

Awareness and Utilization of Government's Educational Schemes Amongst People with Locomotor Disabilities

¹Mansi S. Attarde, ²Shivani N. Chutke

¹Intern at Sancheti Institute for Orthopaedics and Rehabilitation College of Physiotherapy, Pune, ²Assistant Professor at Sancheti Institute for Orthopaedics and Rehabilitation College of Physiotherapy, Pune

How to cite this article: Mansi S. Attarde, Shivani N. Chutke. Awareness and Utilization of Government's Educational Schemes Amongst People with Locomotor Disabilities. Indian Journal of Physiotherapy and Occupational Therapy / Vol 20 No. 2, April - June 2026

Abstract

Background: Education plays an essential role in promoting independence, confidence, and social participation among people with locomotor disabilities. The Government of India has introduced several educational schemes to support this group and ensure equal learning opportunities. However, awareness and use of these schemes may differ based on individual, social, or environmental factors. Assessing how far these initiatives are known and used by people with locomotor disabilities is important for identifying practical gaps and improving inclusion in education.

Methods: A descriptive cross-sectional study was carried out among fifty-five people with locomotor disabilities aged 18 to 30 years. Participants were selected through purposive sampling from hospitals, outpatient departments, and non-governmental organizations. Data was collected using a validated self-structured questionnaire focusing on awareness, utilization, and perceived barriers related to government educational schemes. Descriptive statistics were used for analysis.

Conclusion: Among the participants, 29.09% were aware of government educational schemes, while 70.91% were unaware, and out of those who were aware only 6.25% had ever utilized any scheme. Awareness was relatively higher among graduates and those with paraplegia or cerebral palsy. The main barriers included lack of clear information, difficulty understanding eligibility, and complicated application processes. Strengthening awareness activities, simplifying procedures, and involving rehabilitation professionals in guidance can improve access and participation, helping people with locomotor disabilities benefit fully from available educational opportunities.

Keywords: Locomotor disability, Government educational schemes, Awareness, Utilization, Inclusive education, Rehabilitation

Introduction

Disability is a global public health concern, affecting over 1.3 billion people, or approximately

16% of the world's population, according to the World Health Organization (2001).^[1] Among various forms, locomotor disabilities particularly affect an individual's ability to move independently

Corresponding Author: Mansi Attarde, Sancheti Institute for Orthopedics and Rehabilitation College of Physiotherapy, 11/12, Thube Park, Pune- 411005

E-mail: mansiattarde4547@gmail.com

Submission: Oct 18, 2025

Revision: December 10, 2025

Published date: April 3, 2026

and participate fully in everyday activities. These limitations often influence access to education, employment, and social engagement, thereby affecting overall quality of life. In developing countries, insufficient infrastructural support, limited accessibility, and socio-environmental challenges further restrict opportunities for people with disabilities to achieve their full potential.^{[2][3]}

In India, the 2011 Census reported that 2.21% of the population lives with disabilities, with locomotor disability being the most prevalent category.^[1] The Government of India has introduced several educational schemes and inclusive policies under initiatives like the Rights of Persons with Disabilities Act (2016) and Samagra Shiksha Abhiyan to promote equal learning opportunities. However, the actual reach and utilization of these schemes remain uncertain, particularly among people with locomotor disabilities.^[4-8]

Physiotherapy, being a profession that emphasizes a holistic approach to health. It plays a vital role beyond rehabilitation—by promoting functional independence, community participation, and educational inclusion.^[9] Understanding the awareness and utilization of such schemes is therefore essential to guide physiotherapists and policymakers in developing targeted awareness and referral strategies. This study aims to assess the awareness and utilization of government educational schemes among people with locomotor disabilities.

Material and Methods

Study Design and Setting

A cross-sectional descriptive study was conducted to assess the awareness and utilization of government educational schemes amongst people with locomotor disabilities. The study was carried out at Sancheti Institute for Orthopedics & Rehabilitation College of Physiotherapy, Pune, Maharashtra, during the period of 6 months April-October 2025. Ethical approval was obtained from the Institutional Ethics Committee of Sancheti Institute for Orthopedics & Rehabilitation College of Physiotherapy. (Approval No: [IEC-SIOR/Agenda 086](#))

Participants

A total of 55 participants with locomotor disabilities were recruited using Purposive sampling. Inclusion criteria were individuals aged 18-30 years, diagnosed with locomotor disability, and willing to participate. Participants with cognitive, hearing, vision impairments that prevented informed consent or questionnaire completion were excluded.

Data Collection Tools

Data were collected using a structured questionnaire developed specifically for this study. It included sections on participants' demographic details, type and duration of disability, awareness of government educational schemes, actual utilization, and barriers faced in accessing these schemes. The tool was face validated by experts in Community Physiotherapy. The experts evaluated the questionnaire to ensure it appropriately measured the intended variables, was suitable for the participants, and aligned with its purpose. The tool was finalized after subjective assessment, confirming that the items were relevant, clear, unambiguous, and reasonable for accurately capturing the required information.

Procedure

Participants were selected based on predefined inclusion and exclusion criteria, written informed consent was obtained from all participants prior to data collection. The aim and significance of the study, along with its potential relevance in future, were explained to each participant. Data were collected using a self-designed, face- and content-validated questionnaire. Participants' responses were recorded through face-to-face interviews at the study site, and in cases where in-person meetings were not feasible, telephonic interviews were conducted to ensure complete participation.

Data Analysis

Collected data were entered into Microsoft Excel and analyzed using descriptive statistics. Percentages

and frequencies were calculated to summarize demographic characteristics, awareness levels, and utilization of schemes.

Results and Discussion

A total of 55 participants with locomotor disabilities were included in the study (Table 1). Among them, 16 participants (29.09%) reported being aware of government educational scheme, while 39 participants (70.91%) were unaware (Figure 1). Figure 2 indicates that only a limited number of participants were aware of specific government educational schemes. Out of those who were aware, only 6.25% had ever utilized any scheme (Figure 3).

Table 1: Demographics Characteristics of Participants (n=55)

Characteristics	Category	Number (n)	Percentage (%)
Age(years)	18-20	18	32.73%
	21-25	19	34.55%
	26-30	18	32.73%
Type of locomotor disability	Cerebral Palsy	20	36.36%
	Paraplegia	13	23.64%
	Polio	13	23.64%
	Amputation	9	16.36%

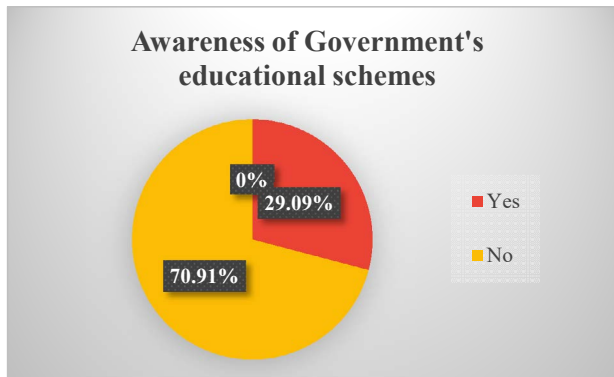


Figure 1: Shows awareness of government's educational schemes

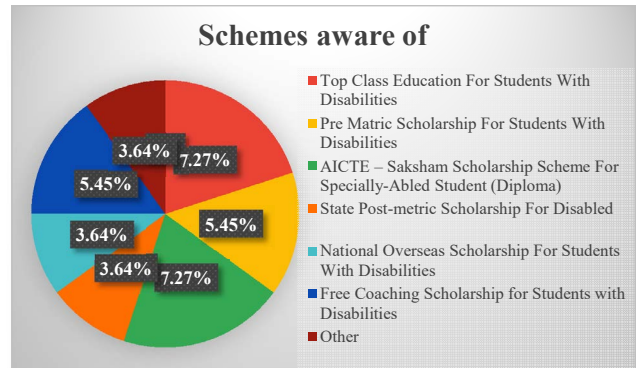


Figure 2: Schemes that are aware of by the participant

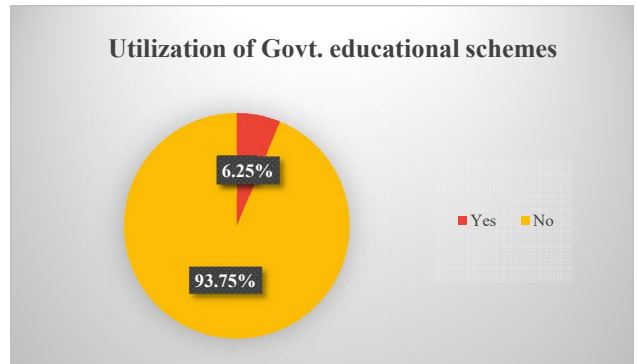


Figure 3: Utilization of Government Educational Schemes by Participants

When analyzed by type of disability, awareness was highest among participants with paraplegia (5 out of 13; 38.46%), followed by cerebral palsy (7 out of 20; 35.0%), and lowest among participants with polio (3 out of 13; 23.08%) and amputation (1 out of 9; 11.11%). Utilization of schemes was minimal across all disability types, with only one participant with cerebral palsy reporting utilization. Figure 4 demonstrates that non-utilization of government educational schemes was primarily due to insufficient information, unclear eligibility criteria, and procedural difficulties, highlighting significant systemic barriers that restrict access.

Regarding the source of information, participants primarily reported receiving awareness through family and friends (56.25%), followed by social media or online sources (31.25%), and NGOs (18.75%) (Figure 5).



Figure 4: Reasons for Non-Utilization of Government Educational Schemes

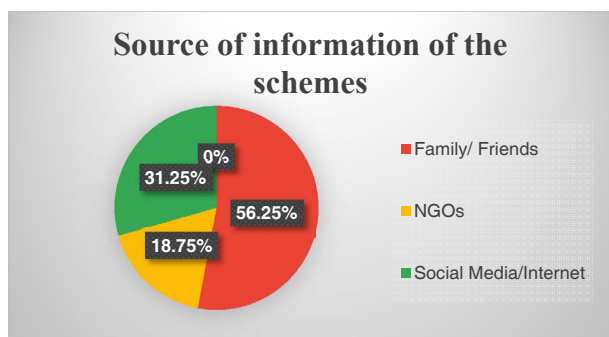


Figure 5: Shows the sources from which participants received information about government educational schemes.

Majority of the participants were students (60%), followed by employed individuals (20%) (Figure 6).

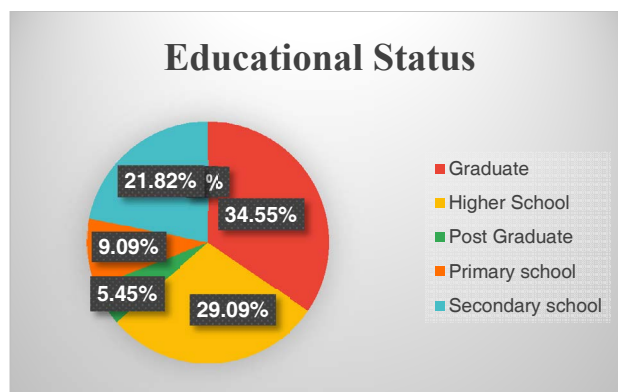


Figure 6: Educational status of Participants

This figure shows that 70.91% participants are not aware and 29.09% are aware of Government's educational schemes.

This figure shows the awareness regarding various educational schemes provided by government.

This figure shows that only 6.25% of the participants have utilized government educational schemes.

This figure shows reasons for not utilizing educational schemes provided by government.

The majority reported learning about the schemes through family/ friends, followed by social media and NGO

This figure illustrates the varying levels of education attained by the participants in the study.

Discussion

In the vast pool of literature we explored, we searched extensively using keywords such as Locomotor disability, Government educational schemes, Awareness, Utilization, Inclusive education, Rehabilitation. The present study assessed awareness and utilization of government educational schemes among people with locomotor disabilities. When awareness was examined based on the type of locomotor disability, it was found that 38.46% of individuals with paraplegia, 35% with cerebral palsy, 23.08% with polio, and only 11.11% of those with amputation were aware of the available government educational schemes. These findings indicate a significant gap between policy intent and public understanding, suggesting that dissemination of information and implementation at the ground level remain insufficient.

Latha and Vakkil (2013) found that awareness and utilization of government schemes among physically challenged students were generally average, with higher awareness observed in urban areas and among students with educated parents. This highlights the influence of socio-economic factors, which aligns with the present study's findings of significant gaps in awareness and utilization among people with locomotor disabilities.^[10]

Verma and Chohan (2025) reported limited awareness of government schemes among women

with locomotor disabilities, emphasizing that higher educational attainment was associated with better knowledge. This aligns with the current study, where most participants who were aware of schemes had higher education, reinforcing the role of education in empowering persons with disabilities to access welfare programs.^[11]

Variations in awareness among different disability types may be attributed to differences in mobility, dependence, and institutional engagement. Participants with paraplegia and cerebral palsy, who are more likely to attend rehabilitation centers or physiotherapy units, demonstrated higher awareness, whereas those with polio or amputations had fewer structured touchpoints, limiting exposure to scheme information. Pal et al. (2000) similarly emphasized that social isolation and limited outreach services hinder the flow of disability-related information, particularly in rural and semi-urban areas.^[12]

Underutilization of schemes observed in this study mirrors findings from Angothu et al. (2022) and Kashyap et al. (2012), who reported low enrollment in disability programs due to procedural complexity, unclear eligibility criteria, and limited publicity.^[13-14] Ojha (2023) further highlighted gaps in coordination and monitoring, noting that many beneficiaries remain unaware of programs and frontline officials often lack clarity on documentation requirements. Together, these findings suggest that awareness alone is insufficient; practical accessibility remains a major barrier.^[15]

The present findings align with Fernández-Batanero et al. (2022), who reported that students with disabilities face barriers such as inadequate institutional support, attitudinal challenges, and limited accessibility.^[2] Similarly, in this study, participants reported difficulties in accessing information and guidance about government educational schemes, highlighting that systemic and informational barriers impede inclusion not only in higher education but also in broader educational and welfare contexts.

Participants in the current study primarily learned about schemes through informal sources such as NGOs or social media, consistent with Pal et al. (2000)^[12], who emphasized the intermediary role of non-governmental organizations in bridging communication gaps. While NGOs are important, structured government-led awareness campaigns, community outreach, and accessible digital platforms are essential to ensure equitable dissemination of information.

Conclusion

The conclusion of this study points to an ongoing gap between the availability of government educational schemes and their actual accessibility for people with locomotor disabilities. It also emphasizes the importance of better implementation, clearer communication of information, and stronger institutional support to ensure that these schemes genuinely provide equal educational opportunities. Barriers such as inadequate dissemination of information, complex procedures, and limited institutional engagement impede effective utilization.

Higher awareness among participants with greater educational attainment or more frequent interaction with rehabilitation centers highlights the role of education and institutional support in bridging information gaps.

This study adds novel evidence by specifically examining awareness and utilization patterns across different types of locomotor disabilities, revealing disparities likely influenced by mobility, social engagement, and access to support services.

Although sex and gender were not the primary focus of this study, differences in awareness and access to schemes may exist across socio-demographic groups, highlighting the need for further research to explore these variations. The study was limited by its geographic scope and reliance on a self-made questionnaire, which may not capture the full range of participants' experiences.

The findings have important implications for policy, clinical practice, and research. Strengthening

awareness campaigns through schools, community centers, healthcare facilities, and digital platforms can improve reach. Simplifying application procedures and aligning scheme benefits with the actual needs of the target population may enhance utilization. Rehabilitation professionals, including physiotherapists, can play a pivotal role in guiding beneficiaries and facilitating access. Future studies could explore inter-sectoral collaborations, the role of technology in increasing accessibility, and long-term evaluations of policy interventions on scheme uptake.

Overall, this study underscores the persistent gap between policy intent and practical implementation, emphasizing that targeted, multi-level strategies are essential to ensure that persons with locomotor disabilities are empowered to fully access educational opportunities and social welfare benefits.

Funding Sources: None

Ethical Clearance/Statement of Ethics: The study was approved by the Institutional Ethics Committee of Sancheti Institute for Orthopaedics and Rehabilitation College of Physiotherapy. The ethical approval reference number is IEC-SIOR/Agenda 086.

Declaration of Conflicts of Interest Statement: The authors declare no conflicts of interest.

References

- World Health Organization. International Classification of Functioning, Disability and Health (ICF). Geneva: World Health Organization; 2001.
- Fernández-Batanero JM, Montenegro-Rueda M, Fernández-Cerero J. Access and participation of students with disabilities: the challenge for higher education. *Int J Environ Res Public Health*. 2022 Sep 21;19(19):11918. doi: 10.3390/ijerph191911918. PMID: 36231217; PMCID: PMC9565787.
- Mahesh KS, Gurulingaiah M. Persons with disabilities: issues and challenges. *Int J Res Publ Rev*. 2021;2(4):-.
- The National Trust. Schemes [Internet]. New Delhi: The National Trust; [cited 2025 Oct 16]. Available from: <https://thenationaltrust.gov.in/content/innerpage/schemes.php>
- National Portal of India. Schemes and programmes for differently-abled, Ministry of Social Justice and Empowerment [Internet]. [cited 2025 Oct 16]. Available from: <https://www.india.gov.in/schemes-and-programmes-differently-abled-ministry-social-justice-and-empowerment>
- Ministry of Education, Government of India. Inclusive education [Internet]. [cited 2025 Oct 16]. Available from: <https://dse.education.gov.in/inclusive-education>
- Ministry of Law and Justice, Government of India. The Rights of Persons with Disabilities Act, 2016 [Internet]. [cited 2025 Oct 16]. Available from: https://legislative.gov.in/sites/default/files/A2016-49_1.pdf
- Department of Empowerment of Persons with Disabilities (Divyangjan), Ministry of Social Justice and Empowerment, Government of India. Schemes and initiatives [Internet]. [cited 2025 Oct 16]. Available from: <https://depwd.gov.in/>
- World Physiotherapy. Policy statement: Disability. London (UK): World Physiotherapy; 2023 [Internet]. [cited 2025 Oct 16]. Available from: <https://world.physio/policy/ps-disability>
- Latha K, Vakkil M. Awareness and utilization of schemes for physically challenged students at school level. *Int J Educ Disabil*. 2013 Jan;3(7):- ISSN: 2321-5488.
- Verma M, Chohan S. Government schemes for PWDs and their awareness: a study of locomotor disabled women in District Panchkula, Haryana. *Int J Res Sci Innov*. 2025;12(5):1176-1181. doi: 10.51244/IJRSL.2025.120500176.
- Pal HR, Saxena S, Chandrashekhar K, Sudha SJ, Murthy RS, Thara R, et al. Issues related to disability in India: a focus group study. *Natl Med J India*. 2000 Sep-Oct;13(5):237-241. PMID: 11190051.
- Angothu H, Ajmera S, Thanapal S, Reddy KS, Jagannathan A, Muliya KP, et al. Poor enrollment of persons with disabilities in Niramaya health insurance scheme over a decade under the Indian National Trust. *Indian J Soc Psychiatry*. 2022 Jul 1;38(3):297-300.
- Kashyap K, Thunga R, Rao AK, Balamurali NP. Trends of utilization of disability benefits among chronic mentally ill. *Indian J Psychiatry*. 2012 Jan;54(1):54-58. doi: 10.4103/0019-5545.94648. PMID: 22556439; PMCID: PMC3339221.
- Ojha P. Current policies and gaps in programs for persons with disability in India: an exploratory study. *Adv Public Health Open Talk*. 2023;6(2):- doi: 10.23880/aphot-16000250