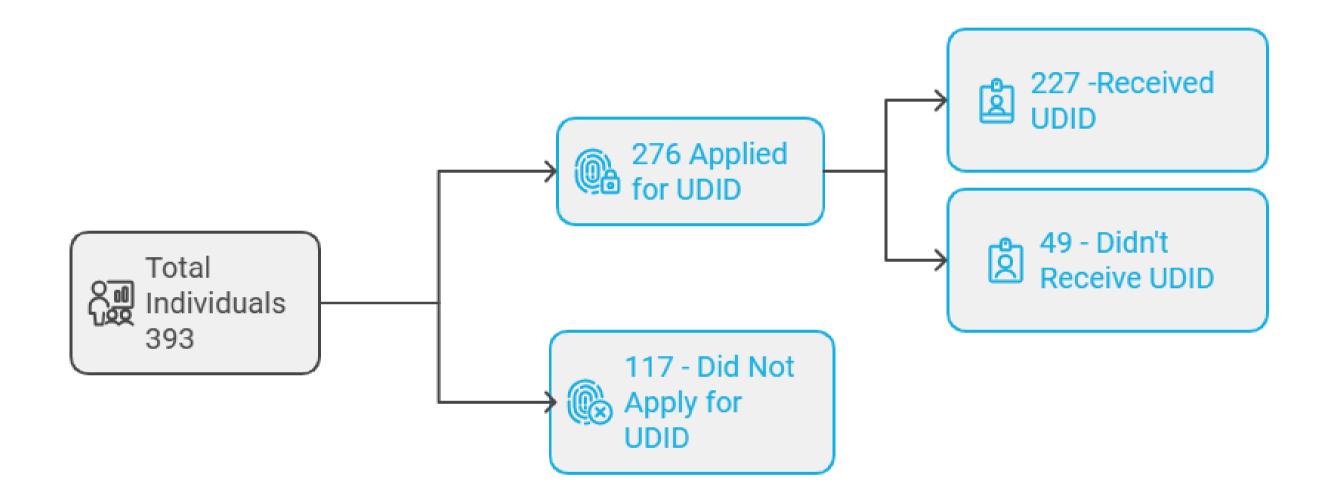


Analysis of the DataTrend

- A comparison between the government UDID data and Nayi Disha data shows a similar trend in the types of disabilities recorded on ID cards, except for Autism Spectrum Disorder (ASD).
- Our survey data reveals a notably higher proportion of ASD cases, particularly in total numbers and among males, compared to the data available on the UDID website.

State of UDID Implementation in Karnataka

UDID Application Status



70% of the sample applied for the UDID card and 82% of that sample received their card at the time of the survey

Reasons for not Applying

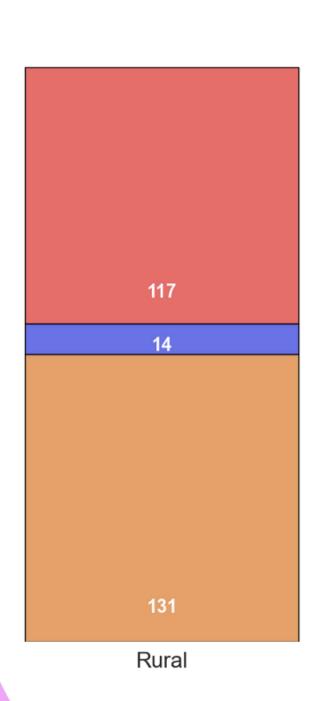
Overall Reasons

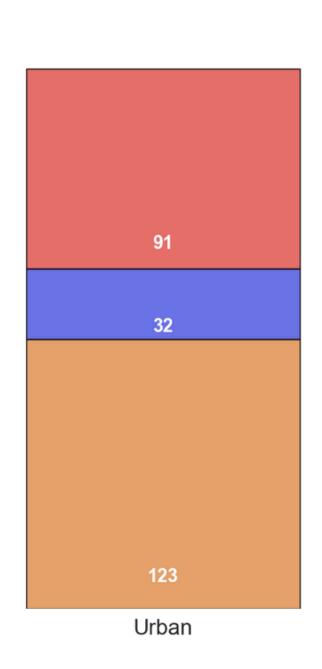
- 1) Inadequate knowledge of UDID benefits
- 2) Technical issues in accessing the website
- 3) Difficulty gathering documents
- 4) Unavailability of medical officers
- 5) Lack of knowledge about the application

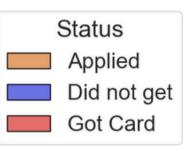
Rural Vs. Urban

- Karnataka Rural (52 total issues out of 183 responses)
 - Inadequate UDID knowledge remains a primary issue (33 cases)
 - Unavailability of medical authority (8 cases)
 - Technical difficulties faced in the webpage (3 cases)
- Karnataka Urban (58 total issues out of 184 responses)
 - Inadequate UDID knowledge (34 cases)
 - Difficulty in gathering required documents (14 cases)
 - Technical difficulties faced on the webpage (6 cases)
 - Medical authority availability issues (4 cases)

UDID Application Status by Rural-Urban Divide



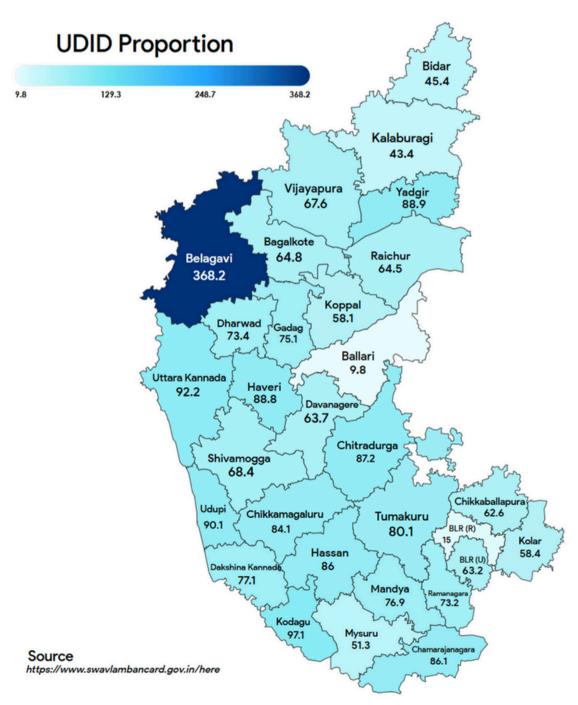




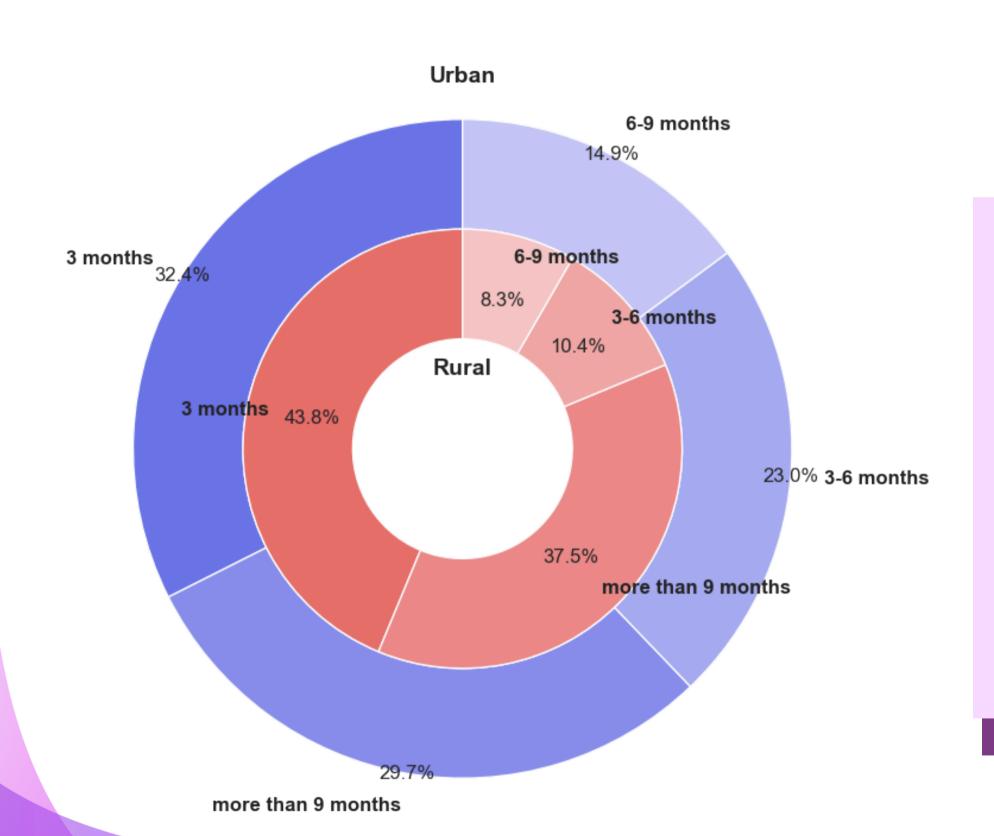
More number of individuals in rural areas applied for and received the UDID compared to those in urban areas

- In rural areas, 117 out of 131 respondents (89%) received the UDID card.
- In urban areas, 123 respondents applied, out of which 91 received the card (74%).

Distribution of UDID cards in Karnataka - proportion of UDID issued to the projected population of persons with disabilities per district (expressed as a percentage)



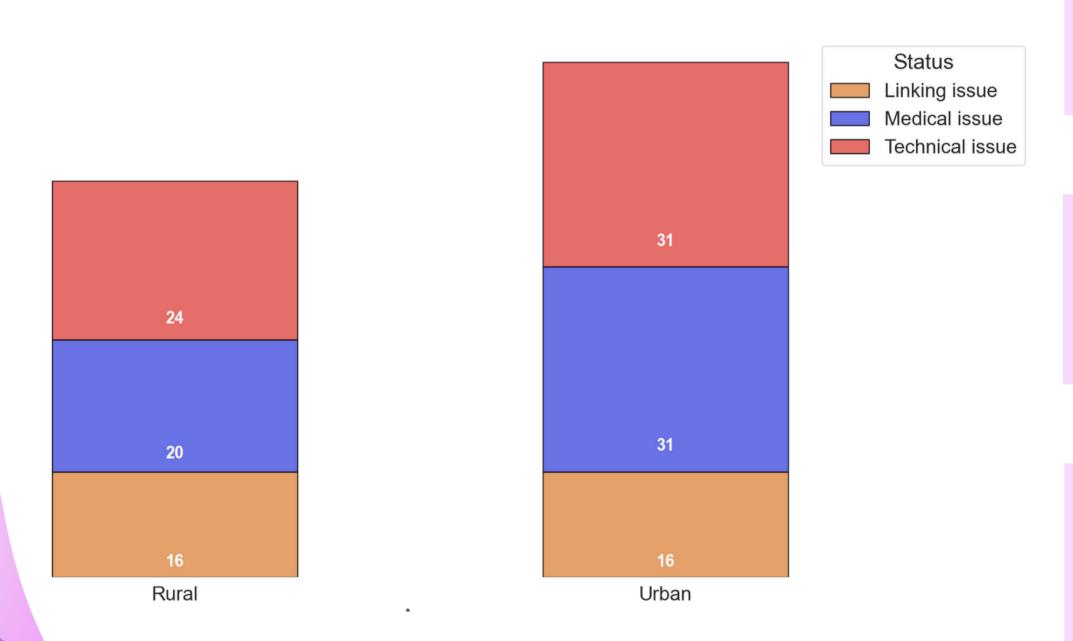
Average time in Receiving the UDID in Karnataka



- The largest proportion of cards is received within 3 months (43.8%) in rural areas.
 Whereas, only (32.4%) urban applicants receive their cards within this time, showing slower processing in urban areas compared to rural areas.
- 37.5% of rural applicants face significant delays of over 9 months in getting the card while in urban areas 29.7% wait for over 9 months.

Challenges faced in the UDID Process

Challenges in applying for the UDID



 Urban areas experience a greater number of issues overall compared to rural areas.

 The majority of the issues are technical (24 cases), followed by medical issues (20 cases), with linking issues being the lowest (16 cases) in rural areas.

 Persons in urban areas faced medical and technical (31 cases) issues in equal measure followed by a lesser number of cases of certificate-linking issues.

Voices from the Ground

Inefficient, non-userfriendly online systems

One major issue with the online application is its length and complexity. If there is an error, such as a misspelled name, the system does not provide clear feedback. You have to manually check the application to identify any mistakes before you can proceed to the next page.

- Parent of a child with disability

Long queues and wait times for assessments

When I visited Victoria Hospital, I found the experience chaotic. I had to navigate various rooms for signatures and assessments, which resulted in **long wait times**. My daughter became frustrated after three hours of waiting, and I realized this was not the right approach. There is a designated day for assessments with a psychiatrist or orthopedic specialist. We wait in line for our turns and if any issues arise, we may need to return another day.

- Parent of a child with disability

Hospitals are ill-equipped to handle applications and assessments

The first barrier is the complexity of the application itself. The second is the lack of information about which hospitals are processing UDID applications. For instance, in Jayanagar, there are only 12-13 hospitals that handle UDID applications, but there is no communication from these hospitals to the parents. The third barrier is that parents **must** bring their children to the hospital, and obtaining an OPD slip can be chaotic. There are often 50-60 people in line, and even if you explain that you have a disabled child, you are still required to wait in line like everyone else. The level of understanding among hospital staff can vary greatly. The fourth issue is the lack of clear signage or information about the UDID process in hospitals. When I visited one hospital, the receptionist couldn't provide any information and directed me to the RMO or superintendent, leading to long waits without clear guidance. Fifth, many doctors seem indifferent to the needs of children with disabilities. They often rush through appointments, and I have witnessed instances where they openly ask for bribes to expedite the process. This is particularly distressing for parents who may struggle to afford basic necessities. The sixth barrier is that not all hospitals are equipped to assess every type of disability. For example, if a child needs a visual assessment, they may have to go to a different hospital, which complicates the process.

- Parent of a child with a disability

Limitations of the Study

- The study was done using Google Forms; hence, there was little representation from different regions of Telangana and socio-economic groups. This could be due to internet access issues and the methodology adopted for the survey tool's distribution (based on a convenience sampling method).
- The forms were distributed through NGO networks and parent groups, hence the sample may reflect only certain disability groups. Therefore, the results cannot be generalized to the population.
- The success rates of receiving the card among the group that applied could be attributed to the support of the NGOs and local CSOs.

Concluding Remarks

The implementation of UDID in Karnataka shows positive trends.

- Parents with higher levels of education and persons with disabilities who have higher literacy show lesser difficulty in navigating the UDID process.
- For the self-reported group, the representation of hearing impairment and locomotor disability in this survey is due to a lack of difficulty in navigating digital technology compared to other disability groups.
- The involvement of NGOs and CSOs can also be one of the reasons for higher UDID cards in the state.

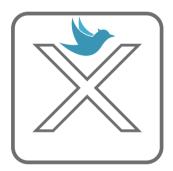
In a few cases where there were issues in obtaining the card, medical issues, and technical issues dominated the narrative. From our experience of understanding the landscape of UDID in the country, the challenges faced also tend to be individualized and unique. However, there are broader systemic issues to be addressed to ease the process for a majority of beneficiaries.

Recommendations

- Efforts to increase awareness of the benefits of UDID must be made to ensure that the purpose of the project is fulfilled and rights of persons with disabilities are effectively granted.
- Clear guidelines to hospitals or medical professionals are to be provided to ease the medical certification process within hospitals.
- Streamline communications with those seeking the certification, particularly with medical assessments. Better systems such as Chatbots or helplines must be opened to enable access to information regarding the UDID.
- Formal recognition of the role of institutions such as NGOs and CSOs to ease the process of obtaining the UDID.
- Encourage and fund camps for UDID registrations, as well as for medical camps in both rural and urban settings.

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