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Social Security Policies, Programmes and Schemes in Kerala

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Abstract

Kerala has a long history of providing social security to a large part of its population, and its welfare system rests on four pillars: insurance, pension, the welfare fund boards and the integrated Ashraya programme. The Kerala Social Security Mission (KSSM), under the Social Justice Department, plays a central part in implementing the state's social security schemes. This paper surveys more than twenty such schemes, including Snehapurvam for orphans, Vayomithram for the elderly, Karunya and Cancer Suraksha for the seriously ill, Samaswasam for those with chronic disease, Mittayi for children with juvenile diabetes, and Anuyatra and UDID for persons with disabilities. Drawing on the Mission's financial data for the years 2021-22 to 2023-24, the paper groups the schemes by the beneficiary groups they serve, sets out their financial details, and analyses the relationship between the funds allocated, the funds actually distributed and the number of beneficiaries reached. It finds that the schemes have wide reach but that a recurring gap between allocation and expenditure, and a mismatch between funds and beneficiary numbers, point to administrative and budgeting weaknesses that the Mission will need to address.

Keywords:- Decentralisation, Extreme Poverty, Kudumbashree, Orphans, UDID, Social Security.

Introduction

Kerala has a long history of offering social security to a sizeable part of its population. The state operates four kinds of social security programme, insurance, pension, the welfare fund boards and Ashraya, an integrated scheme designed to help the poorest in the community, and these are delivered by the central government, state departments, welfare fund boards and local self-government institutions. There are more than forty pension schemes in the state, of which about twenty are financed by Kerala itself, and benefits reach the elderly, agricultural labourers, widows, persons with disabilities, unmarried women over fifty and the unemployed (Kunhikannan & Aravindan 2013).

On measures of literacy, education, health and social provision, Kerala stands apart from most other Indian states, the fruit of careful legislation and planning across old-age support, wages, unemployment, health care, food security, housing, social insurance and social assistance (Isaac 2000). The state's infant mortality rate, at about 5 per 1,000 live births, is lower than the all-India average of about 25 and comparable to that of far richer countries (Mathrubhumi 2025). The social welfare pension schemes, including the Agricultural Labour Pension and the several Indira Gandhi National pensions for the aged, the disabled and widows, shield those facing social or financial hardship (Ranjini 2024).

This achievement is the product of what is known as the Kerala model of development, which stands for the inclusion of marginalised sections of society, the protection of fundamental rights, comprehensive social security and the eradication of extreme poverty, with decentralised institutions charged with launching micro-

development programmes to guarantee the basic needs of the poor (Saradha 2022). The system evolved in stages. The earliest form of social security was the joint family, under which women, children, the elderly, widows and the disabled were naturally protected, though only the wealthier upper-caste families could meet every member's needs. State involvement in health, education and land then transformed the social structure: the land reforms redistributed land to agricultural-labour households, the Kerala Agricultural Workers Act of 1974 secured fixed wages, job security and an arbitration board, and the public distribution system improved access to food grains. It was at this point that the modern network of pensions and welfare schemes for agricultural workers, widows, the poor, the elderly and the disabled began to take shape. It is this network, as administered today by the Kerala Social Security Mission, that the present study surveys.

Statement of the Problem

Marginalised communities face several difficulties in obtaining social security coverage. Many eligible recipients are unaware of the policies and schemes available to them; administrative inefficiencies and bureaucratic obstacles delay the distribution of benefits; and financial constraints affect the execution of schemes. The problem this study addresses is how well Kerala's schemes, taken together, reach their intended beneficiaries, and what their financial record reveals about the obstacles that remain.

Objectives of the Study

- To understand the different social security schemes in Kerala.
- To recognise the financial assistance provided under the various schemes.
- To differentiate the schemes serving women, children, the elderly, the disabled and others.
- To identify the problems and challenges faced by the marginalised sections of society.

Scope and Significance

An understanding of the various social security policies, programmes and schemes offers insight into how the living standards of the marginalised may be improved. Across the world, modern welfare states provide social security to vulnerable groups, including the poor, the elderly, the unemployed, the disabled, children and women, and the financial assistance given to these communities raises their well-being and reduces their poverty. The significance of this study lies in bringing the full range of Kerala's schemes into a single view and assessing their financial performance.

Literature Review

The literature on Kerala's welfare system situates it within the wider Kerala model of development. Kunhikannan and Aravindan (2013) document the functioning of the state's contingent social security schemes and the breadth of its pension provision, while Isaac (2000) connects the state's achievements to the People's Campaign for Decentralised Planning and to the legislative and planning effort that built income security across old age, wages, health and food. Ranjini (2024) reviews the social welfare pension schemes, with particular attention to the Indira Gandhi National Widow Pension, and Saradha (2022) sets the schemes within the planning framework of the state's fourteenth five-year plan and its guidelines for subsidy and financial assistance.

A second body of writing comes from the Kerala Social Security Mission itself and from those associated with it. Shylaja (2019) describes the Mission's schemes for the elderly and for persons with disabilities, including the life-cycle approach of Anuyatra, and Bindu (2022) and the Mission's own publications present Kerala as a leader in social security. The present study draws on this descriptive literature and on the Mission's financial data to provide a consolidated, comparative account of the schemes and their performance.

Research Methodology

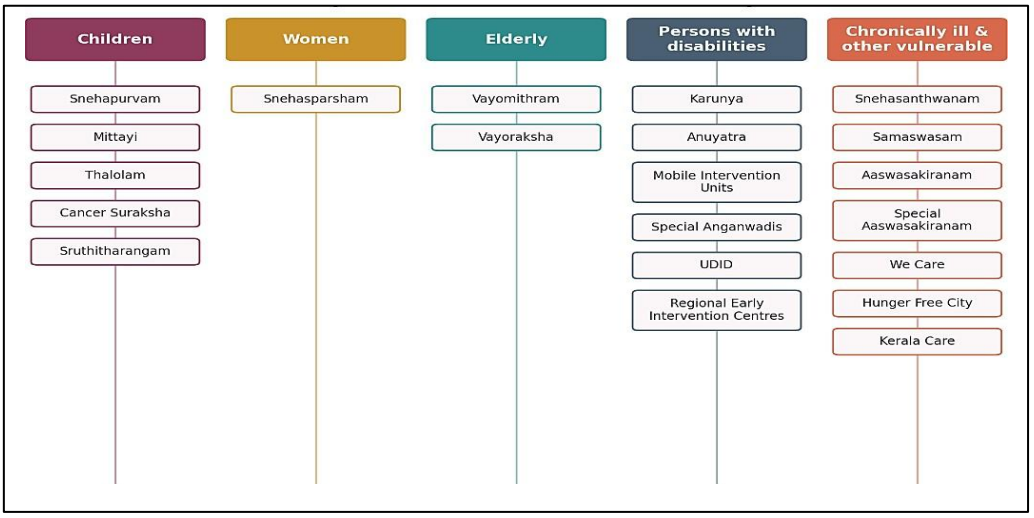
The study adopts a mixed-methods design, combining qualitative and quantitative approaches and using descriptive, analytical and historical methods. It relies on secondary sources, including the financial data of the Kerala Social Security Mission for the years 2021-22 to 2023-24, together with government reports, newspapers, books, journals and articles. The schemes are grouped by the beneficiary groups they serve, their financial details are tabulated, and the relationship between budget allocation, actual distribution and the number of beneficiaries is analysed across schemes and years. All monetary amounts are expressed in lakhs of rupees.

The Social Security Schemes of Kerala

The Kerala Social Security Mission administers more than twenty schemes, which may be grouped by the beneficiary groups they serve: children, women, the elderly, persons with disabilities, and the chronically ill

and other vulnerable people. Figure 1 maps the schemes onto these groups, and Table 1 summarises them at a glance before the financial detail is presented.

Fig 1. The social security schemes of Kerala, grouped by beneficiary group.



Source: compiled by the author.

Table 1. Social security schemes of the Kerala Social Security Mission at a glance.

Scheme	Beneficiary Group	Support Provided
Snehapurvam	Children (orphans)	Financial support for the education of orphaned children
Mittayi	Children	Comprehensive care for children with type 1 (juvenile) diabetes
Thalolam	Children	Free treatment for children with serious illnesses
Cancer Suraksha	Children	Treatment support for children with cancer
Sruthitharangam	Children	Free cochlear implant surgery for children under five
Snehasparsham	Women	Monthly aid to unmarried mothers in the BPL category
Vayomithram	Elderly	Free medicines, mobile clinics and palliative care for those 65+
Vayoraksha	Elderly	Care, protection and emergency support for BPL senior citizens
Karunya	Disability	CSR-funded support for disabled children in special schools
Anuyatra	Disability	Life-cycle support: early intervention, education, employment
Mobile Intervention Units	Disability	Services for disabled children in remote areas
Special Anganwadis	Disability	Remedial therapy and instruction for pre-school children
UDID	Disability	Unique disability ID cards for persons with disabilities
Regional Early Intervention Centres	Disability	Specialist disability services at medical colleges
Snehasanthwanam	Endosulfan victims	Monthly financial aid to endosulfan victims
Samaswasam	Chronically ill	Aid for dialysis, transplant, haemophilia and sickle-cell patients
Aaswasakiranam	Bedridden / disabled	Monthly aid to carers of the bedridden and severely ill
Special Aaswasakiranam	Endosulfan victims	Monthly aid to carers of bedridden endosulfan victims
We Care	Vulnerable groups	Relief fund drawing on public and corporate donations
Hunger Free City	Hospital patients	Free daily meals for patients and bystanders
Kerala Care	Bedridden / palliative	Universal palliative care for bedridden patients

Source: compiled by the author from the Kerala Social Security Mission.

Schemes for Children

Snehapurvam

Kerala has about 1,500 orphanages housing some 75,000 children, of whom most still have relatives. The Snehapurvam scheme provides social security to children who have lost one or both parents, giving them financial support to continue their education while living in their own homes or with close relatives, and so preserving the family structure. Children up to degree level whose annual family income is below Rs. 20,000 in rural areas and Rs. 22,375 in urban areas are eligible. As Table 2 shows, the scheme reached the most beneficiaries in 2021-22, and the allocation in that year was far larger than in the two years that followed.

Table 2. Financial details of the Snehapurvam scheme (Rs. lakhs).

Financial Year	Budget Share	Received	Distributed	Beneficiaries
2021-22	4510.30	4510.30	4510.30	70,881
2022-23	1700.00	1105.00	1104.99	21,742
2023-24	1700.00	1700.00	1700.00	57,187
2021-22	4510.30	4510.30	4510.30	70,881

Source: Kerala Social Security Mission, Thiruvananthapuram (08/08/2025).

Mittayi

The Mittayi project cares for children and teenagers with type 1 diabetes, providing pen insulin, modern medical care, dietary guidance, a glucose monitor, an insulin pump and counselling for parents. Children up to eighteen whose family income does not exceed Rs. 2 lakh are eligible. As Table 3 shows, the number of beneficiaries rose steadily even as the amount distributed fluctuated, with a notably low distribution in 2021-22 against the same allocation each year.

Table 3. Financial details of the Mittayi project (Rs. lakhs).

Financial year	Budget share	Received	Distributed	Beneficiaries
2021-22	380.00	380.00	205.42	1,233
2022-23	380.00	380.00	378.01	1,469
2023-24	380.00	247.00	247.00	1,626

Source: Kerala Social Security Mission, Thiruvananthapuram (09/08/2025).

Thalolam, Cancer Suraksha and Sruthitharangam

Three further schemes serve seriously ill children. Thalolam, introduced in 2010, provides free treatment for children under eighteen with kidney, heart, neurological and other serious conditions, and in 2021-22 it distributed 1,268.81 lakhs among 19,364 beneficiaries. Cancer Suraksha covers the treatment of children under eighteen affected by cancer, with no upper limit on expenditure and no distinction between APL and BPL families, and in 2021-22 it distributed 499.40 lakhs among 1,099 beneficiaries. Sruthitharangam funds cochlear-implant surgery, costing about 5.5 lakhs per child, free of charge for children under five, and in 2021-22 it distributed 799.77 lakhs to 312 beneficiaries.

Schemes for Women

Snehasparsham

The Snehasparsham scheme provides monthly financial aid of Rs. 1,000 to unmarried mothers in the BPL category, up to the age of sixty. As Table 4 shows, the number of beneficiaries fell sharply after 2021-22, and the amount distributed declined in 2023-24.

Table 4. Financial details of the Snehasparsham scheme (Rs. lakhs).

Financial year	Budget share	Received	Distributed	Beneficiaries
2021-22	200.00	200.00	200.00	1,483
2022-23	200.00	200.00	200.00	538
2023-24	200.00	156.90	148.92	567

Source: Kerala Social Security Mission, Thiruvananthapuram (08/08/2025).

Schemes for the Elderly

Vayomithram

Vayomithram, carried out in collaboration with the Local Self-Government Department, focuses on the health care and social security of the elderly. It is available to those aged 65 and over in corporation and municipal areas regardless of income, and offers free medicines, mobile clinics, palliative and home-based care, old-age help

desks and counselling, along with recreational programmes. The scheme operates through 95 units across the corporations, 85 municipalities and four block panchayats. As Table 5 shows, the number of beneficiaries rose each year while the allocation and the amount distributed fell, a divergence the author of the original study rightly noted (Shylaja 2019).

Table 5. Financial details of the Vayomithram scheme (Rs. lakhs).

Financial year	Budget share	Received	Distributed	Beneficiaries
2021-22	4708.60	4708.60	4707.25	2,78,623
2022-23	2750.00	2365.00	2364.92	2,89,030
2023-24	2750.00	2750.00	1975.55	2,90,030

Source: Kerala Social Security Mission, Thiruvananthapuram (08/08/2025).

Vayoraksha

Vayoraksha is a broader programme for the welfare, protection and care of senior citizens, founded on the principle that the social security of the elderly is a right rather than a charity. It offers emergency medical aid to the poor, carers for the bedridden, rehabilitation, legal assistance and support against abuse, neglect and loneliness, and covers senior citizens in the BPL category (Shylaja 2019).

Schemes for Persons with Disabilities

Anuyatra

Anuyatra aims to make Kerala a disability-friendly state through a comprehensive life-cycle approach covering early intervention, education, employment and rehabilitation. It focuses on the early detection of developmental disorders through mobile units and district early-intervention centres, supports education and skill development, facilitates employment, and offers specialist services such as autism centres and special anganwadis. In 2021-22 it distributed 205.42 lakhs among 1,200 beneficiaries (Shylaja 2019). Its sub-projects include Kathoram, which provides free surgery for hearing-impaired children up to the age of five and, between 2017-18 and 2021-22, conducted hearing screening for 5,47,861 newborns, and Spectrum, which addresses the needs of children with autism.

Mobile Intervention Units, Special Anganwadis and Early Intervention Centres

Three connected schemes extend disability services. The 25 Mobile Intervention Units take treatment to disabled children in remote areas, each serving six block panchayats, and benefited 2,416 children between 2017-18 and 2021-22. The Special Anganwadis provide remedial therapy and instruction to pre-school children with disabilities, and between 2017-18 and 2021-22 trained 1,183 children, of whom many were able to enter mainstream schools. The Regional Early Intervention Centres, located at five government medical colleges, serve about 25,000 children with impairments each year.

Karunya

The Karunya programme raises funds for the medical and educational needs of children with physical or mental disabilities in special schools or orphanages, drawing on corporate social responsibility deposits of at least Rs. 1,00,000, on which the Mission adds the government's interest and matching contribution. Depositors may choose the school, orphanage or child they wish to support.

UDID

The Unique Disability Identity (UDID) scheme issues a unique identity card to every eligible person with a disability, with application forms supplied through anganwadis and cards distributed through Akshaya centres. As Table 6 shows, the number of cards distributed rose sharply after 2021-22, but the amount actually spent remained far below the allocation in every year, a pattern that, as the original study observed, suggests a degree of administrative neglect.

Table 6. Financial details of the UDID scheme (Rs. lakhs).

Financial year	Budget share	Received	Distributed	Cards distributed	Local camps
2021-22	100.00	100.00	18.04	26,325	4
2022-23	100.00	62.00	46.30	91,511	89
2023-24	100.00	73.00	37.32	77,254	122

Source: Kerala Social Security Mission, Thiruvananthapuram (10/08/2025).

Schemes for the Chronically Ill and Other Vulnerable Groups

Snehasanthwanam

Snehasanthwanam provides monthly financial aid to endosulfan victims, ranging from Rs. 1,200 for most patients to Rs. 2,200 for the bedridden, and has done so since December 2010. As Table 7 shows, the amount distributed each year fell well short of the amount received.

Table 7. Financial details of the Snehasanthwanam scheme (Rs. lakhs).

Financial year	Budget share	Received	Distributed	Beneficiaries
2021-22	1900.00	1900.00	1307.65	6,941
2022-23	1700.00	1700.00	1240.96	6,864
2023-24	1700.00	1605.00	1287.31	6,520

Source: Kerala Social Security Mission, Thiruvananthapuram (08/08/2025). Beneficiary totals combine the Snehasanthwanam, Special Aaswasakiranam and educational-assistance components.

Samaswasam

Samaswasam supports patients with serious chronic illness. Its first component pays Rs. 1,100 a month to BPL patients needing dialysis; Samaswasam II aids kidney and liver transplant patients; Samaswasam III supports those with haemophilia and related clotting disorders; and Samaswasam IV assists non-tribal patients with sickle-cell anaemia. As Table 8 shows, the number of beneficiaries rose each year, though the amount distributed dipped in 2022-23.

Table 8. Financial details of the Samaswasam scheme (Rs. lakhs).

Financial year	Budget share	Received	Distributed	Beneficiaries
2021-22	500.00	500.00	499.40	2,662
2022-23	600.00	390.00	389.99	2,977
2023-24	600.00	600.00	459.60	3,293

Source: Kerala Social Security Mission, Thiruvananthapuram (08/08/2025).

Aaswasakiranam

Aaswasakiranam pays Rs. 600 a month to the carers of bedridden patients and of those with severe physical or mental disabilities. As Table 9 shows, the scheme presents the sharpest divergence in the whole survey: the allocation rose from 4,000 to 5,400 lakhs across the three years, yet the amount distributed fell from 4,000 to about 1,500 lakhs, and the number of beneficiaries fell from 96,086 to 19,229. The original study rightly notes the discrepancy between the rising budget and the falling expenditure and reach.

Table 9. Financial details of the Aaswasakiranam scheme (Rs. lakhs).

Financial year	Budget share	Received	Distributed	Beneficiaries
2021-22	4000.00	4000.00	4000.00	96,086
2022-23	4250.00	2500.00	2421.09	38,104
2023-24	5400.00	1500.00	1499.96	19,229

Source: Kerala Social Security Mission, Thiruvananthapuram (09/08/2025).

We Care, and other schemes

We Care is a relief fund drawing on public and corporate donations for the elderly, disabled, chronically ill and bedridden, monitored through a statutory financial and social audit (Bindu 2022). As Table 10 shows, both its beneficiaries and its distribution declined steeply over the three years. Two further schemes complete the group: Special Aaswasakiranam pays Rs. 700 a month to the carers of bedridden endosulfan victims; Hunger Free City provides free daily meals to about 7,000 patients and bystanders in government hospitals; and Kerala Care, now in its final stage, aims to bring universal palliative care, as a right, to the roughly six lakh bedridden and seriously ill patients in the state (Manikandan 2025).

Table 10. Financial details of the We Care scheme (Rs. lakhs).

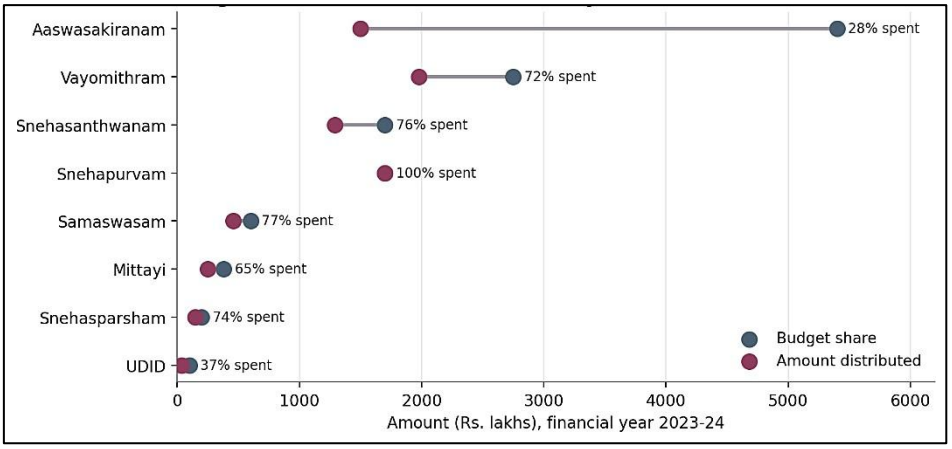
Financial year	Number of beneficiaries	Distributed amount
2021-22	291	663.66
2022-23	100	279.75
2023-24	65	210.92

Source: Kerala Social Security Mission, Thiruvananthapuram (09/08/2025).

Discussion: A Cross-Scheme Analysis

Read together, the financial tables reveal two patterns that the individual scheme descriptions only hint at. The first is a persistent gap between the funds allocated to a scheme and the funds actually distributed. Figure 2 sets the budget share of the major schemes against the amount distributed in 2023-24 and labels the share of the budget that was spent. While Snehapurvam spent its entire allocation, most schemes spent only about three-quarters of theirs, and Aaswasakiranam spent barely a quarter of a budget that had in fact been increased, so that a large sum set aside for the carers of the bedridden went unspent.

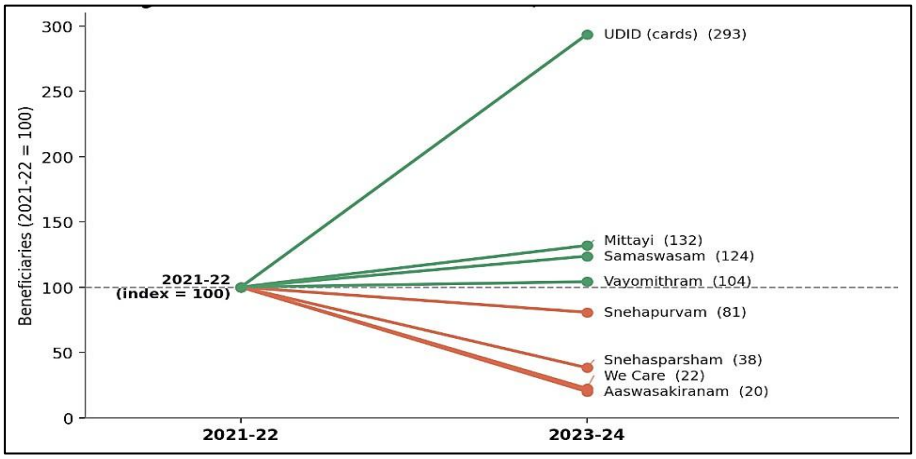
Fig 2. Budget allocated versus amount distributed, 2023-24.



-Source: compiled by the author from Kerala Social Security Mission data.

The second pattern is a mismatch between funds and reach. Figure 3 indexes each scheme's beneficiary count to its 2021-22 level and traces the change to 2023-24. The schemes diverge sharply: the distribution of UDID cards nearly trebled, and Mittayi, Samaswasam and Vayomithram grew, while Snehapurvam, Snehasparsham, We Care and, most strikingly, Aaswasakiranam contracted, the last two falling to about a fifth of their earlier reach. In several schemes the number of beneficiaries moved in the opposite direction to the funds, rising as allocations fell, as in Vayomithram, or falling even as allocations rose, as in Aaswasakiranam.

Figure 3. Change in the reach of selected schemes, 2021-22 to 2023-24 (indexed).



Source: compiled by the author from Kerala Social Security Mission data.

Taken together, these patterns suggest that the difficulty in Kerala's social security system lies less in the design or the generosity of the schemes than in their execution. The recurring under-spending of allocated funds points to administrative and procedural bottlenecks of the kind the statement of the problem anticipated: a lack of awareness among eligible recipients, bureaucratic delay, and the difficulty of identifying and reaching the most isolated beneficiaries. The contraction of schemes such as Aaswasakiranam and We Care deserves particular attention, since these serve the bedridden and the most vulnerable, precisely the groups least able to navigate a complex application process. Strengthening outreach, simplifying procedures and tightening the link between budgeting and actual disbursement would do more to improve Kerala's social security than further additions to an already wide menu of schemes.

Conclusion

The Kerala Social Security Mission, under the state's Social Justice Department and based in Thiruvananthapuram, identifies, plans and carries out social security schemes for the underprivileged, the poor, the elderly, women, children, cancer patients and other vulnerable groups, working in collaboration with other departments and agencies and supported by a corpus of about Rs. 65 crore. The schemes surveyed here, from Snehapurvam for orphans to Vayomithram for the elderly and Anuyatra for persons with disabilities, show the breadth of a system that is the outcome of the Kerala model of development and that underpins the state's high human-development indicators. Yet the financial record also shows that wide provision is not the same as effective delivery: funds set aside are not always spent, and the reach of some schemes has contracted even as their budgets have grown. If Kerala is to honour the principle, expressed in its own Vayoraksha scheme, that social security is a right and not a charity, the next task is to close the gap between what is allocated and what reaches the people the schemes are meant to serve.

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