

Constitutionalizing Student Mental Health: A Psycho-legal Analysis of Sukdeb Saha (2025) and the Mental Healthcare Amendment Bill, 2023

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ABSTRACT

The growing incidence of student suicides and psychological distress in India has brought renewed attention to the role of educational institutions in safeguarding mental health. This paper examines the evolving legal recognition of mental health as a fundamental right through the Supreme Court's decision in Sukdeb Saha v. State of Andhra Pradesh (2025), which held that mental wellbeing is an integral component of the Right to Life under Article 21 of the Constitution. The judgment imposed proactive mental health obligations on educational institutions, marking a significant shift from individual-centric to institutional accountability. The paper further analyses the Mental Healthcare (Amendment) Bill, 2023, which proposes the insertion of a dedicated chapter on the responsibilities of educational institutions, thereby translating judicial principles into statutory duties. Using an interdisciplinary approach, the study integrates psychological research on academic stress, suicide prevention, and institutional mental health frameworks with constitutional and statutory analysis. It argues that the convergence of judicial mandates and legislative reform reflects an emerging rights-based model of student mental health protection in India. The paper also critically evaluates implementation challenges, ethical considerations, and the capacity of institutions to meet these obligations, offering recommendations for harmonising legal standards with psychological best practices.

Keywords: Student Mental Health, Sukdeb Saha, Mental Healthcare Amendment Bill, Article 21, Proactive Mental Health

INTRODUCTION

Mental health issues among students have increasingly become a pressing public health and human rights concern in India. Rising academic competition, high-stakes examinations, institutional expectations, and inadequate psychological support have led to escalating levels of stress, anxiety, depression, and suicide within the student population. Data from the National

Crime Records Bureau (NCRB, 2022) reveal that student suicides account for a substantial share of total suicides in the country, underscoring the shortcomings of current preventive mechanisms within educational institutions. Historically, Indian legal frameworks have treated mental health largely as a medical or welfare issue, assigning responsibility primarily to individuals rather than institutions. However, recent constitutional and legislative developments indicate a paradigm shift recognizing mental health as both a constitutional entitlement and an institutional duty.

The Supreme Court's ruling in *Sukdeb Saha v. State of Andhra Pradesh* (2025) stands as a transformative step in this trajectory. The Court declared psychological well-being an integral aspect of the Right to Life under Article 21 of the Constitution, thereby linking mental health to dignity, autonomy, and humane treatment. It further mandated educational institutions to adopt proactive measures for safeguarding student mental health, recognizing that systemic practices and institutional conditions often generate psychological distress. This judgment reframes mental health as a matter of collective institutional responsibility rather than personal deficiency.

Concurrently, the Mental Healthcare (Amendment) Bill, 2023 proposes the inclusion of specific provisions in the Mental Healthcare Act, 2017 that assign explicit responsibilities to educational institutions. These include mandating access to mental health services, establishing referral and confidentiality protocols, and embedding mental health support structures within campus governance systems. Together, these reforms mark a growing acknowledgment that laws must address structural determinants of psychological well-being in educational settings.

This paper examines the evolving intersection between constitutional law, mental health legislation, and psychological research in India. It argues that integrating *Sukdeb Saha* with the proposed Amendment Bill represents a broader shift from reactive, individualized responses toward a rights-based, institutionally grounded model. Drawing upon psychological literature on academic stress and suicide prevention, the study evaluates the feasibility, ethics, and effectiveness of imposing legal duties on educational institutions and assesses whether these legal developments can genuinely translate constitutional ideals into improved student mental health outcomes.

LITERATURE REVIEW

1. Mental Health as a Legal and Human Rights Concern

The framing of mental health within a human rights discourse has gained international momentum. Global legal instruments, including the *International Covenant on Economic, Social and Cultural Rights* (United Nations, 1966), enshrine the right to the highest attainable standard of mental health, placing the onus on the state to create supportive systems. Legal theorists emphasize that safeguarding mental health requires reforming social and institutional

environments that contribute to distress (Gostin & Gable, 2004). In India, judicial interpretation of Article 21 has expansively incorporated dignity, privacy, and humane living as integral to life and liberty (Pillai, 2020). Despite this, judicial focus historically centered on mental health within custodial or clinical contexts, neglecting the educational sphere.

2. Psychological Insights into Student Distress and Institutional Stress

Psychological evidence consistently underscores that academic competition, fear of failure, and parental and institutional pressures are major predictors of student distress (Deb, Strodl, & Sun, 2015). Indian studies show that students preparing for competitive examinations experience significantly higher anxiety and depression compared to the general student population (Kumar & Dixit, 2014). Research in suicide prevention highlights that supportive institutional climates and access to counselling can drastically reduce risk (Tishler & Reiss, 2009). The “whole-institution” model of mental health proposes that educational institutions should serve as protective rather than neutral environments (Weare & Nind, 2011). This reinforces the argument that mental health duties must be structurally embedded within institutions that influence student well-being.

3. Mental Healthcare Act, 2017

The Mental Healthcare Act, 2017 represented a significant milestone by legally recognising the right to mental healthcare and aligning with global human rights standards (Duffy & Kelly, 2017). Nevertheless, its focus remains primarily clinical, outlining obligations for state and healthcare providers rather than educational institutions (Kala, 2018). This omission has become increasingly problematic amid rising student suicides, as institutional negligence often goes unchallenged. Without explicit statutory accountability, educational institutions have largely treated mental health initiatives as optional.

4. The *Sukdeb Saha v. State of Andhra Pradesh* (2025)

The 2025 *Sukdeb Saha* ruling is widely recognised as a watershed in Indian mental health jurisprudence. By constitutionalizing mental health as a core component of Article 21, the Supreme Court imposed affirmative obligations on educational institutions. Commentators view this as a transition from reactive adjudication to preventive constitutional governance (Bhatia, 2025). The Court’s directives – which include counselling services, sensitisation programmes, and institutional safeguards – align closely with best practices in psychological research. The judgment has been compared to the *Vishaka* precedent on workplace harassment for its approach to judicial gap-filling in the face of legislative inaction (Sathe, 2002).

5. The Mental Healthcare (Amendment) Bill, 2023

The 2023 Amendment Bill advances the jurisprudential foundations of *Sukdeb Saha* by embedding the Court's recommendations into statutory language. By defining specific obligations for schools and colleges, it seeks to establish uniform and enforceable standards. Scholars argue that legislative codification is vital for accountability and sustainability (Rao, 2024). However, from a psychological ethics perspective, the Bill raises implementation concerns related to confidentiality, excessive monitoring, and the risk of coercive compliance, reinforcing the need for psychologically informed legal design.

6. Research Gap

Existing literature rarely fuses constitutional law and psychological science in the analysis of educational mental health. While significant work exists independently in both fields, few studies explore how legal rights translate into institutional practices that shape student mental well-being. The present study bridges this gap through an interdisciplinary analysis integrating jurisprudence, legislation, and psychological evidence.

ANALYSIS AND DISCUSSION

1. Constitutionalising Mental Health: From Protection to Obligation

The *Sukdeb Saha* decision transforms Article 21 from a negative right protecting individuals from state interference into a positive right compelling proactive institutional support. By declaring mental health a constitutional necessity, the Court recognised that educational environments have the power to either protect or endanger psychological integrity. This aligns closely with psychological research demonstrating that distress often arises from systemic pressures such as competitive environments and punitive cultures. In doing so, the Court reframed student suffering as a failure of rights protection rather than individual weakness.

2. Systemic Causation and Institutional Responsibility

A major conceptual development in *Sukdeb Saha* was the acknowledgment that institutional and structural factors – not just personal vulnerabilities – contribute to mental harm. This reflects ecological and systems-based psychological frameworks that situate distress within social contexts. The Court's recommended guidelines – counselling, training, and support systems – mirror empirically validated prevention strategies. However, translating flexible psychological insights into rigid legal mandates involves inherent risks. Laws that enforce standardisation may lead to token compliance without ensuring quality or trust in psychological services.

3. Judicial Guidelines: Scope and Limitations

While judicial interventions provide urgent relief, they face structural limitations. Court-issued norms like those in *Sukdeb Saha* depend on voluntary institutional engagement and lack consistent monitoring mechanisms. Psychologically, half-hearted implementation – such as appointing counsellors without ensuring confidentiality – can worsen stigma or deter help-seeking. Thus, sustained impact requires legislative follow-through supported by administrative capacity.

4. Legislative Codification through the Mental Healthcare (Amendment) Bill, 2023

The Amendment Bill aims to overcome these challenges by imposing clear legislative duties. Unlike judicial directions, statutory measures can ensure consistency, oversight, and enforceability. It operationalises constitutional rights by mandating institutional access to care, referral procedures, and confidentiality standards. Together, the *Sukdeb Saha* judgment and the Amendment Bill form a two-tiered system: constitutional recognition of mental health as a right, alongside statutory operationalisation of institutional responsibility. However, the Bill's silence on issues of funding, enforcement, and personnel training could undermine its transformative potential if not properly addressed.

5. Ethical Dilemmas: Balancing Support and Surveillance

The increasing legal requirement for institutions to monitor student well-being raises crucial ethical questions. Overreliance on surveillance-based mechanisms – such as mandatory disclosure or data tracking – risks undermining student autonomy and therapeutic trust. Ethical psychology stresses confidentiality and voluntary participation as essential to effective care. Both the *Sukdeb Saha* guidelines and the Amendment Bill affirm dignity and privacy, yet they lack comprehensive detailing on protecting these norms in practice. Harmonising legal duties with psychological ethics thus remains a key challenge.

6. Implementation and Equity Challenges

India's socio-economic diversity complicates uniform implementation. Resource-rich private institutions may easily fulfill legal obligations, while government and rural schools often remain under-resourced. Disparities in access and quality risk transforming a constitutional right into an elitist privilege. To achieve real equity, the state must provide financial and institutional support mechanisms to enable universal compliance.

7. Building a Psychology-Informed Legal Framework

The convergence of constitutional recognition and legislative reform represents a shift toward preventive constitutionalism – an approach aiming to prevent harm rather than merely redress it. However, this vision can succeed only if grounded in empirical psychological knowledge. Institutional performance should be assessed not merely by policy adoption but by outcome indicators such as student trust, help-seeking behaviour, and perceived support. Collaboration between legal architects and mental health professionals is essential to ensure effective and ethically sound implementation.

CONCLUSION

India's emerging mental health jurisprudence signals a move toward recognising psychological well-being as a core constitutional value. The *Sukdeb Saha* ruling and the proposed Mental Healthcare (Amendment) Bill, 2023 together transition mental health governance from individual responsibility to institutional accountability. Yet, the long-term success of this framework depends on effective implementation, resource allocation, and ethically guided interdisciplinary collaboration. Aligning legal duty with psychological evidence is critical to translating constitutional rights into meaningful well-being for every student.

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