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ACCESS TO MOTOR ACCIDENT COMPENSATION IN INDIA: LEGAL BARRIERS AND THE ROLE OF CLAIMS TRIBUNALS

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Abstract

An award of compensation does not necessarily bring financial relief to a motor accident victim. The claimant may have struggled to obtain records, establish earnings or prove the effects of an injury, only to face further difficulty when payment falls due. This paper examines the connection between these stages under India's motor accident compensation framework. Through doctrinal research, it considers the Motor Vehicles Act, the relevant procedural rules and selected Supreme Court decisions, alongside published studies of injury-related expenditure. The discussion includes the 2026 amendments concerning delayed applications and the disposal of claims. It argues that access to compensation depends on how institutions perform their duties throughout the proceeding. Flexible rules of proof cannot cure an unsupported assessment of income, while a properly calculated award remains incomplete as practical relief until the money is available to the claimant. The analysis supports early identification of evidentiary difficulties, explanations for disputed valuations and continued supervision of payment. It also examines the limits of these measures: assistance must preserve the respondent's opportunity to challenge a claim, settlement requires informed consent and safeguards over awarded money must respond to the beneficiary's circumstances. The proposed reforms focus on responsibility for the points at which a claim stops progressing. Their purpose is to connect the legal recognition of loss with a remedy that the injured person or bereaved family can use.

Keywords: Motor accident compensation; access to justice; Motor Accident Claims Tribunals; just compensation; insurance liability; enforcement.

I. Introduction

A motor accident creates expenses before it creates a legal file. Treatment has to be paid for, someone must accompany the injured person to hospital and wages may stop while recovery is still uncertain. If the victim dies, the household must arrange its immediate affairs while dealing with the loss. Compensation enters this situation as a claim to meet an existing need. Its usefulness depends partly on how long the family must wait and what it must do during that wait.

The scale of road injury makes this more than an occasional private difficulty. The World Health Organization's 2023 report estimates annual road traffic deaths globally at 1.19 million.[444] Those figures establish the wider importance of the subject. They tell us much less about the experience of a person trying to obtain a police record or secure the release of an award. For that purpose, the distinction drawn in access to justice scholarship between formal rights and effective remedies is particularly useful. Cappelletti and Garth examined the barriers that prevent people from making use of rights already recognised by law.[445] In motor accident compensation, the issue can be stated quite directly: can a victim establish the claim, obtain a fair valuation and receive the amount that is due?

Published evidence gives this question a financial context. The World Bank's 2021 study of households in four Indian States describes the unequal consequences of road crashes, including problems associated with insurance and compensation.[446] Kumar and colleagues' study of road traffic injuries in urban India also records out-of-pocket expenditure and distress financing among the patients studied.[447] These studies do not measure the performance of every Claims Tribunal. They do show why an injured household may find it difficult to absorb the cost of a prolonged legal process.

This paper asks whether the Indian framework sufficiently connects access to the tribunal with the eventual receipt of compensation. Its argument is that the tribunal's concern with effective relief should continue beyond the determination of the amount. Assistance with evidence, reasons for valuation and supervision of payment need to operate together. The present arrangements contain substantial protection at each stage; the difficulty is what happens when responsibility becomes unclear between them.

The method is doctrinal. The analysis examines legislation and rules alongside selected Supreme Court decisions on proof, assessment, insurance liability and disbursement. Historical reform reports explain the development of the remedy, while published injury studies provide limited evidence of the financial setting in which claims arise. There are no interviews, surveys or original estimates of tribunal performance. The conclusions concern the operation and coherence of legal duties, including the relevant 2026 amendments. Reported cases establish that particular difficulties can arise; they cannot establish how frequently those difficulties occur throughout India.

II The Legal Framework Governing Compensation

A The purpose of a specialised remedy

Sections 165, 166 and 168 of the Motor Vehicles Act, 1988 provide the central structure: the Claims Tribunal, the application and the determination of just compensation.[448] A specialised forum is meant to make an accident claim manageable within a procedure directed to the losses in question. That purpose is weakened if the claimant is left to reconstruct the dispute through repeated requests to institutions holding essential information. The adequacy of the process has been debated for decades. The Law Commission's Eighty-fifth Report examined compensation under the earlier 1939 Act, placing

[444] World Health Organization, "Global Status Report on Road Safety 2023" (Geneva, 2023).
[445] Mauro Cappelletti and Bryant Garth, "Access to Justice: The Newest Wave in the Worldwide Movement to Make Rights Effective" 27 *Buffalo Law Review* 181 (1978).
[446] World Bank, "Traffic Crash Injuries and Disabilities: The Burden on Indian Society" (Washington, DC, 2021).
[447] G. Anil Kumar, T. Ramachandran Dilip, *et.al.*, "Burden of Out-of-Pocket Expenditure for Road Traffic Injuries in Urban India" 12 *BMC Health Services Research*, Article 285 (2012).
[448] The Motor Vehicles Act, 1988 (Act 59 of 1988), as amended, ss. 165, 166 and 168.

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the present discussion within a longer history of concern about the remedy.[449] Its recommendations belong to that statutory setting and should be read accordingly.

The constitutional principles help explain why the procedure matters. Article 14 supports equal treatment, and article 39A directs the State towards equal justice and free legal aid.[450] Article 39A does not, by itself, confer an enforceable right to a particular award. It does provide a basis for asking whether the arrangements for pursuing compensation place an avoidable burden on a claimant with little money or legal knowledge.

The Legal Services Authorities Act, 1987 gives this concern a statutory form. Sections 12 and 13 govern entitlement to legal services for eligible persons, subject to the prescribed conditions.[451] An accident victim's eligibility must therefore be assessed. In a useful referral system, that assessment would happen early enough to assist with the first consequential decisions, rather than after defective filings have already delayed the claim.

B Choosing the appropriate compensation route

The 2019 amendment recast important insurance and compensation provisions. These include the settlement procedure in section 149 and the no-fault remedy in section 164.[452] Under the latter, specified compensation for death or grievous hurt is available without establishing fault. A section 166 claim ordinarily involves an inquiry into negligence and the actual compensable loss. The distinction affects both the evidence required and the relief sought. A victim deciding between available routes needs to understand what acceptance of a particular payment means for the claim. The no-fault amount should not be described as the ceiling for all compensation, nor should an early payment be treated as an inconsequential choice where the statute attaches consequences to acceptance. Advice at this stage should explain those consequences in terms that the claimant can follow. It is difficult to speak meaningfully of access to a remedy if the person entitled to pursue it cannot understand the choice that must first be made.

Geographical access has a more concrete statutory answer. Section 166(2) permits proceedings before the tribunal connected with the accident, the claimant's residence or business, or the defendant's residence, subject to its terms.[453] The Law Commission's One Hundred Nineteenth Report had considered the expense of distant proceedings and transfer applications, recommending a forum where the claimant resided.[454] The choice now available deserves recognition. Its practical value depends on obtaining records and arranging evidence without repeated journeys elsewhere. Reform should attend to that remaining difficulty rather than propose a territorial option that the law already supplies.

[449] Law Commission of India, "Claims for Compensation under Chapter 8 of the Motor Vehicles Act, 1939", Report No. 85 (May, 1980).
[450] The Constitution of India, arts. 14 and 39A.
[451] The Legal Services Authorities Act, 1987 (Act 39 of 1987), ss. 12 and 13.
[452] The Motor Vehicles (Amendment) Act, 2019 (Act 32 of 2019), s. 51.
[453] The Motor Vehicles Act, 1988, *supra* note 5, s. 166(2).
[454] Law Commission of India, "Access to Exclusive Forum for Victims of Motor Accidents under the Motor Vehicles Act, 1939", Report No. 119 (February, 1987), paras. 4.6-4.8.

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C The effect of the 2026 amendments

The Jan Vishwas (Amendment of Provisions) Act, 2026 introduced changes relevant to access and delay. The proviso added to section 166(3) permits a delayed application on sufficient cause within a further period not exceeding twelve months after the initial six-month period. The new section 168(4) requires an endeavour to dispose of section 166 applications within twelve months and written reasons where that period is exceeded.[455] The relevant amendments took effect on August 15, 2026.[456]

There is a practical difference between requiring expedition and guaranteeing a result by a fixed date. The disposal provision places responsibility on the tribunal to pursue the claim and explain delay. A useful explanation should identify the outstanding step and the obstacle to completing it. Merely recording that a case remains pending would add little to the claimant's understanding.

Limitation must also be discussed with care. In *ICICI Lombard General Insurance Co. Ltd. v. Ayiti Navaneetha*, the Supreme Court's interim order of November 4, 2025 directed tribunals and High Courts against dismissing claims on the specified limitation ground during the pendency of those petitions.[457] This was an interim direction, not a final judgment striking down section 166(3). The effect of amendments and applicable later orders has to be considered in the relevant procedural setting. The concern examined here is the risk of losing access before the merits are heard. Reliable accident reporting and prompt legal assistance should reduce that risk, particularly while a victim is receiving treatment and may be unable to organise a claim unaided.

III Procedural and Evidentiary Barriers Before the Tribunal

A Responsibility for collecting records

Some of the most important evidence is held by people who are not parties seeking compensation. The police hold accident information; the hospital holds treatment records; registration authorities hold vehicle and licence particulars. The 2022 rules provide a structured reporting procedure, including a First Accident Report within forty-eight hours, an Interim Accident Report and a Detailed Accident Report.[458] These duties can reduce the injured person's dependence on separately collecting each document. The point of a coordinated report is lost if the victim must still chase the same information from office to office. The question for the tribunal is whether the material needed to determine the claim has arrived, who holds what is missing and whether that omission prevents a decision on a genuinely disputed issue. An incomplete document should lead to a focused request for correction. It need not become a reason to leave every other part of the claim untouched.

The directions in *Gohar Mohammed v. Uttar Pradesh State Road Transport Corporation* address investigation, reporting, insurer participation and tribunal procedure.[459] They give the reporting process a wider institutional purpose. Police and other stakeholders help make the claim capable of decision.

[455] The Jan Vishwas (Amendment of Provisions) Act, 2026 (Act 8 of 2026), s. 2 and sch., entry 51(Q) and (S).
[456] Ministry of Road Transport and Highways, Notification S.O. 4100(E), dated July 24, 2026.
[457] SLP (C) Nos. 8412-8413 of 2023, Supreme Court of India, interim order dated November 4, 2025, para. 5.
[458] The Central Motor Vehicles (Fifth Amendment) Rules, 2022, G.S.R. 164(E), dated February 25, 2022, rr. 4 and 6, inserting r. 150A and annexure XIII, pts. 2, 6 and 10.
[459] (2023) 4 SCC 381, para. 62.

Compliance should therefore be assessed by the usefulness of the information supplied as well as the date on which a form was filed.

This matters because an apparently complete file may still omit the central issue. A report may identify the vehicle accurately while saying little about the claimant's work or continuing treatment. Conversely, a minor error may have no bearing on the dispute. Distinguishing the two is part of managing the inquiry. It allows the tribunal to direct attention to what could change the outcome, while giving both sides an opportunity to inspect and question the material obtained.

The cost of that process falls within a household budget already affected by injury. Prinja and colleagues' cohort study in North India followed patients beyond discharge and examined continuing expenditure and financial strain.[460] Their later study across three public hospitals considered out-of-pocket expenditure and productivity loss; road traffic injuries formed the largest injury category in its sample.[461] Neither study measures the cost of tribunal attendance across India. The limited inference relevant here is that discharge from hospital does not necessarily mark the end of financial difficulty. Unnecessary visits to obtain records or attend ineffective hearings can compete with treatment and earning. Better coordination has value for the claimant even before it produces a quicker final award.

B The standard of proof and delayed complaints

The approach to evidence must fit the nature of the proceeding. In *Bimla Devi v. Himachal Road Transport Corporation*, the Supreme Court emphasised a preponderance of probabilities rather than proof beyond reasonable doubt.[462] An accident is unexpected, and the injured person may be in no position to identify every detail of how it happened. The tribunal must still connect the injury with the accident and assess the evidence identifying the vehicle. Its reasons should explain why the account accepted is more probable when the material is considered together.

Treating every gap as fatal would import an unsuitable standard into the civil claim. Treating every allegation as established would be equally unsatisfactory. Assistance with proof is defensible when it enables a sound inquiry, including a fair opportunity for the respondent to challenge the claim.

Ravi v. Badrinarayan concerns a related difficulty: delay in lodging the First Information Report. The Supreme Court rejected the use of that delay as a sufficient basis for defeating the claim on the facts before it.[463] Treatment needs, the victim's condition and family decisions may explain why a complaint was not made immediately. Hospital records, admissions and other evidence may also support the accident account despite the delay. The tribunal should examine those circumstances rather than attach a conclusive effect to the date of the report. An unexplained inconsistency remains relevant, however, and the evidentiary question must be distinguished from the separate statutory issue of limitation. The case protects a realistic inquiry into proof; it does not establish that delay can never matter.

[460] Shankar Prinja, Jagnoor Jagnoor, *et.al.*, "Economic Burden of Hospitalization Due to Injuries in North India: A Cohort Study" 13(7) *International Journal of Environmental Research and Public Health*, Article 673 (2016).
[461] Shankar Prinja, Jagnoor Jagnoor, *et.al.*, "Out-of-Pocket Expenditure and Catastrophic Health Expenditure for Hospitalization Due to Injuries in Public Sector Hospitals in North India" 14(11) *PLOS ONE*, e0224721 (2019).
[462] (2009) 13 SCC 530, para. 15.
[463] (2011) 4 SCC 693, paras. 20-23.

C Assistance before and during the proceeding

Jai Prakash v. National Insurance Co. Ltd. addresses the difficulties of victims and the responsibilities of the police, tribunals and insurers.[464] The active tribunal contemplated by this approach can ask for an existing record, obtain clarification of a medical opinion or require the parties to identify the issue that remains contested. None of this requires it to construct an unsupported factual case for either side. The distinction is between helping the inquiry and deciding it in advance.

Legal assistance should begin before the first hearing where it is needed. A lawyer can help organise records, identify the relevant compensation route and explain the effect of accepting an offer. The legal services framework includes advice as well as assistance in proceedings.[465] A referral that merely directs the victim to another office may leave the immediate problem unresolved. The claimant needs to know what happens next, which documents are essential and who is responsible for supplying them. Support also remains relevant when a person has to decide whether to settle or seek withdrawal of money. Those decisions can affect the eventual value of the remedy as much as the quality of the initial application.

IV Determining Just Compensation

A Consistency and the individual claim

The principles developed by the Supreme Court make compensation more predictable. *Sarla Verma v. Delhi Transport Corporation* clarified the calculation of dependency, including the multiplier and deductions for personal expenses.[466] The Constitution Bench in *National Insurance Co. Ltd. v. Pranay Sethi* addressed future prospects and conventional heads of compensation.[467] These decisions give the parties a common basis for assessing an award or an offer. Their practical benefit is reduced when the facts entered into the calculation receive little explanation. Selecting the correct multiplier cannot repair an income estimate that has no stated basis. Nor can a conventional sum settle a distinct claim for proven future care. Standardisation is most useful when the judgment shows how the accepted evidence fits the calculation and where an individual circumstance requires separate attention.

The disputed points deserve the clearest reasons. A claimant should be able to see why a particular income was adopted, why a deduction was made and how a loss was valued. An insurer should be able to identify the finding it contests. Reproducing pages of earlier judgments achieves little if the award leaves these questions unanswered.

B Earnings without formal records

For a worker paid in cash, the absence of a salary certificate is an ordinary feature of employment, not proof that there were no earnings. In *Ramachandrappa v. Manager, Royal Sundaram Alliance Insurance Co. Ltd.*, the Supreme Court declined an unjustified reduction of a labourer's claimed income, taking account of the circumstances and prevailing realities.[468] The tribunal can draw on the kind of work performed, the place and period of employment, its continuity and available wage information.

[464] (2010) 2 SCC 607, paras. 12-18.
[465] The Legal Services Authorities Act, 1987, *supra* note 8, s. 2(1)(c).
[466] (2009) 6 SCC 121, paras. 19, 30-32 and 42.
[467] (2017) 16 SCC 680.
[468] (2011) 13 SCC 236, paras. 14-15.

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The resulting estimate must be explained and open to challenge. It should not become an identical assumption applied to every occupation or every year.

The same concern about what counts as economic contribution arises in a different form with unpaid household work. *Kirti v. Oriental Insurance Co. Ltd.* recognises the importance of homemaking and discusses notional income and future prospects.[469]

No salary enters the household account for that work, but its loss can change how the household functions and what others must do. A valuation based solely on wages received would overlook this contribution. At the same time, a notional figure needs reasons; calling the work valuable does not answer how the loss should be assessed in the case before the tribunal. The calculation should give economic recognition to the contribution without replacing an inquiry into the relevant circumstances with assumptions about a person's gender or family role.

C Disability and future care

A medical percentage describes an impairment. It does not invariably measure the resulting loss of earning capacity. *Raj Kumar v. Ajay Kumar* requires attention to the injured person's occupation and ability to work when that loss is assessed.[470] Consider a carpenter whose injury seriously restricts fine hand movements. The effect on that person's work may be much greater than a limb impairment figure suggests. Someone doing different work may experience a different employment consequence from a similar injury. These are illustrations of the inquiry required, rather than reported cases. The tribunal must identify the work affected and connect its conclusion to the evidence. A person who continues to earn the same income may nevertheless prove treatment expenses or loss of amenities. Keeping the heads of loss distinct helps avoid both an arbitrary reduction and recovery twice for the same consequence.

The 2026 decision in *R. Halle v. Reliance General Insurance Co. Ltd.* shows why the inquiry must also include cognitive and neurological effects. On the evidence in that case, the Supreme Court assessed functional disability for compensation at one hundred per cent, although the medical assessment of permanent physical disability was lower.[471] The result depended on the claimant's circumstances. Its wider importance is the requirement to examine the abilities actually needed for employment. A focus on visible physical recovery alone may miss limitations that prevent a return to the previous work.

Future care requires another form of evidence. There may be no receipt for a service that will be needed for years after the claim ends. In *Kajal v. Jagdish Chand*, the Supreme Court considered the extensive future needs of a severely injured child, including attendant care.[472] The assessment must explain what care is required, the expected period and the basis for estimating its cost. Assistance currently provided by relatives without charge does not establish that the need has disappeared. Families may be meeting it through their own labour and lost opportunities. Evidence of those needs allows the award to address the injury's continuing consequences rather than stop at the expenses

[469] (2021) 2 SCC 166.
[470] (2011) 1 SCC 343, paras. 8-13.
[471] 2026 INSC 260.
[472] (2020) 4 SCC 413.

already paid. Estimates remain necessary, but they should be tied to the material before the tribunal and considered under distinct heads of compensation.

An error in the original amount claimed should not alone settle the matter. *Nagappa v. Gurudayal Singh* establishes that the claim amount does not impose an absolute ceiling on compensation justified by the evidence.[473] This is important where future needs become clearer during the proceeding. The respondent must have a fair opportunity to address the material supporting the higher award. The principle permits a properly supported valuation; it does not remove the need for proof.

V Insurance Liability and the Position of the Victim

A Coverage and policy disputes

Compulsory third-party insurance helps make compensation less dependent on a vehicle owner's personal resources. Sections 146, 147 and 150 form part of the governing insurance framework.[474] Coverage and responsibility can still be contested. The victim is usually a stranger to the arrangements between insurer, owner and driver, and may have no knowledge of the licence held or the conditions on which the vehicle was insured. Those matters can be legally relevant without being facts the injured person could have controlled.

In *National Insurance Co. Ltd. v. Swaran Singh*, the Supreme Court examined driving licence breaches and the insurer's burden of establishing its defence.[475] The identification of a defective licence does not, by itself, answer every question about liability to a third party. The insured's conduct and the relevant breach require examination. The judgment gives weight to the protective purpose of compulsory insurance while recognising legally available defences. Applying it requires attention to the statute governing the claim, including the setting in which an older decision was delivered. The 2019 legislation placed the settlement procedure in section 149 and the duty to satisfy specified judgments and awards in section 150.[476] Earlier judgments discussing the former section 149 have to be understood in that setting. A protective objective cannot replace the statutory conditions for making a particular person pay.

The practical consequence of getting this wrong falls back on the claimant. An award against the wrong party can generate another round of proceedings before payment becomes possible. Care in identifying the legal basis of liability is therefore part of securing effective compensation, even where it takes time to examine the defence properly.

B Pay and recover and multiple wrongdoers

In *Shamanna v. Divisional Manager, Oriental Insurance Co. Ltd.*, the Supreme Court restored a direction that the insurer pay the claimants and recover from the owner in the circumstances before it.[477] Such an order can protect immediate recovery while leaving the insurer and insured to resolve the financial consequence between them. It remains necessary to explain why the applicable law permits

[473] (2003) 2 SCC 274.
[474] The Motor Vehicles Act, 1988, *supra* note 5, ss. 146, 147 and 150.
[475] (2004) 3 SCC 297, para. 110.
[476] The Motor Vehicles (Amendment) Act, 2019, *supra* note 9, s. 51, substituted ss. 149 and 150.
[477] (2018) 9 SCC 650, paras. 6-13.

that course, from whom recovery is allowed and how it may proceed. Pay and recover is not a universal answer whenever a policy is mentioned in a claim.

Where several wrongdoers cause the same indivisible injury, *Khenyei v. New India Assurance Co. Ltd.* explains the consequences of composite negligence, including the claimant's right of recovery.[478] The allocation between wrongdoers need not always divide the innocent victim's recovery into separate parts.

That question must be distinguished from contributory negligence, which concerns the claimant's own contribution to the harm. The mere involvement of two vehicles does not justify reducing the victim's award. A finding about the claimant's conduct requires its own supporting reasons. Confusing these questions can impose the cost of a dispute between defendants on a person who did not contribute to the accident. Keeping them separate permits the tribunal to address responsibility between the wrongdoers without losing sight of what is recoverable by the claimant.

C Informed settlement

An early offer may spare the claimant expense and uncertainty. It may also be accepted because money is urgently needed, despite an inadequately explained valuation. In *Gohar Mohammed*, the Supreme Court requires scrutiny of the offer with a view to just compensation and settlement with the claimant's consent.[479] The offer should make its main assumptions understandable: the income adopted, the heads allowed and the losses excluded or disputed. Advice should explain the consequence of acceptance before consent is recorded. A claimant remains free to prefer a reasonable settlement to further litigation. The tribunal's scrutiny should protect that choice by making it informed, rather than treating either acceptance or refusal as self-evidently the better course.

VI From an Award to Receipt of Compensation

A Deposit and enforcement

After an award, the claimant's immediate question is when the money will arrive. Section 168(3) requires deposit within thirty days of announcement of the award. Section 171 concerns interest, while section 174 supplies a recovery route through a certificate to the Collector.[480] An accessible order should identify the payer, the amount, the relevant interest and the compliance date. It should also explain how the claimant can bring non-payment to the tribunal's attention. These details connect the finding of liability with the action required to give it effect.

An appellate proceeding may change what can be paid or released. The right of appeal under section 173 does not answer that question without attention to the orders made in the proceeding.[481] A filed appeal and an operative stay should not be treated as the same thing. Where only part of an award is disputed, an appropriate order may be sought concerning the undisputed amount. The parties need precision about the direction that currently governs compliance. Otherwise, uncertainty itself can prolong the period in which the victim receives nothing usable, despite a decision recognising the loss.

[478] (2015) 9 SCC 273, para. 22.
[479] *Gohar Mohammed*, *supra* note 16, para. 62(ix).
[480] The Motor Vehicles Act, 1988, *supra* note 5, ss. 168(3), 171 and 174.
[481] The Motor Vehicles Act, 1988, *supra* note 5, s. 173.

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The claimant should not have to discover the recovery machinery only after payment has failed. Continuing legal assistance and a scheduled compliance review would make the next step clearer. They would also allow the tribunal to distinguish actual default from a restriction imposed by an appellate court.

B Disbursement and the claimant's needs

Deposit into the tribunal is not always the end of the difficulty. *A.V. Padma v. R. Venugopal* criticises the mechanical placement of compensation in long-term deposits without proper consideration of the claimants' circumstances and needs.[482] Protective arrangements can be justified, especially for minors or where exploitation presents a demonstrated risk. They require reasons connected with the beneficiary. A restriction intended to protect money may work against the purpose of compensation if it prevents necessary spending on treatment, housing or a viable livelihood. An application for release should therefore receive an examination of the need asserted and the protection actually required. The fact that a person has suffered injury or bereavement does not alone establish an inability to make financial decisions. Equally, a real risk should not be ignored merely because an award has been made in the claimant's favour.

The WHO's report on post-crash response places care, rehabilitation and legal support within the wider needs arising from road crashes.[483] This perspective helps explain why the timing of access matters. A sum released after the period of urgent treatment may perform a different practical role from the same sum available when that treatment is needed. Deposit and authorised release should therefore be examined separately when assessing whether the compensation process has provided relief.

VII Findings and Proposals for Reform

A The limits of protection at a single stage

The legal analysis shows why success at one stage cannot stand in for the effectiveness of the remedy as a whole. A realistic standard of accident proof helps a claim reach decision, but cannot correct an unsupported income estimate. A properly assessed award may still require enforcement. An insurer's deposit may leave the beneficiary unable to meet immediate needs if withdrawal is restricted without examining the circumstances. The reported decisions establish that these problems can arise. They do not justify a claim that all tribunals experience them to the same extent. The conclusion is about the connection between duties: the institutions responsible for a claim should be required to address the point at which progress has stopped, rather than assume that completion of an earlier step has secured compensation.

There is also a reason to be cautious about proposing another general deadline. The Law Commission's One Hundred and Forty-ninth Report examined deficiencies in the 1988 Act long before the present reforms.[484] The reporting duties, judicial directions and 2026 disposal provision have since

[482] (2012) 3 SCC 378, paras. 4-8.
[483] World Health Organization, "Post-Crash Response: Supporting Those Affected by Road Traffic Crashes" (Geneva, 2016).
[484] Law Commission of India, "Removing Certain Deficiencies in the Motor Vehicles Act, 1988 (No. 59 of 1988)", Report No. 149 (February, 1994).

given the framework further procedural content. A useful proposal must address what those arrangements leave unresolved.

B Identifying the actual dispute early

The tribunal should begin its substantive examination by identifying the issues genuinely contested and the essential material still missing. A record held by a hospital or registration authority should be distinguished from evidence that a party has yet to produce. The responsible institution or person can then be identified and a reasonable date fixed. The claimant should receive a plain explanation of the next step. This approach builds on the existing reporting duties and keeps the inquiry directed to matters that could affect the decision. It also provides a basis for explaining later delay. If the same medical report has been sought repeatedly, the record should reveal that obstacle and the efforts made to resolve it. If an apparent defect has no bearing on the dispute, the proceeding should not be held up merely to achieve a formally complete file. Both parties must retain access to the material received and an opportunity to question it.

The twelve-month disposal endeavour needs that kind of practical support. Section 168(4) already requires written reasons when the application is not disposed of within the period.[485] Reasons should identify the stage and cause of delay, allowing administrative review to recognise recurring difficulties with service, medical evidence or insurer responses. Review should also consider the resources available. A target that encourages hurried rejection would defeat the purpose of the provision. Any sanction requires a lawful basis and a fair opportunity to respond; delay alone should not invite an improvised penalty.

C Explaining valuation and assisting settlement

The award should show how the tribunal resolved the disputed valuation. An estimate of cash earnings needs a stated factual basis. An assessment of earning incapacity needs a connection between the impairment, the claimant's work and the evidence of what remains possible. Future expenditure should be distinguished from costs already incurred. A calculation sheet can help reveal an omitted head or an arithmetic error, provided it does not become a rigid tariff for unlike circumstances. The parties should be able to challenge the assumptions entered into it. This would make the existing principles more accessible without asking claimants to understand a series of judgments before they can read their own award.

Settlement requires assistance of a different kind. Before consent is recorded, the claimant should understand the main disputed losses and the effect of acceptance. A lawyer or appropriately supervised legal services provider can explain the offer without directing the decision. Immediate need does not make acceptance invalid, but it gives particular importance to a comprehensible valuation. Refusal should not, by itself, be treated as obstruction. The assistance should remain available through payment and disbursement, where further decisions may affect whether the award provides practical relief.

[485] The Jan Vishwas (Amendment of Provisions) Act, 2026, *supra* note 12, sch., entry 51(S), inserting s. 168(4).

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D Supervising payment after the award

The principal proposal of this paper is to treat payment compliance as a supervised continuation of the successful claim. The tribunal should fix a review date when it makes the award, require proof of deposit and identify any stay affecting payment or release. If compliance has failed, the record should explain what remains unpaid and the available next step, including the statutory recovery route where appropriate. This would reduce the burden of discovering a separate procedure after entitlement has already been proved. It would not permit the tribunal to disregard an appellate order or recover money without the required process. Its purpose is to keep responsibility visible: someone must check that the direction to pay has been acted upon, and the claimant must know how an unresolved default will be addressed. The merits and the enforcement stages would remain legally distinct while being managed as parts of the same effort to secure compensation.

Disbursement should then respond to the beneficiary's circumstances. Immediate treatment, rehabilitation, dependants and livelihood expenditure may require access to part or all of the amount. Where restrictions are imposed, the order should explain their purpose and the route for seeking necessary release. Administrative records should distinguish the award date from deposit and authorised release. That information could support later research into where delay occurs, while protecting personal and medical details. Counting a disposed petition as compensation received would conceal precisely the gap examined in this paper.

VIII Conclusion

The Indian framework gives motor accident victims a specialised forum, substantial judicial protection in assessing claims and statutory routes towards payment. The weakness examined here is the connection between those protections. A claimant's ability to prove the accident does not ensure a fair estimate of earnings, and a fair estimate does not ensure that money becomes available when it is needed. The authorities support assistance that improves the evidence, reasons that make valuation understandable and disbursement decisions responsive to actual circumstances. They also require a legally justified finding against the person asked to pay and a fair opportunity to contest the claim. Effective access to compensation depends on maintaining both parts of that inquiry.

The 2026 amendments make supervision of delay an immediate part of the legal discussion. Further reform should strengthen performance of existing duties and clarify responsibility when progress stops. The tribunal's practical concern should continue until compliance and appropriate disbursement have been verified. That is the point at which an award begins to function as relief for the injured person or bereaved family.

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